# APPLICATION AND BASELINE MONITORING REPORT
# FOR INDUSTRIAL WASTEWATER DISCHARGE PERMIT

Please submit the following information by ____ , or at least 90 days prior to discharge of wastewater to the public sanitary sewer system.

New sources * must complete Parts A - F and Part G (if non categorical) or Part H (if categorical). New sources may provide estimates of the information requested in the application so long as calculations and methodologies are provided. Existing sources * must submit all information required by Parts A - F and either Part G or Part H.

Please refer to the District's current Rules and Regulations for local limits, standards, and definitions governing the discharge of industrial and process wastewater to the public sewer system.

If assistance is needed in completing the application, please contact the District at (503) 557-2833. Send the application to:

Industrial Pretreatment
Clackamas County Water Environment Services
15941 S. Agnes Ave., Bldg. B
Oregon City, OR 97045

* New Source and Existing Source are defined in Section 2.1 of the District's Rules and Regulations.

**Clackamas County**
**Service District #1**
15941 S. Agnes Ave.
Oregon City, Oregon 97045
**(503) 557-2833**

# Part A - Application

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT**

SECTION I. APPLICATION

DISTRICT USE ONLY

Date Application Received

Return the completed application by: _____

(Further instructions: See reverse side).

A9a. Permit No.

A1. Applicant Business Name _____

A9b. Permit No.

A2. a. Address of premises discharging wastewater:

SIC Nos. _____

Street _____

City _____ Zip _____

b. SIC Nos. _____

c. Assessor's Map and Tax Lot Number _____

Basin

A3. Business Address (if different than above)

a. Street _____

City _____ Zip _____

b. Mailing _____

City _____ State _____ Zip _____

A4. Chief Business Official

Name _____ Title _____

Mailing Address _____ City _____ State _____ Zip _____

A5. Person to be contacted about this application

Name _____

A6. Person to be contacted in case of emergency.

Name _____ Title _____ Phone _____

Day Phone _____ Night Phone _____

A7. Type of Application

A. ☐ Wastewater discharge is other than domestic or sanitary.

B. ☐ Wastewater discharge exceeds 10,000 gallons per day flow.

C. ☐ Both of the above.

A8. CERTIFICATION: I certify that the information above and on the following pages are true and correct to the best of my knowledge.

| Print Name | Title | Signature | Date |
|---|---|---|---|

INSTRUCTIONS FOR COMPLETING PART A

## SECTION 1. APPLICATION

Type or print the information requested.

A1. Applicant Business Name--Enter the name or title of your business.

A2a. Address of Premise Discharging Wastewater--Enter the full street address of the building or premise which is producing the wastewater pertinent to this Application.

A2b. Standard Identification Classification code number--include all numbers that apply to business.

A2c. Include the Assessor's Tax Map Number and Tax Lot Numbers that apply.

A3. Business Address--Enter the business street address and the full mailing address.

A4. Chief Business Official--Enter the name, title, and full mailing address of the Applicant's Chief Business Official in the home office. (This is often not the same address as given in A3).

A5. Person to be contacted about this Application--Give the name of the person who is thoroughly familiar with the facts reported on these forms and who can be contacted by the staff of the District.

A6. Person to be contacted in case of an Emergency--Give the name, title and telephone number(s) of the responsible person who can be contacted in case of an emergency (e.g. spilling of prohibited substance).

A7. Type of Application:

A. Indicated if Wastewater discharged contains anything other than domestic or sanitary wastes (i.e. floor drains, wash down drains, batch drains, process drains, etc.).

B. Indicate if wastewater discharge is going to be more than 10,000 gallons per day on a regular basis.

C. Indicate here if both of the above characteristics and flows apply.

A8. Certification--The Application must be signed and dated by an officer, employee, or other agent of the business who has legal authority to bind the Applicant business. Also print or type the name and title of the person signing the Application.

# Part B - Business Description

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT**

_____

BUSINESS NAME

| PURPOSE - The business description is primarily used to determine the substances which may enter into the wastewater discharge from the business activity. | District Use: Permit No._____ |
|---|---|

B1. BUSINESS ACTIVITY (Complete a separate Part B for each major business activity on premises).

Activity:_____ SIC Nos. _____

(a) PRODUCT:

| TYPE OF PRODUCTS (Brand Names) | QUANTTITIES | | | | | |
|---|---|---|---|---|---|---|
| | PAST CALENDAR YEAR | | | EST. THIS CALENDAR YR. | | |
| | Amts. Per Day | | Daily | Amts. Per Day | | Daily |
| | Avg. | Max. | Units | Avg. | Max. | Units |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

(b) DESCRIPTION - Describe the waste water generating operations. Indicate variations in production and operations during the year. (Use additional sheets as necessary).

(c) SUBSTANCES DISCHARGED - Give common and technical names of each major raw material and product that may be discharged to the sewer. Briefly describe the physical and chemical properties of each substance and product.

| NAME | DESCRIPTION |
|---|---|
| | |
| | |
| | |
| | |

B2. DISCHARGE PERIOD

(a) Hours/Day Operated:

M_____ T_____ W_____ Th_____ F_____ Sat_____ Sun_____

(b) Time Duration of Discharge:

M_____ T_____ W_____ Th_____ F_____ Sat_____ Sun_____

B3. VARIATION OF OPERATION

Indicate whether the busines activity is:

☐ Continuous through the year, or

☐ Seasonal - Circle the months of the year during which discharge occurs:

J F M A M J J A S O N D

COMMENTS:

_____

B4. OTHER LIQUID WASTES - List and types and volume of liquid waste or sludges removed from the premises by means other than public sewers.

| DESCRIPTION | VOLUME (Gals./Mo.) | REMOVED BY (Name and Address) |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

INSTRUCTIONS FOR COMPLETING PART B:

General Instructions - Type or print the information. A separate Part B is to be completed for each major business activity. Examples of major business activities are: Paint manufacturing, metal plating, food canning, etc.

B1. Business Activity-Describe the principal activity on the premise. For the purpose of completing this Part, an activity is a major business class of manufacture (see examples above). Enter the Standard Industrial Classification (SIC) Code Number, as found in the 1972 Edition of Standard Industrial Classification Manual prepared by the Executive Office of the President, Office of Management and Budget, which is available from the Government Printing Office at Washington, D.C., or San Francisco, California. DO NOT USE PREVIOUS EDITIONS OF THE MANUAL.! Copies are also available for examination at most public libraries.

a) Product - List the types of products, giving the common or brand name and the proper or scientific name. Enter from your records the average and maximum amounts produced daily for the activity for the previous calendar year, and the estimated daily production for this calendar year. Attach additional pages if necessary.

b) Description - Describe the wastewater generating process occurring on the premises, including any seasonal variation in wastewater discharge volumes, plant operations, raw materials, and chemicals used in process and/or production.

c) SUBSTANCE DISCHARGED - Give common (brand names) and technical names (chemical, scientific, or proper names) of each raw material and product that may be discharged to the sewer. Briefly describe the physical, (e.g. color) and chemical, (e.g. reacts with water) properties of each substance.

B2. Discharge Period:

A. Enter the hours of the day for each day, during which waste from this Business Activity will be discharged to the sewer: e.g. from 0600 to 1700 hours (not 6 a.m. to 5 p.m.).

B. Enter the time and duration of discharge other than continuous flows. (15 minutes every hour).

B3. Variation in Operation:

Indicate whether the business activity is continuous throughout the year or if it is seasonal. If the activity is seasonal, circle the months of the year during which discharge occurs. Make any comments you feel are required to describe the variation in operation of your business activity.

B4. Other Liquid Wastes:

List the type and volume of liquid wastes removed from the premises other than by the community sewer. Under description, indicate the types of materials (scientific and common names) in the waste. Also, in the column headed “REMOVED BY,” write the name and address of the company who hauls this material. If you do your own removal and disposal, indicate by writing your “Business Name.”

# PART C - Schematic Flow Diagram

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT**

_____
Business Name

| | |
|---|---|
| Purpose - The Schematic Flow Diagram shows the flow pattern of products through the facility and the various sources of wastewater. | District Use:<br>Permit No. _____ |

Schematic Flow Diagram - For each major activity in which wastewater in generated, draw a diagram of the flow of materials and water from start to completed project, showing all unit processes generating wastewater. Number each unit process having wastewater discharges to the community sewer. Use these numbers when showing this unit process in the building layout in Part D.

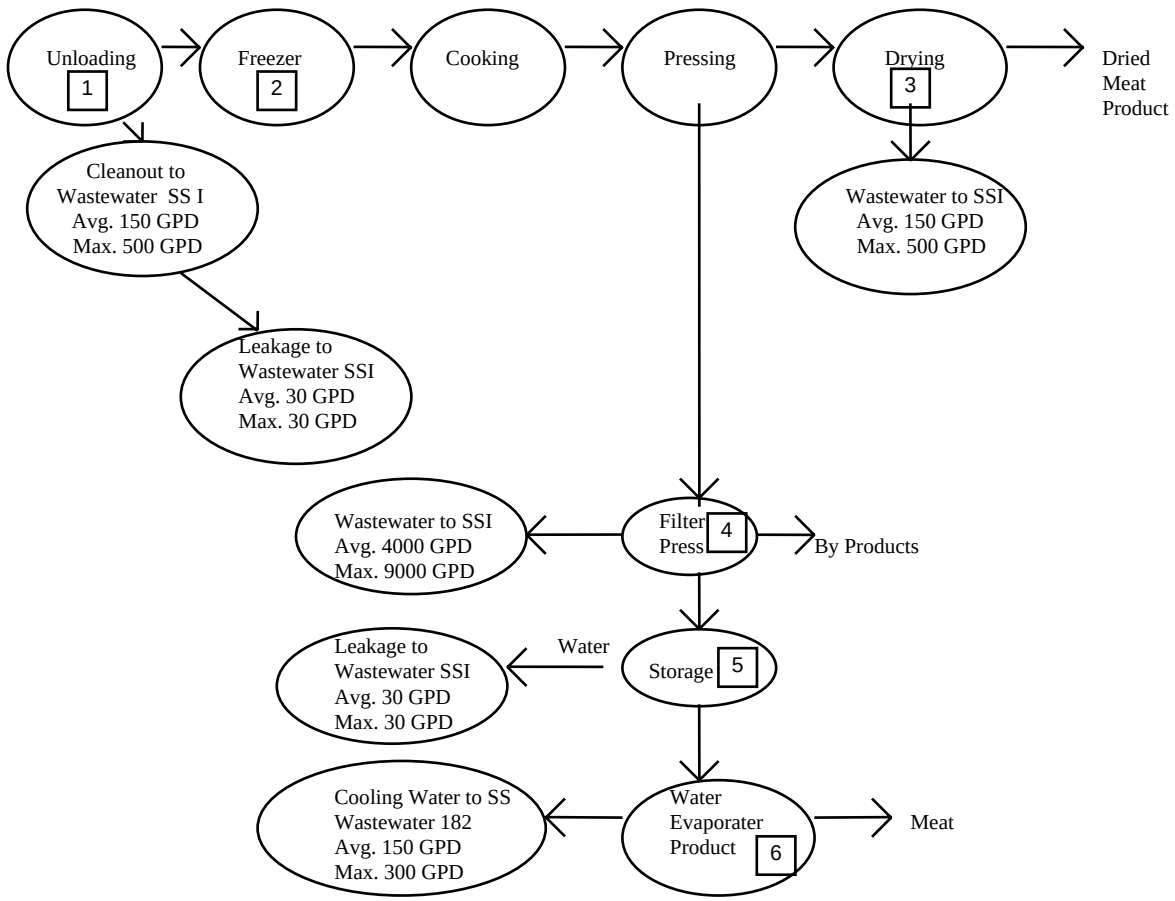
INSTRUCTIONS FOR COMPLETING PART C

General Instructions - Type or print the information. A separate Part C should be completed for each major business activity described Part B.

A line drawing (schematic flow diagram) of each major business activity described in Part B is to be completed in the space below or drawn in on an attached sheet of paper (all sheets should be letter size). Number each process which generates wastewater using the same numbering as in the building layout or plant site plan shown in Part D. An example of drawing required is shown below in Figure 1.

To determine your average daily volume and maximum daily volume of wastewater flow you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measurable.

**FIGURE 1**
ACTIVITY : Meat Processing



# PART D - Building Layout

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT**

_____

Business Name

| | |
|---|---|
| Purpose - The building layout shows the wastewater generating operations which contribute to each side sewer. | District Use:<br>Permit No. _____ |

Building Layout - Draw to scale the location of each building on the premises. Show location of all water meters, storm drains, numbered unit processes (from Part C), community sewers and each side sewer connected to the community sewers. Number each side sewer and show possible sampling locations.

An attached blueprint or drawing of the facilities showing the above items may be substituted for a drawing on this sheet.

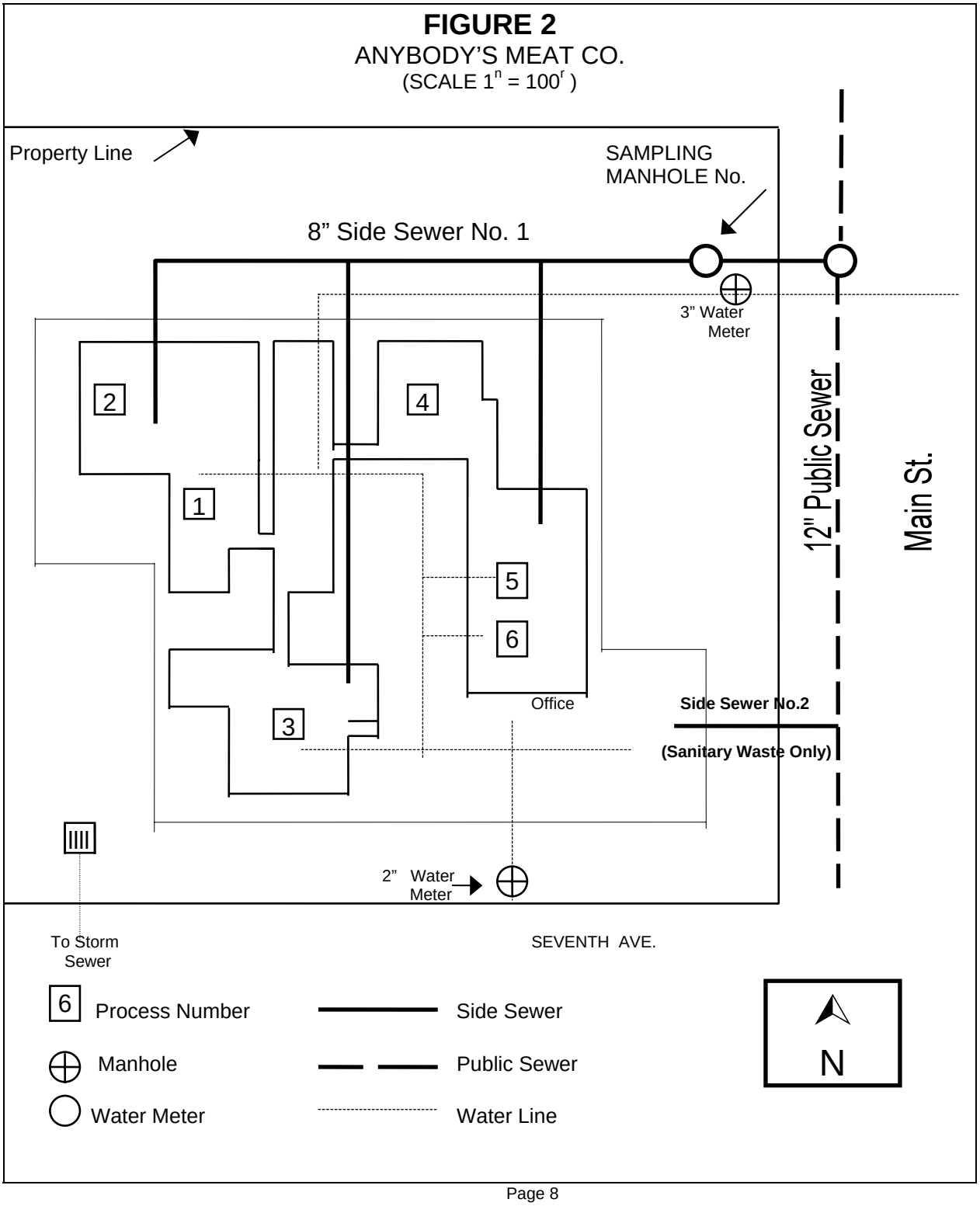
INSTRUCTIONS FOR COMPLETING PART D
General Instructions - Type or print the information.

Building Layout - A building layout or plant site plan of the premise is required to complete Part D. Approved building plans may be substituted for Part D. An arrow showing North as well as the map scale must be shown. The location of each existing and proposed sampling manhole and side sewer must be clearly identified as well as all sanitary wastewater drainage plumbing. Number each unit process discharging wastewater to the community sewer. Use the same numbering system shown in Part C (Schematic Flow Diagram). An example of the drawing required is shown below in Figure 2.

**FIGURE 2**

ANYBODY'S MEAT CO.

(SCALE $1^n = 100^r$ )



_____
Business Name

# PART E - WATER SOURCE & USE

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT**

| PURPOSE – The Water Source and Use Information will enable the District to Determine the Volumes and Sources of wastewate discharged to the District's Sewer. | District Use:<br>Permit No. _____ |
|---|---|

E1. Water use and distribution - Estimate the average quantity of water received and wastewater discharged daily.

| | SUPPLY FROM | | | DISCHARGE TO | | |
|---|---|---|---|---|---|---|
| | Water District | Other | | Comm. Sewer | Other | |
| Water Used For: | gal/day | gal/day | source | gal/day | gal/day | disch. to |
| Sanitary | | | | | | |
| Processes | | | | | | |
| Boiler | | | | | | |
| Cooling | | | | | | |
| Washing | | | | | | |
| Irrigation | | | | | | |
| Other (Describe) | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL | | | | | | |

DESCRIBE

E2. Number of Employees TOTAL_____

| | OFFICE | | PRODUCTION (number of employees per shift) | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | Day Shift | | Swing Shift | | Night Shift | |
| | No. | Hours | No. | Hours | No. | Hours | No. | Hours |
| Week Day | | to | | to | | to | | to |
| Saturday | | to | | to | | to | | to |
| Sunday | | to | | to | | to | | to |
| Seasonal | | to | | to | | to | | to |

E3. Source of Wastewater Discharged

| Water Meter Number | Use Code | Percent (%) Discharged to: | | | Total % Discharged to all side sewers |
|---|---|---|---|---|---|
| | | No. 1 | No. 2 | No. 3 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

COMMENTS

INSTRUCTIONS FOR COMPLETING PART E

General Instructions - Type or print the information. Part E is to be completed by all dischargers who require a permit. (Wastewater Strength and Flow Estimations).

PROVIDE CALCULATIONS TO SUPPORT ALL FIGURES IN TABLES E1 AND E3.

E1. Water Use and Disposition - Estimate the water received and wastewater discharged in gallons per day for the preceding year. For the water that is received from Water District services or discharged to other than community sanitary sewers, enter the appropriate letter in the column headed “Source” or “Discharge To.”

E2. Number of Employees - Enter the average number of office and production employees at the premises daily during the preceding year. If there is more than one shift per day, enter the average number of employees per shift and the duration. A row is provided for seasonal periods, if applicable.

E3. Source of Wastewater Discharged - Item E3 shows the percentage of source water on each water meter used for computing the sewage disposal service charge.

Step 1. Enter the number of each meter serving the premise.

Step 2. For each meter enter the percentage of metered water discharged to each side sewer. If you have more than one side sewer, SHOW ON A SEPARATE PAGE THE METHOD AND CALCULATIONS USED TO DETERMINE THE PROPORTIONING to the side sewers.

Step 3. Enter the total percentage discharged to all side sewers for each water meter by adding the figures in each side sewer column.

Step 4. Enter the appropriate use code as described below in the use code column.

METER USE CODES
I - Irrigation
S - Sanitary
F - Sewage Flow
W - Well
C - Cooling Tower
B - Boiler
X - Product
T - Time Elapse

# Part F - Side Sewer Discharge

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT**

_____
Business Name

| | |
|---|---|
| Purpose - The side sewer discharge information will identify for the District the variation in flow rate and the type of constituents and characteristics of the discharge for each sewer. | District Use:<br>Permit No:_____<br>Sampling Location: _____ |

F1. Side Sewer No. _____ (From Part D)

F2. Wastewater Flow Rate

| PEAK HOURLY | MAXIMUM DAILY | ANNUAL DAILY AVG. | IF OPERATIONS ARE SEASONAL AVERAGE DAILY (GALLONS/DAY) | |
|---|---|---|---|---|
| GALLONS/MIN | GALLONS/DAY | GALLONS/DAY | Seasonal Min. | Seasonal Max. |
| | | | | |

F3. IF BATCH DISCHARGE INDICATE:

a. Number of batch discharges: _____ per month.
b. Time of batch discharges: _____ (days of week) at _____ (hours of day)
c. Average quantity per batch: _____ gallons
d. Flow rate: _____

F4. WASTEWATER CONSTITUENTS - If any of the following constituents, characteristics or substances is or can be present in your wastewater discharge as a result of your operations, indicate by placing an x in the open box.

| | CONSTITUENTS |
|---|---|
| | Aluminum |
| | Antimony |
| | Arsenic |
| | Barium |
| | Beryllium |
| | Boron |
| | Bromide |
| | Cadmium |
| | Chromium |
| | Cobalt |
| | Copper |
| | |

| | CONSTITUENTS |
|---|---|
| | Cyanide |
| | Flouride |
| | Formaldehyde |
| | Lead |
| | Mercury |
| | Molybdenum |
| | Nickel |
| | Phenols |
| | Radioactivity |
| | Selenium |
| | Silver |
| | |

| | CONSTITUENTS |
|---|---|
| | Solvents |
| | Sulfate |
| | Sulfide |
| | Sulfite |
| | Titanium |
| | Tin |
| | Vanadium |
| | Zinc |
| | Or any of those items on the EPA Priority Pollutant List as shown on the reverse side. |

At the discretion of the District, it may require that an Engineer be obtained to perform a treatability study to be submitted with the application.

Identify the constituent chemical compounds or elements from the EPA Priority Pollutant List on the reverse side:

Other constituents, chemicals or compounds:

INSTRUCTIONS FOR COMPLETING PART F

General Instructions - Part F is to be completed by all busineses who require Wastewater Strength Determination. Use a separate sheet for each side sewer that discharges wastewater to a community sewer. (NOTE: A side sewer is a sewer conveying the wastewater of a discharger from a building or structure to a community sewer).

F1. Side Sewer No. - Enter the side sewer number for which this sheet of Part F has been completed. Use the same number as shown on Part D.

F2. Wastewater Flow Rate - Estimate the peak hourly discharge rates from the premise (i.e. the quantity which might be discharged during any one hour). The maximum daily discharge rate is the greatest flow which might be discharged in any one work day. The annual daily average is the flow for an average workday taken over one year of operation. A season is defined as a period of one month or longer. Hourly and daily water supply meter readings may be used, provided the filling and discharge of storage tanks, process vats, etc., are taken into consideration.

F3. Batch Discharge -A batch discharge is one which results from the draining of storage tanks or process tanks; intermittent boiler blowdown, etc., to the side sewer.

A. Enter the number of batch discharges per month during the operating season of maximum flow.

B. Enter the days of the week the discharge occurs and the times of the day the discharge usually occurs.

C. Enter the average gallons discharged during each batch discharge operation.

D. Enter the rate of flow in the side sewer from the batch discharges.

(i.e. Rate of flow from the batch discharge = $\frac{\text{Number of gallons in batch discharge}}{\text{duration for a single discharge}}$ )

F4. Wastewater Constituents - Indicate those items that you use that are included in the Environmental Protection Agency's 130 priority pollutants.

| | | |
|---|---|---|
| Ammonia | Chlordane | Ethylbenzene |
| Asbestos (fibrous) | 4-Chloro-3-Methylphenol | Flouranthene |
| Cyanide (total) | Chlorobenzene | Flourene |
| Antimony (total) | Chloroethane | Heptachlor |
| Arsenic (total) | 2-Chloroethylvinyl Ether | Heptachlor epoxide |
| Beryllium (total) | Chloroform | Hexachlorobenzene |
| Cadmium (total) | Chloromethane | Hexachlorobutadiene |
| Chromium (total) | 2-Chloronapthalene | Hexachlorocyclopentadiene |
| Copper (total) | 2-Chlorophenol | Hexachloroethane |
| Lead (total) | 4-Chlorophenylphenyl Ether | Indeno (1,,3,-cd) Pyrene |
| Mercury (total) | Chrysene | Isophorone |
| Nickel (total) | 4,4-DDD | Methylene Chloride |
| Selenium (total) | 4,4-DDE | Napthalene |
| Silver (total) | 4,4-DDT | Nitrobenzene |
| Thallium (total) | Dibenzo (a,h) anthracene | 2-Nitrophenol |
| Zinc (total) | Dibromochloromethane | 4-Nitrophenol |
| Acenapthene | 1,2-Dichlorobenzene | n-Nitrosodiemethlamine |
| Acenapthylene | 1,3-Dichlorobenzene | n-Nitrosodiproplamine |
| Acrolein | 1,4-Dichlorobenzidine | n-Nitrosodiphenylamine |
| Acrylonitrile | 3.3-Dichlorobenzidine | PCB - 1016 |
| Aldrin | Dichlorodiflouromethane | PCB - 1221 |
| Anthracene | 1,1-Dichloroethane | PCB - 1232 |
| Benzene | 1,2-Dichloroethane | PCB - 1242 |
| Benzidine | 1,1-Dichloroethene | PCB - 1248 |
| Benzo(a)anthracene* | Trans-1,2-Dichloroethene | PCB - 1254 |
| Benzo(a)pyrene* | 2,4-Dichlorophenol | PCB - 1260 |
| Benzo(b)fluoranthene | 1,2 - Dichloropropane | Pentachlorophenol |
| Benzo(g,h,l)perylene | (cis&trans)1,3-dichloropropene | |
| Benzo(k)flouranthene | Dieldrin | Phenol |
| a-BHC(alpha) | Diethyl Pthalate | Pyrene |
| b-BHC(beta) | 2,4 - Dimethylphenol | Phenanathrene |
| d-BHC(delta) | Dimethyl Pthalate | Tetrachloroethene |
| g-BHC(gamma) | Di-n-Butyl Pthalate | Toluene |
| Bis(2-chloroethyl)ether | Di-n-Octyl Pthalate | Toxaphene |
| Bis(2-chloroethoxy)methane | 4,6-Dinitro-2-Methylphenol | 1,2,4-Trichlorobenzene |
| Bis(2-chloroisopropyl)ether | 2,4-Dinitrophenol | 1,1,1-Trichloroethane |
| Bis(chloromethyl)ether | 2,4-Dinitrotoluene | 1,1,2-Trichloroethante |
| Bis(2-ethylhexyl)pthalate | 1,6-dinitrotoluene | Trichloroethene |
| Bromodichloromethane | 1,2-Diphenylhydrazine | Trichlorofluoromethane |
| Bromoform | Endosulfan I | 2,4,6-Trichlorophenol |
| Bromomethane | Endosulfan II | Vinyl Chloride |
| 4-Bromophenyllphenyl ether | Endosulfan Sulfate | |
| Butylbenzyl Pthalate | Enrin | |
| Carbon Tetrachloride | Endrin Aldehyde | |
| 2,3,7,8-Tetrachlorodibenzo-p-Dioxin | | |

# Part F- Side Sewer Discharge (Cont'd)

_____
Business Name

Side Sewer No. _____ (From Part D of this Application)

F5. WASTEWATER STRENGTH ESTIMATES - Enter the average annual and maximum wastewater strength for the side sewer for each of the following elements of wastewater strength for the period covered by the permit.

| ELEMENTS OF WASTEWATER STRENGTH | UNIT | AVERAGE | MAXIMUM |
|---|---|---|---|
| pH (Range to be placed in Maximum Column) | | | |
| Suspended Solids | mg/L | | |
| Total Chemical Oxygen Demand | mg/L | | |
| Oil and Grease | mg/L | | |
| | | | |
| | | | |
| | | | |

If data from a laboratory was used to determine the values, please give the name and address of the laboratory.

Name_____

Street Address _____ City/State_____ Zip _____

F6. FOR CATEGORICAL FACILITIES - Provide the following flows for each of your regulated processes or proposed regulated process (i.e. manufacturing process line covered by categorical pretreatment standards).

(a) Total Plant Flow in Gallons Per Day (gpd) discharged to the sewer system:

Average _____ Maximum _____

(b) Individual Process Flows in Gallons Per Day (gpd).

| NO. | REGULATED PROCESS | AVG. GPD | MAX. GPD | DISCHARGE TYPE* |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

*DISCHARGE TYPE - List as either Continuous batch, batch, or none.

F7. Is an inspection and sampling manhole structure available onsite? Yes ( ) No ( )

If Yes, provide location description below and include as part of the building layout. (see Part D of this Application):

If No, is one planned? Yes ( ) No ( )

INSTRUCTIONS FOR COMPLETING PART F

General Instructions - Part F is to be completed by all businesses who require Wastewater Strength Determination. Use a separate sheet for each side sewer that discharges wastewater to a community sewer. (NOTE: A side sewer is a sewer conveying the wastewater of a discharger from a building or structure to a community sewer).

F5. Wastewater Strength Estimates - Enter the average and maximum concentration of each of the indicated elements of wastewater strength for this side sewer.

## Part F - Side Sewer Discharge (Cont'd)

_____
Business Name

F8. Do you currently use or plan to install automatic sampling equipment or continuous wastewater flow metering equipment?

Current: Flow Metering Yes ( ) No ( ) N/A ( ) Sampling Equipment Yes ( ) No ( ) N/A ( )
Planned: Flow Metering Yes ( ) No ( ) N/A ( ) Sampling Equipment Yes ( ) No ( ) N/A ( )

If Yes, please indicate the present or future location of this equipment on the Schematic Flow Diagram (See Part C of this Application) and describe the equipment below.

F9. POLLUTION ABATEMENT PRACTICES

(a) Wastewater Pretreatment - Check the type of treatment, if any, given this side sewer before it is discharged to the public sewer:

| | | |
|---|---|---|
| ☐none | ☐oil and water separator | ☐chlorination |
| ☐holding tank | ☐sedimentation | ☐biological treatment |
| ☐grease trap | ☐pH adjustment | ☐Other: _____ |
| ☐grinding | ☐screening | |

Describe the loading rates, design capacity, physical size, etc. of each pretreatment facility checked above.

_____
_____
_____
_____
_____
_____

(b) Planned Wastewater Pretreatment Improvements - Describe any changes in treatment or disposal methods planned or under construction for the wastewater carried by this side sewer. Please include estimated completion dates.

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

F9. Pollution Abatement Practices.

A. Wastewater Pretreatment.

Check the type of treatment, if any, given the wastewater from this side sewer before it is discharged to the community sewer.

Description. The treatment facility should be described in sufficient detail to enable an estimation of the facility's effectiveness. This will require a description of the physical characteristics and size of the facility. (Use additional sheets as necessary.)

B. Planned Wastewater Treatment Improvements.

Describe any additional treatment or changes in wastewater disposal methods planned or under construction.

# Part G - Wastewater Characterization

_____
Business Name

NOTE: Samples should be taken of the final effluent prior to discharge to the collection system. If there are more than one discharge of process wastewater to the sewer lines, make a copy of this page and supply the analytical results for multiple discharges.

G1. Existing Non-Categorical Facility * (report results in concentrations (mg/l) or mass (lbs)).

(a) Each non-categorical facility will sample, have analyzed, and report on all pollutants as specified by the District. Where mass limits apply, the facility must report results on a mass limit basis (concentration x regulated process flow x 8.34).

| Pollutant | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Monthly Average Limit | | | | | | | | |
| Reported Average | | | | | | | | |
| Daily Maximum Limit | | | | | | | | |
| Reported Maximum | | | | | | | | |

1. Specify units used (mg/l or lbs) _____

2. Sample type (grab, composite) _____

3. Number of samples collected _____

4. Dates and times samples collected _____

5. Sample collection location _____

6. Where samples analyzed _____

7. Methods of analyses _____

8. Provide name and address of labs who are performing analysis:

Name_____ Address _____

Name_____ Address _____

* New Sources may provide estimates of the information requested in this section as long as calculations and methodologies are included.

Instructions for Completing Form G

G1(a) Compare the sample results against local pretreatment standards provided by the District (contained in the District's Rules and Regulations). Describe any additional O&M or pretreatment and provide compliance schedule. Specify the major events needed to achieve compliance as well as the dates for completion of each event (i.e., hiring an engineer, completing preliminary plans, completing final plans, executing contracts, commencing construction, completing construction, etc.). The shortest possible schedule should be provided.

Sampling protocols:

A. Pollutants - List across the top specific pollutants (use abbreviations) regulated in the District code. (Ex: Copper = Cu)

B. Monthly Average and Daily Maximum - Refer to the District code for pretreatment standards for the specific pollutant. Most municipalities have daily maximum pretreatment standards (limits, not monthly averages).

C. Reported Maximum - Report the maximum concentration for the samples collected and analyzed.

D. Reported Average - If more than one sample was taken, average all the individual results and report the average in the spaces provided for each of the appropriate pollutant listed.

E. Indicate type of samples (i.e. grab, flow proportioned composite, etc.), analytical methods, and number of samples taken. Indicate whether samples were taken of combined wastestreams. The industrial user must ascertain whether it can meet the pollutant standards. The type of discharge, i.e., batch, continuous, routine historical information (e.g. existing data pollutants discharges), is a factor that should guide the industrial user regarding the number of samples to be taken to ascertain compliance.

   Where feasible, samples should be flow-proportional composites. In the case of pH, cyanide, total phenols, oil and grease, sulfides, and volatile organics, a minimum of four grab samples must be collected over a production day. Analysis must be performed on each sample and the four values averaged to provide a representative sample of effluent being discharged.

   Additionally, the time and date of sampling, and methods of analysis must be reported. Analytical methods must be performed in accordance with 40 CFR Part 136 and any amendments thereto. It is important that the samples be representative and taken during full production. Each daily composite shall be analyzed separately.

## Part G - Wastewater Characterization (Cont'd)

Business Name

(b) Compliance Certification:

Are all applicable pretreatment standards being met on a consistent basis? Yes ( ) No ( )

If not, what additional operations and maintenance procedures are being considered for compliance? Also, list additional pretreatment being considered to meet standards.

(c) Provide a compliance schedule for standards to be met. Specify the major events along with corresponding dates. Note that this schedule will require comment by the District and will be subject to changes.

G2. QUALIFIED PROFESSIONAL CERTIFICATION

I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the General Pretreatment Regulations and amendments thereto and the District's Sewer Use Ordinance. I am aware that there is significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name (print)

Signature Title Date Phone

G3. AUTHORIZED REPRESENTATIVE STATEMENT

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name (Print)

Signature Title Date Phone

G2. The certification pertains to the actual preparer of the report, if different from the authorized representative. The authorized representative may be either a corporate official, a partner, a fiduciary, or other duly authorized representative if this person is responsible for the overall operation of the facility from which the discharge originates (as defined in 40 CFR 403.12 (l)).

_____
Business Name

# Part H - Baseline Monitoring Report

H1. BASELINE MONITORING REPORT FOR NEW AND EXISTING CATEGORICAL USERS

(a) A Baseline Monitoring Report (BMR) _____ was _____ was not submitted. If not submitted, complete parts 2 thru 6.

(b) The BMR was submitted to:

☐ Local Municipality on _____

☐ State Agency on _____

☐ USEPA, Region X on _____

☐ Most recent updated BMR is attached.

(c) Compliance Progress Reports (CPR) _____ were _____ were not submitted. If not submitted, complete parts (d), (e), (f), and (g) as appropriate.

(d) The reports were submitted to:

☐ Local Municipality on _____

☐ State Agency on _____

☐ USEPA, Region X on _____

☐ Most recent updated BMR is attached.

(e) Compliance Schedule:

| Action Items | Completion Dates |
|---|---|

(f) _____ I have not complied with each action item described in my compliance schedule or have not achieved final compliance. My reasons for delay as well as the necessary steps being taken to return to schedule are shown below.

(g) My revised schedule for achieving compliance is as follows:

| Action Items | Completion Dates |
|---|---|

To be completed by new * and existing categorical users.

H1.(a) If a BMR has already been submitted, please indicate.

(b) If more than one report was submitted, specify how many, a well as the submittal dates of each and to what agency. Attach the most recent updated report submitted if not submitted to the EPA Region Office or the state.

(c) Facilities who submitted an original BMR and were out of compliance with the pretreatment standards are required to submit periodic compliance reports. The discharger should complete Item (d) if reports were submitted to one agency. If a schedule was not developed, but construction has occurred, complete Item (e) and indicate completion dates. If the facility submitted a BMR, but not the necessary compliance schedule of progress report, complete Items (f) and (g).

* New sources may provide estimates of the information requested in this section as long as calculations and methodology are included.

H2. Summarize Each Regulated Process:

| Process Description | Production Rate | Pretreatment Category | Subpart | SIC |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

H3. List All Environmental Control Permits:

| Title of Permit | Permit No. | Issuing Agency | Exp. Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

H4. Nature and Concentration of Pollutants - (report concentrations in mg/l or mass in lbs.)

a) Analysis of regulated flows - The industrial user must perform sampling and analysis of the effluent from all regulated processes (after treatment, if applicable). Provide the analytical data for the regulated processes in the space provided below. Attach additional sheets if necessary (simply copy the table and questions below). Only those pollutants specifically regulated by the applicable category need be reported. Refer to the backside for further instructions on where to take samples and how many samples to take. If the effluent samples were taken at one combined point, indicate alongside the regulated process line what process flows are comingled at this point.

Regulated Process Line(s): _____

Process Flow(s) (Daily Avg. in MGD): _____

| Pollutant | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Monthly Avg. Limit | | | | | | | | | |
| Reported Average | | | | | | | | | |
| Daily Max. Limit | | | | | | | | | |
| Reported Maximum | | | | | | | | | |

b) Sample type (grab, composite):

c) Number of samples collected (explain):

d) Dates and times samples collected:

e) Sample collection location

f) Where samples analyzed

g) Methods of analysis

h) Provide name and address of commercial lab performing analysis

Name _____ Address _____

Name _____ Address _____

H2. List each regulated process, the production rate (i.e., 10,000 lbs. of product name/unit, time-week, month, year), the category, and subpart of the applicable Categorical Pretreatment Standard as well as the SIC code for each process.

H3. List all environmental control permits held by or for the facility including the title of the permit, the type of environmental permit, the agency issuing the permit and the expiration date of the permit.

H4. Each industrial user will sample, analyze, and report on all pollutants regulated specific to each process (refer to appropriate subcategory in regulations for regulated pollutants). Where mass limits exist, the facility will have to report results in mass limits (concentration x regulated process flow in million gallons per day x 8.34.)

The BAT pretreatment standards are process related. That is, a facility must comply with the standard at the end of the regulated process. However, EPA recognizes that some facilities combine their wastewater process lines, cooling water, and sanitary discharge prior to treatment and discharge to municipal sewers. Hence, a facility can sample at a combined point, but will need to adjust the categorical limit it must meet by (i.e., calculate adjusted limits) employing the Combined Wastestream Formula that is contained in Section 403.6 (e) of the General Pretreatment Regulations (Federal Register January 28, 1981). If this is the case with your facility, you must employ the formula and provide additional data for calculations. Contact the District for more guidance.

Insert in the table the regulated pollutants (use abbreviations), the published average and maximum numerical limit for the particular pollutant found in the regulation, or adjusted limits as calculated by use of the Combined Wastestream Formula, and the results of the sampling (average and maximum values).

Indicate type of samples (i.e. grab, flow proportioned composite, etc.), analytical methods, and number of samples taken. Indicate whether samples were taken of combined wastestreams. The industrial user must ascertain whether it can meet the 30 - day average, calculated average, daily maximum, or calculated maximum limit. The type of discharge (i.e., batch, continuous, routine historical information) is a factor that should guide the industrial user regarding the number of samples to be taken to ascertain compliance.

Where feasible, samples should be flow-proportional composites. In the case of pH, cyanide, total phenols, oil and grease, sulfides, and volatile organics, a minimum of four grab samples must be collected over a production day. Analysis must be performed on each sample and the four values (except for pH) averaged to provide a representative sample of effluent being discharged.

Additionally, the time and date of sampling, and methods of analysis must be reported. Analytical methods must be performed in accordance with 40 CFR Part 136 and any amendments thereto. It is important that the samples be representative and taken during full production. Each daily composite shall be analyzed separately.

## Part H - Baseline Monitoring Reports (Cont'd)

_____
Business Name

H5.TOTAL TOXIC ORGANICS

Facilities who use toxic organics listed by the EPA in its published categorical pretreatment standards are required to meet TTO pretreatment standards and must initially sample for TTO and determine compliance.

_____ (a) We presently do not or plan to use any of the toxic organics that are listed under the TTO standard located in the applicable categorical pretreatment standards published by the EPA.

_____ (b) We presently use or plan to use organic toxicants listed in the categorical pretreatment standards.

_____ (c) A BMR has previously been submitted which contains TTO information.

H6. COMPLIANCE CERTIFICATION

_____ (a) Is the facility meeting applicable categorical pretreatment standards on a consistent basis? Yes ( ) No ( )

_____ (b) If no, do you require:
1) Additional operation and maintenance (O&M) to achieve compliance? Yes ( ) No ( )
2) New or additional pretreatment facilities to achieve compliance? Yes ( ) No ( )

_____ (c) If additional O&M or new additional pretreatment will be required to meet categorical pretreatment standards on a consistent basis, attach a description of it and a schedule on separate sheets. Include increments of progress indicating dates for the commencement and completion of major events leading to compliance with the standard.

NOTE: The final compliance date in this schedule shall not be later than the compliance date for the applicable pretreatment standard. Written progress reports are required within 14 days of each of the compliance dates specified in the compliance schedule.

_____ (d) I have provided a compliance schedule.

H7. QUALIFIED PROFESSIONAL CERTIFICATION

I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the General Pretreatment Regulations and amendments thereto and the District's Sewer Use Ordinance. I am aware that there is significant penalties for submitting false information, including the possibility of fine and imprisonment.

_____
Name (print)

_____
Signature Title Date Phone

H8. AUTHORIZED REPRESENTATIVE STATEMENT

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information, the information is, to the beset of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

_____
Name (print)

_____
Signature Title Date Phone

H5. Facilities covered by a TTO pretreatment standard must initially sample for TTO and determine compliance with applicable pretreatment standards. Analysis have to be performed on toxic organics listed in the applicable pretreatment standards . Contact the District for the list of toxics applicable to your operation.

H6.(a) In order to determine compliance with published or calculated mass based categorical standards, a facility will need to compare its allowable mass limit against the actual mass loading derived from sampling (concentration x process flow in million gallons per day x 8.34). If the categorical standards are published in concentration, then a facility need only to compare the concentration of its effluent against the regulated standards for that particular pollutant.

H6.(c) Describe any additional O&M or pretreatment and attach a compliance schedule. Specify the major events needed to achieve compliance, as well as the dates for completion of each event (i.e., hiring an engineer, completing preliminary plans, completing final plans, executing contracts, commencing construction, etc.). The shortest possible schedule should be provided.

H7. The certification pertains to the actual preparer of the report if different from the authorized representative.

H8. The authorized representative may either be a corporate official, a partner, a fiduciary, or other duly authorized representative if this person is responsible for the overall operation of the facility from which the discharge originates.