

City of Tacoma Industrial Pretreatment Program Industrial Wastewater Discharge Permit Application

General Information

Financial, commercial, and proprietary information submitted by an Industrial User, which the Industrial User identifies as confidential may be exempt from public disclosure, pursuant to the provisions of Chapter 42.56 RCW.

Legal Entity/Owner of facility where discharge will originate: Click or tap here to enter text.

Business name if different from above: Click or tap here to enter text.

Operator or Contactor that operates facility or treatment system, if different: Click or tap here to enter text.

Physical address of facility where discharge will occur: Click or tap here to enter text.

Official mailing address, if different: Click or tap here to enter text.

Website: <http://www>. Click or tap here to enter text.

Facility Phone #: Click or tap here to enter text.

Name of Authorized Representative of the Industrial User (see Attachment 1): Click or tap here to enter text.

Name of alternative Authorized Representative: Click or tap here to enter text.

Title: Click or tap here to enter text.

Title: Click or tap here to enter text.

Phone # & extension: Click or tap here to enter text.

Phone # & extension: Click or tap here to enter text.

Email Address: Click or tap here to enter text.

Email Address: Click or tap here to enter text.

Emergency Contact(s) - (Name/Phone): Click or tap here to enter text.

List all NAICS codes for your facility, (see <http://www.census.gov/eos/www/naics/>):

Directions for Completing this Application

1. Fill out the application completely. Answer all questions. If you do not know the answer to a question, write “Unknown”. If an answer is not applicable to your facility, write “N/A”. Do not leave any blank spaces or unanswered questions. Failure to complete this document may delay the ability of the City to process the permit application.
2. Sign the Application. The Authorized Representative must sign this application as described in Attachment 1 of this application.
3. Failure to submit a completed application by the required date is a violation of Chapter 12.08.140 of the Tacoma Municipal Code (TMC).
3. This application must be completed in ink or be typewritten. Applications completed in pencil shall not be accepted.
4. If you have any questions, please contact: Pretreatment Coordinator, City of Tacoma, at (253) 502-2239.
5. If the City finds that the permit application is complete and submitted in a timely manner, the City may issue a permit to the Industrial User and assess a permit fee and other charges as specified in TMC 12.08.140.M.
6. Submit the completed application to, Pretreatment Coordinator, City of Tacoma, 2201 Portland Avenue East, Bldg. P-1, Tacoma WA, 99421

Facility/Production Information

General Business/Facility Activity Description: Click or tap here to enter text.

Provide operating data below

	Shift Times	Days of Operation	# of Employees
Shift #1: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Shift #2: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Shift #3: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

<p>Does your business perform any process(es) for which pretreatment standards for new or existing sources would be applicable if there were a discharge to the sanitary sewer from such activity? (see pages 13-15)</p> <p style="text-align: center;"> <input type="checkbox"/> YES <input type="checkbox"/> NO </p>	<p>Applicable Categorical Standard(s) (include specific Standard, Subpart, and Applicable Section): Click or tap here to enter text.</p>
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Facility/Production Information			
	Sources may include cooling water, boiler blowdown, industrial processes, etc.	If you do not know if the activities conducted at your facility are subject to Federal Categorical regulations, contact your Business Operations Division representative for assistance.	
	Reason for classification (description of regulated processes): Click or tap here to enter text.		
	Date facility began operation (or will begin operation): Click or tap here to enter text.	Date of first discharge from each identified categorical process to the Publicly Owned Treatment Works (POTW) or if no discharge the date when the regulated process began: Click or tap here to enter text.	
Name of water supplier(s): Click or tap here to enter text.			
Water billing account number(s): Click or tap here to enter text.			
Sewer (wastewater) account billing number(s): Click or tap here to enter text.			
Supplier example would be Tacoma Public Utilities			
Other Environmental Permits Held by Facility:			
Permit Type	Issuing Agency	Permit Number	Expiration Date
Wastewater:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Wastewater-Direct Discharge (State or EPA permit):	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
RCRA (Hazardous Waste):	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Underground Injection Control (UIC) Permit:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Stormwater:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Air Permit:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Other:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Facility/Production Information

List the primary products produced at this facility (attach sheets as needed): Click or tap here to enter text.

List all raw materials and process chemicals used (attach sheets as needed): Click or tap here to enter text.

List and attach copies of any notifications of discharge of hazardous waste previously submitted in fulfillment of the requirements of 40 CFR 403.12(p), also as described on page 31 (attach sheets as needed): Click or tap here to enter text.

	YES	NO
Are biocides or descaling chemicals added to any water, including cooling water, that are ultimately discharged to the POTW? If yes, please describe: Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Wastewater discharge is:		
Continuous	<input type="checkbox"/>	<input type="checkbox"/>
Batch	<input type="checkbox"/>	<input type="checkbox"/>
Both	<input type="checkbox"/>	<input type="checkbox"/>
If discharge includes <u>batch discharges</u> provide the number of batch discharges per day:	Click or tap here to enter text.	
	Click or tap here to enter text.	
	Gallons per batch:	Click or tap here to enter text.
	Average (gal):	Click or tap here to enter text.
Maximum (gal):		
	YES	NO

Facility/Production Information

Does production vary significantly (+/- 20 %) during a calendar year (e.g. seasonal production, plant shut downs, etc.)? If yes, please describe: Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
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YES	NO
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Are any significant (+/- 20 %) changes in production anticipated in the next two (2) years that will affect wastewater discharges? If yes, please describe:	<input type="checkbox"/>	<input type="checkbox"/>
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Provide an explanation of any anticipated changes in production in the next two to ten (2-10) years; include any changes in pollutants or pollutant concentrations and/or changes in discharge volumes: [Click or tap here to enter text.](#)

If wastewater or non-domestic wastes are hauled off-site, list the name, address, and phone number of the hauler and the names of wastes and volumes hauled off-site over last two (2) years (attach sheets as needed): [Click or tap here to enter text.](#)

Attach copies of laboratory analyses performed over the past five (5) years for wastewater discharge(s) from your facility if not previously submitted to the City.

Attach a site plan or schematic of all areas that generate non-domestic wastewater that shows process lines, chemical storage areas, areas where materials are trans-loaded, or where contaminated stormwater is generated (See example in “Attachment 4”).

Site plan or schematic must also show:

1. All wastewater lines and connections, including internal and external drains;
2. All sewer connections and monitoring point(s) for wastewater sampling;
3. Treatment facilities, internal and external to facility. Label tanks and indicate wastewater flow direction and tank or other storage volumes;
4. Process areas showing all tanks or other vessels used in the manufacturing process. Include a narrative that identifies where wastewater is generated during process or cleaning operations;
5. Process diagrams must show in sequence, or stepwise, the processing of all materials into products (with tank volumes and contents); and
6. Drawings need not be to scale but must be clearly labeled and on sheets no larger than 11” x 17”. Use separate sheets for various facility areas where needed.

Facility/Production Information		
	YES	NO
Has your business ever applied for or been issued an Industrial Wastewater Discharge Permit to discharge wastewater to a sanitary sewer collection system? If yes, please list each City or District (attach sheets as necessary). <i>Click or tap here to enter text.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does your Company have any other manufacturing or other facilities that are engaged in the same or similar business activity? If yes, please provide a listing of Company names and locations (attach sheets as necessary). <i>Click or tap here to enter text.</i>	<input type="checkbox"/>	<input type="checkbox"/>
	YES	NO
Are there any underground storage tanks at your facility?*	<input type="checkbox"/>	<input type="checkbox"/>
For new facilities, will there be any underground storage tanks installed?*	<input type="checkbox"/>	<input type="checkbox"/>
*If yes, list contents and volume of each tank (attach sheets as necessary). <i>Click or tap here to enter text.</i>		
	YES	NO
Do you have any above ground storage tanks at your facility?*	<input type="checkbox"/>	<input type="checkbox"/>
For new facilities, will you have any above ground storage tanks?*	<input type="checkbox"/>	<input type="checkbox"/>
*If yes, list the tank capacity and contents for each tank. Also, describe whether the tank has any spill prevention or containment structure (e.g. dikes, etc.). Also list the procedures for draining and cleaning these containment structures (attach sheets as needed). <i>Click or tap here to enter text.</i>		

Facility/Production Information		
	YES	YES
Do you store or contain wastewater in tanks or ponds at your facility (including new facilities)? If yes, include in the facility schematic.	<input type="checkbox"/>	<input type="checkbox"/>
Are floor drains located in the manufacturing area? If yes, explain: Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Chemical Storage: Are chemical storage areas bermed or otherwise isolated from the rest of the facility and floor drains? If yes, please label all berms, barriers, or trench drains on the facility schematic.	<input type="checkbox"/>	<input type="checkbox"/>
Cooling water: How many cycles does your facility recirculate cooling water?	Click or tap here to enter text.	

#	Source(s) and Flows of Water Used in Facility	Metered or Logged Y/N	Daily Average Water Use past 12 months (past 12 months gpd)	Daily Maximum Water Use (past 12 months) gpd	Measured or Estimated
Provide the flows and information for wastewater discharged from:					
1.	Public water supply; Customer account number:	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
2.	A separate irrigation metered water source	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
3.	Private water supply, including piped or trucked	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
4.	Well located ON or OFF property (circle one) - See also #10 which may apply	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
5.	Private ponds	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
6.	Reuse/Reclaimed water from off-site	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
7.	Reuse/Reclaimed water from on-site	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
8.	Surface waters	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
9.	Water contained in raw materials ¹	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
10.	Groundwater remediation well	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
11.	Contaminated Stormwater	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
12.	Other (specify): Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
13.	Other (specify): Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
14.	Other (specify): Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
15.	Other (specify): Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

¹ This is required where any liquids are received via train (railcar) or truck (tanker or bulk totes).

#	Source(s) and Flows of Water Used in Facility	Metered or Logged Y/N	Daily Average Water Use past 12 months (past 12 months gpd)	Daily Maximum Water Use (past 12 months) gpd	Measured or Estimated
Provide the flows and information for wastewater discharged from:					
		TOTAL:	Click or tap here to enter text.	Click or tap here to enter text.	

Please attach a diagram describing the water sources, the water uses, the volume for each use, where flows are combined prior to treatment, or after treatment, and where monitoring points are located, (See example in “Attachment 3”).

#	Sources and Flows for Wastewater Generated at the Facility	Where is the wastewater discharged or planned to be discharged (see Wastewater Disposal Methods below)	Daily Average Wastewater Flow past 12 months (existing discharge) or next 12 months (new discharge) gpd	Daily Maximum Wastewater Flow past 12 months (existing discharge) or next 12 months (new discharge) gpd	Measured or Estimated
Provide the flows and information for wastewater discharged from:					
1.	Process flows:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
2.	Process flows:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
3.	Process flows:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
4.	Cleaning/wash down/rinses:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
5.	Water into product:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
6.	Air quality scrubbers:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
7.	Domestic - toilets, drinking, ect.:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
8.	Non-contact cooling water:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
9.	Contact cooling water:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

#	Sources and Flows for Wastewater Generated at the Facility	Where is the wastewater discharged or planned to be discharged (see Wastewater Disposal Methods below)	Daily Average Wastewater Flow past 12 months (existing discharge) or next 12 months (new discharge) gpd	Daily Maximum Wastewater Flow past 12 months (existing discharge) or next 12 months (new discharge) gpd	Measured or Estimated
10.	Deionization (DI) Backwash:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
11.	Reverse Osmosis (RO) Regen/Backwash:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
12.	Irrigation (if not metered separately from water use on previous page):	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
13.	Air Pollution Control:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
14.	Evaporation:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
15.	Water/wastewater Reuse flows:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
16.	Groundwater Remediation:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
17.	Contaminated Stormwater:	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Provide the flows and information for wastewater discharged from:					
18.	Other: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
		TOTAL:	Click or tap here to enter text.	Click or tap here to enter text.	

#	Sources and Flows for Wastewater Generated at the Facility	Where is the wastewater discharged or planned to be discharged (see Wastewater Disposal Methods below)	Daily Average Wastewater Flow past 12 months (existing discharge) or next 12 months (new discharge) gpd	Daily Maximum Wastewater Flow past 12 months (existing discharge) or next 12 months (new discharge) gpd	Measured or Estimated
Wastewater Disposal Methods					
1.	Sanitary Sewer (to POTW) - Treated		7.	Other Groundwater	
2.	Sanitary Sewer (to POTW) - Untreated		8.	Waste Haulers (identify on page 10)	
3.	Surface waters (river, stream, lake, etc.)		9.	Water into product	
4.	Evaporation		10.	Centralized Waste Treater	
5.	Land applied		11.	Storm Sewer	
6.	Septic Tank/Leach field		12.	Other:	
DISCUSS ANY DIFFERENCES >5% BETWEEN THE TOTAL WATER USE ON PAGE 8 AND THE TOTAL WASTEWATER FHIS PAGE:					

INDUSTRIAL USER IS REQUESTING A PERMITTED DAILY MAXIMUM FLOW (specify gallons per day or million gallons per day) OF: Click or tap here to enter text.

Wastewater Treatment

Are there any pretreatment devices or processes used for treating wastewater before discharge to the sanitary sewer? Indicate Yes, if present and describe, and No, if not present.

Type of Treatment	YES/NO	Type of Wastestream Treated
Flow equalization	Choose an item.	Click or tap here to enter text.
Aerated equalization (gallons):	Choose an item.	Click or tap here to enter text.
Non-Aerated equalization (gallons):	Choose an item.	Click or tap here to enter text.
Activated Carbon:	Choose an item.	Click or tap here to enter text.
Air Stripping:	Choose an item.	Click or tap here to enter text.
Biological Treatment:	Choose an item.	Click or tap here to enter text.
Centrifugation:	Choose an item.	Click or tap here to enter text.
Chemical Precipitation:	Choose an item.	Click or tap here to enter text.
Chlorination:	Choose an item.	Click or tap here to enter text.
Cyanide Destruction:	Choose an item.	Click or tap here to enter text.
Cyclone:	Choose an item.	Click or tap here to enter text.
Dissolved Air Floatation:	Choose an item.	Click or tap here to enter text.
Evaporation:	Choose an item.	Click or tap here to enter text.
Filtration:	Choose an item.	Click or tap here to enter text.
Flocculation:	Choose an item.	Click or tap here to enter text.

Wastewater Treatment

Are there any pretreatment devices or processes used for treating wastewater before discharge to the sanitary sewer? Indicate Yes, if present and describe, and No, if not present.

Type of Treatment	YES/NO	Type of Wastestream Treated
Fats/Oil/Grease Interceptor:	Choose an item.	Click or tap here to enter text.
Oil/Sand Separator:	Choose an item.	Click or tap here to enter text.
Grit Removal:	Choose an item.	Click or tap here to enter text.
Ion Exchange:	Choose an item.	Click or tap here to enter text.
Neutralization/pH adjust:	Choose an item.	Click or tap here to enter text.
Ozone:	Choose an item.	Click or tap here to enter text.
Reverse Osmosis:	Choose an item.	Click or tap here to enter text.
Sedimentation:	Choose an item.	Click or tap here to enter text.
Separation:	Choose an item.	Click or tap here to enter text.
Septic Tank:	Choose an item.	Click or tap here to enter text.
Silver Recovery:	Choose an item.	Click or tap here to enter text.
Solvent Separation:	Choose an item.	Click or tap here to enter text.
List other treatment:	Choose an item.	Click or tap here to enter text.
List other treatment:	Choose an item.	Click or tap here to enter text.
List other treatment:	Choose an item.	Click or tap here to enter text.

Off-Site Disposal of Wastes		
Type of Waste	YES/NO	Name of Hauler and where waste is disposed (or N/A if off-site disposal is not done)
Acids/Bases:	Choose an item.	Click or tap here to enter text.
Petroleum-Based Oils/Grease:	Choose an item.	Click or tap here to enter text.
Vegetable Fats/Oils/Grease:	Choose an item.	Click or tap here to enter text.
Water-based cutting fluids:	Choose an item.	Click or tap here to enter text.
Sludges from the treatment of metal containing process wastewater:	Choose an item.	Click or tap here to enter text.
Wastewater or waste process bath wastewater from metal finishing or electroplating processes:	Choose an item.	Click or tap here to enter text.
Metal scraps from machining and processing:	Choose an item.	Click or tap here to enter text.
Inks/dyes/coloring agents:	Choose an item.	Click or tap here to enter text.
Organic chemical pollutants, excluding food waste:	Choose an item.	Click or tap here to enter text.
Food waste:	Choose an item.	Click or tap here to enter text.
Paints:	Choose an item.	Click or tap here to enter text.
Pesticides:	Choose an item.	Click or tap here to enter text.
Solvents:	Choose an item.	Click or tap here to enter text.
Hazardous Wastes:	Choose an item.	Click or tap here to enter text.
1 st wash/rinse from process tanks:	Choose an item.	Click or tap here to enter text.
Wash or rinse water from waste delivered by railcar or truck:	Choose an item.	Click or tap here to enter text.
Other sludge from tanks or treatment not specified above:	Choose an item.	Click or tap here to enter text.
Antifreeze (clean or used):	Choose an item.	Click or tap here to enter text.
Contact Stormwater:	Choose an item.	Click or tap here to enter text.
Contaminated Stormwater:	Choose an item.	Click or tap here to enter text.
List any others:	Choose an item.	Click or tap here to enter text.
List any others:	Choose an item.	Click or tap here to enter text.

Off-Site Disposal of Wastes		
Type of Waste	YES/NO	Name of Hauler and where waste is disposed (or N/A if off-site disposal is not done)
List any others:	Choose an item.	Click or tap here to enter text.
List any others:	Choose an item.	Click or tap here to enter text.

Wastewater Treatment	YES	NO
Is the pretreatment system fully operational? If not, explain:	<input type="checkbox"/>	<input type="checkbox"/>
Is backup power available?	<input type="checkbox"/>	<input type="checkbox"/>
Do alarm systems exist for out of range excursions (e.g. pH, flow, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
Are solids generated from the pretreatment system?	<input type="checkbox"/>	<input type="checkbox"/>
Are there written O&M manuals/SOPs for equipment and treatment system?	<input type="checkbox"/>	<input type="checkbox"/>
Are written logs for operator measurements available and being used?	<input type="checkbox"/>	<input type="checkbox"/>
Are emergency notification procedures in-place and posted?	<input type="checkbox"/>	<input type="checkbox"/>
Has the pretreatment system experienced operational upsets? If yes, describe:	<input type="checkbox"/>	<input type="checkbox"/>
Is there a bypass around the treatment system (See 40 CFR Section 403.17)?	<input type="checkbox"/>	<input type="checkbox"/>
Type of recording for pH measurements (chart, recorder, computer, log):		
Type of recording for flow measurements (chart, recording, computer, log):		
Do you have a wastewater treatment operator? If yes, is the operator trained in regards to existing or proposed operation and maintenance (O&M) practices?	<input type="checkbox"/>	<input type="checkbox"/>

Check any activities listed below that are performed at your facility. For some business activities, EPA has published Categorical Standards. Specify, "Yes", if you are conducting activities onsite for which pretreatment standards or requirements for new or existing sources were developed, or if you are receiving waters from off-site which would be subject to either direct or indirect discharge criteria covered by EPA Categorical Standards.

YES	40 CFR #	Industrial Activity	Applicable Subparts
<input type="checkbox"/>	467	Aluminum Forming	Click or tap here to enter text.
<input type="checkbox"/>	427	Asbestos Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	461	Battery Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	431	Builders Paper & Board Mills	Click or tap here to enter text.
<input type="checkbox"/>	407	Canned & Preserved Fruits & Veg.	Click or tap here to enter text.
<input type="checkbox"/>	408	Canned & Preserved Seafood	Click or tap here to enter text.
<input type="checkbox"/>	458	Carbon Black Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	411	Cement Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	437	Centralized Waste Treatment	Click or tap here to enter text.
<input type="checkbox"/>	434	Coal Mining	Click or tap here to enter text.
<input type="checkbox"/>	465	Coil Coating	Click or tap here to enter text.
<input type="checkbox"/>	468	Copper Forming	Click or tap here to enter text.
<input type="checkbox"/>	405	Dairy products processing	Click or tap here to enter text.
<input type="checkbox"/>	441	Dental Industrial User (Covered by Effluent Guidelines but not a Categorical Industrial User)	Click or tap here to enter text.
<input type="checkbox"/>	469	Electrical, Electronic Components	Click or tap here to enter text.
<input type="checkbox"/>	413	Electroplating	Click or tap here to enter text.
<input type="checkbox"/>	457	Explosives Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	412	Feedlots	Click or tap here to enter text.
<input type="checkbox"/>	424	Ferro Alloy Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	418	Fertilizer Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	464	Foundries, Metal Mold & Casting	Click or tap here to enter text.
<input type="checkbox"/>	426	Glass Manufacturing	Click or tap here to enter text.

YES	40 CFR #	Industrial Activity	Applicable Subparts
			text.
<input type="checkbox"/>	406	Grain Mills	Click or tap here to enter text.
<input type="checkbox"/>	454	Gum & Wood Chemicals Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	460	Hospitals	Click or tap here to enter text.
<input type="checkbox"/>	447	Ink Formulating	Click or tap here to enter text.
<input type="checkbox"/>	415	Inorganic Chemical Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	420	Iron & Steel Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	425	Leather Tanning & Finishing	Click or tap here to enter text.
<input type="checkbox"/>	432	Meat Products	Click or tap here to enter text.
<input type="checkbox"/>	433	Metal Finishing	Click or tap here to enter text.
<input type="checkbox"/>	464	Metal Molding and Casting	Click or tap here to enter text.
<input type="checkbox"/>	436	Mineral Mining and Processing	Click or tap here to enter text.
<input type="checkbox"/>	471	Nonferrous Metal, Form & Powders	Click or tap here to enter text.
<input type="checkbox"/>	421	Nonferrous Metals Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	414	OCPSF, Organic Chemicals, Plastics, & Synthetic Fiber Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	435	Oil & Gas Extraction	Click or tap here to enter text.
<input type="checkbox"/>	440	Ore Mining and Dressing	Click or tap here to enter text.
<input type="checkbox"/>	446	Paint Formulating	Click or tap here to enter text.
<input type="checkbox"/>	443	Paving and Roofing Materials Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	455	Pesticide Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	419	Petroleum Refining	Click or tap here to enter text.
<input type="checkbox"/>	439	Pharmaceutical Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	422	Phosphate Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	459	Photographic Supplies	Click or tap here to enter text.
<input type="checkbox"/>	463	Plastics Molding and Forming	Click or tap here to enter text.

YES	40 CFR #	Industrial Activity	Applicable Subparts
<input type="checkbox"/>	466	Porcelain Enameling	Click or tap here to enter text.
<input type="checkbox"/>	430	Pulp, Paper, and Paperboard	Click or tap here to enter text.
<input type="checkbox"/>	428	Rubber Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	417	Soap & Detergent Manufacturing	Click or tap here to enter text.
<input type="checkbox"/>	423	Steam Electric Power Generation	Click or tap here to enter text.
<input type="checkbox"/>	409	Sugar Processing	Click or tap here to enter text.
<input type="checkbox"/>	410	Textile Mills	Click or tap here to enter text.
<input type="checkbox"/>	429	Timber Products Processing	Click or tap here to enter text.
<input type="checkbox"/>	442	Transportation Equipment Cleaning	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/>	Other:	Click or tap here to enter text.	Click or tap here to enter text.

Monitoring Data Requirements

For existing permitted Industrial Users (Categorical or non-Categorical): Submit the results of any pollutant monitoring conducted over the last five years performed on discharges not already reported to the City. Applicants will be required to sample for all pollutants identified in the tables on pages 17-28.

For a new, non-Categorical Industrial User: If sampling of wastewater from your facility has been performed and analyzed (even if in another location) in the past five years, include a copy of all such results with this completed application.

Pursuant to 40 CFR Section 403.12(b), if your business is a Categorical Industrial User that is connecting to the City sewer or proposing to connect to the City sewer, you are required to collect at least one representative sample of your effluent and analyze for all regulated pollutants using methods at 40 CFR Part 136 prior to discharge. If the facility is not discharging, historical data may be used to identify pollutants present and to estimate concentrations of pollutants. If the Industrial User has a similar operation in another location, data from that facility may be used to provide an estimate. Regulated pollutants include all pollutants covered by the Categorical Standard and any local limitations established by the City.

If you have pollutant data on the presence or concentrations of pollutants in your wastewater that have been collected in the last five (5) years AND that data has not been previously submitted to the City, that pollutant data shall be submitted with this application.

If this application is being completed for a new Categorical Industrial User, the City may request additional information specific to the relevant Categorical Standard and facility operations. This application includes required information to assist the City in permit issuance and may require additional information that is required for Baseline Monitoring Reports (BMRs) as defined at 40 CFR Section 403.12(b) at least 90 days prior to discharge being authorized.

Categorical Industrial Users Only

	YES	NO
Is your facility covered by more than one Categorical Pretreatment Standard?	<input type="checkbox"/>	<input type="checkbox"/>
Do you use the Combined Wastestream Formula or Flow Weighted Averaging when evaluating compliance with Categorical Standards (see 40 CFR Section 403.6)	<input type="checkbox"/>	<input type="checkbox"/>

Categorical Industrial Users Only

For each process where a discharge of wastewater does or may occur, provide a description of that process (add sheets as necessary):

1. Click or tap here to enter text.
2. Click or tap here to enter text.
3. Click or tap here to enter text.
4. Click or tap here to enter text.
5. Click or tap here to enter text.

If your facility is covered by a production-based Categorical Pretreatment Standard, provide a description of the nature and average rate of production (last three (3) years) for your products as specified in the applicable Categorical Standard. Additional information may be required for Industrial Users that are governed by production-based Categorical Standards. Add additional sheets as necessary. Click or tap here to enter text.

Other Data Required for Categorical Industrial Users

Certification to be signed and provided with this application

A statement reviewed by the Authorized Representative of the Industrial User and certified by a qualified professional, indicating whether Pretreatment Standards and Requirements are being met on a consistent basis. If not, whether additional operation and maintenance (O&M) and/or additional Pretreatment is required for the Industrial User to meet the Pretreatment Standards and Requirements. Attach Statement/Certification. New Source dischargers must be in compliance with Categorical Standards upon discharge.

Compliance Schedule

If additional pretreatment and/or O&M will be required to meet the City's Local Limits or other City Pretreatment Requirements, the Industrial User may be required to submit a schedule by which the Industrial User will provide such additional pretreatment or take other actions to ensure compliance. No discharge shall be authorized that results in the City exceeding the Maximum Allowable Industrial Loading (MAIL) that reflects the total allocation to all Permitted Industrial Users.

Please review your past effluent monitoring data, raw materials, and processes and complete the following table.

Note: The Industrial User shall review all raw materials used in the manufacturing process (the facility) and all final products to answer whether or not a pollutant is present. If, after review of all raw materials and final products, including raw materials, a pollutant is not shown by data to be present, the Industrial User may check the “Known Absent at Facility”. Where a MSDS or certificate of analysis from a supplier of raw materials lists individual components as “Proprietary” or similar language, it is the responsibility of the Industrial User to obtain a listing of the individual chemical components of the raw materials from the manufacturer and report required pollutant information to the Pretreatment Program. No claim of “proprietary”, “confidential”, “trade secret”, etc. may be used to avoid reporting the required information to the Pretreatment Program on pollutants that are or may be present in the discharge. The Pretreatment Program may require monitoring and reporting for any pollutant. Checking “Unknown” below may result in additional monitoring and reporting requirement(s) for that pollutant. The Industrial User must check at least one box for each pollutant below.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Arsenic, Total	7440-38-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Cadmium, Total	7440-43-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chromium (VI), Total	18540-29-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chromium, Total	7440-47-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Copper, Total	7440-50-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Cyanide, Free		Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Cyanide, Total	57-12-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Lead, Total	7439-92-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Mercury, Total	7439-97-6	Choose an	Choose an	Choose an	Choose an	Choose an	Choose an	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
		item.	item.	item.	item.	item.	item.	
Molybdenum, Total	7439-98-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Nickel, Total	7440-02-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Selenium, Total	7782-49-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Silver, Total	7440-22-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Zinc, Total	7440-66-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Ammonia	7664-41-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
5-Day Biochemical Oxygen Demand (BOD5)	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chemical Oxygen Demand (COD)	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Total Suspended Solids (TSS)	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,1,1-Trichloroethane	71-55-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,1,2,2-Tetrachloroethane	79-34-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,1,2-Trichloroethane	79-00-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,1-Dichloroethane	75-34-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,1-Dichloroethylene	75-35-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,2,4-Trichlorobenzene	120-82-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,2-Dichlorobenzene	95-50-1	Choose an	Choose an	Choose an	Choose an	Choose an	Choose an	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
		item.	item.	item.	item.	item.	item.	
1,2-Dichloroethane	107-06-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,2-Dichloropropane	78-87-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,2-Diphenylhydrazine	122-66-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,2-trans-Dichloroethylene	156-60-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,3-Dichlorobenzene	541-73-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,3-Dichloropropylene	542-75-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
1,4-Dichlorobenzene	106-46-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,2-Dichloropropionic acid	75-99-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,3,7,8-Tetrachlorodibenzo-	1764-01-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
p-dioxin		Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4,5-T	93-76-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4,5-TP	93-72-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4,6-Trichlorophenol	88-06-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4-D	94-75-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4-Dichlorophenol	120-83-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4-Dimethylphenol	105-67-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
2,4-Dinitrophenol	51-28-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,4-Dinitrotoluene	121-14-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2,6-Dinitrotoluene	606-20-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2-Chloroethylvinyl ether	110-75-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2-Chloronaphthalene	91-58-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2-Chlorophenol	95-57-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
2-Nitrophenol	88-75-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
3,3-Dichlorobenzidine	91-94-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
3,4-Benzofluoranthene	205-99-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4,4'-DDD	72-54-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4,4'-DDE	72-55-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4,4'-DDT	50-29-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4,6-Dinitro-o-cresol	534-52-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4-Bromophenyl phenyl ether	101-55-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4-Chlorophenyl phenyl ether	7005-72-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
4-Nitrophenol	100-02-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Acenaphthene	83-82-9	Choose an	Choose an	Choose an	Choose an	Choose an	Choose an	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
		item.	item.	item.	item.	item.	item.	
Acenaphthylene	208-96-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Acetaldehyde	75-07-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Acrolein	107-02-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Acrylonitrile	107-13-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Aldrin	309-00-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Allyl alcohol	107-18-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Allyl chloride	107-05-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Alpha, Total	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
alpha-BHC	319-84-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
alpha-Endosulfan	959-98-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Aluminum, Total	7429-90-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Amyl acetate	628-63-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Aniline	62-53-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Anthracene	120-12-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Antimony, Total	7440-36-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Arsenic, Total	7440-38-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Asbestos	1332-21-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Barium, Total	7440-39-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benz[a]anthracene	56-55-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benzene	71-43-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benzidene	92-87-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benzo[a]pyrene	50-32-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benzo[ghi]perylene	191-24-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benzo[k]fluoranthene	207-08-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Benzyl chloride	100-44-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Beryllium, Total	7440-41-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Beta, Total	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
beta-BHC	319-85-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
beta-Endosulfan	33213-65-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Bis(2-chloroethoxy) methane	111-91-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Bis(2-chloroethyl) ether	111-44-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Bis(2-chloroisopropyl) ether	102-80-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Bis(2-ethylhexyl) phthalate	117-81-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Bis(chloromethyl) ether	542-88-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Boron, Total	7440-42-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Bromide	24959-67-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Bromoform	75-25-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Butyl benzyl phthalate	85-68-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Cadmium, Total	7440-43-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Captan	133-06-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Carbaryl	63-25-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Carbofuran	1563-66-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Carbon disulfide	75-15-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Carbon tetrachloride	56-23-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chlordane	57-74-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chlorine, Total Residual	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chlorobenzene	108-90-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chlorodibromomethane	124-48-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chloroethane	75-00-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chloroform	67-66-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Chlorpyrifos	2921-88-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Chrysene	218-01-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Colbalt, Total	7440-48-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Color	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Coumaphos	56-72-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Cresols	1319-77-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Crotonaldehyde	123-73-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Cyclohexane	110-82-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
delta-BHC	319-86-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Diazinon	333-41-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dibenz[a,h]anthracene	53-70-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dicamba	1918-00-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dichlobenil	1194-65-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dichlone	117-80-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dichlorobromomethane	75-27-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dichlorodifluoromethane	75-71-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dichlorvos	62-73-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Dieldrin	60-57-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Diethyl phthalate	84-66-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Diethylamine	109-89-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dimethyl phthalate	131-11-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Dimethylamine	124-40-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Di-N-butylphthalate	84-74-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Di-N-octyl phthalate	117-84-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Diquat	85-00-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Disulfoton	298-04-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Diuron	330-54-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Endosulfan sulfate	1031-07-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Endrin	72-20-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Endrin aldehyde	7421-93-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Epichlorohydrin	106-89-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Ethion	563-12-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Ethylbenzene	100-41-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Ethylene diamine	107-15-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Ethylene dibromide	106-93-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Fecal Coliform	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Fluoranthene	206-44-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Fluorene	86-73-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Fluoride	16984-48-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Formaldehyde	50-00-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Furfural	98-01-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
gamma-BHC	58-89-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Guthion	86-50-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Heptachlor	76-44-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Heptachlor epoxide	1024-57-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Hexachlorobenzene	118-74-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Hexachlorobutadiene	87-68-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Hexachlorocyclopentadiene	77-47-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Hexachloroethane	67-72-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Indeno(1,2,3-cd)pyrene	193-39-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Iron, Total	7439-89-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Isophorone	78-59-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Isoprene	78-79-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Isopropanolamine	78-96-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Keithane	115-32-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Kepone	143-50-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Malathion	121-75-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Manganese, Total	7439-96-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
m-Cresol	108-39-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
m-Dinitrobenzene	99-65-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Mercaptodimethur	2032-65-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methoxychlor	72-43-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methyl bromide	74-83-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methyl chloride	74-87-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methyl mercaptan	74-93-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methyl methacrylate	80-62-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methyl parathion	298-00-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Methylene chloride	75-09-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Mevinphos	7786-34-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Mexacarbate	315-18-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Monoethylamine	75-04-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Monomethylamine	74-89-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Naled	300-76-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Naphthalene	91-20-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Napthenic acid	1338-24-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
N-Butyl acetate	123-86-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
N-Butylamine	109-73-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Nitrate-Nitrite (as N)	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Nitrobenzene	98-95-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Nitrogen, Total Organic (as N)	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Nitrotoluene	1321-12-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
N-Nitrosodimethylamine	62-75-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
N-Nitroso-di-n-propylamine	621-64-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
N-Nitrosodiphenylamine	86-30-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Nonylphenol	68152-92-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
o-Cresol	95-48-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
o-Dinitrobenzene	528-29-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Oil and Grease	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Parathion	56-38-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1016	12674-11-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1221	11104-28-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1232	11141-16-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1242	53469-21-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1248	12672-29-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1254	11097-69-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
PCB-1260	11096-82-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
p-Chloro-m-cresol	59-50-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
p-Cresol	106-44-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Pentachlorophenol	87-86-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Phenanthrene	85-01-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Phenol	108-95-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Phenols, Total	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Phenolsulfonates, Total	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Phosgene	75-44-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Phosphorus, Total	7723-14-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Propargite	2312-35-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Propylene oxide	75-56-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Pyrene	129-00-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Pyrethrins	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Quinoline	91-22-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Radionuclides	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Radium, Total	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Radium-226, Total	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Resorcinol	108-46-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Strontium	7440-24-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Strychnine	57-24-9	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Styrene	100-42-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Sulfate (as SO4)	14808-79-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Sulfide (as S)	18496-25-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Sulfite (as S03)	14265-45-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Surfactants	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
TDE (Tetrachlorodiphenylethane)	72-54-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Tetrachloroethylene aka Perchloroethylene aka Tetrachloroethene	127-18-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Thallium, Total	7440-28-0	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Tin, Total	7440-31-5	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Titanium, Total	7440-32-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Toluene	108-88-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Total Organic Carbon (TOC)	n/a	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Toxaphene	8001-35-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Trichloroethylene	79-01-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Trichlorofluoromethane	75-69-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Trichlorofon	52-68-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Triethanolamine	102-71-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Triethylamine	121-44-8	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Trimethylamine	75-50-3	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Uranium	7440-61-1	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Vanadium	7440-62-2	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Vinyl acetate	108-05-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Vinyl chloride	75-01-4	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Xylene	1330-20-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Xylenol	1300-71-6	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Zirconium	7440-67-7	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Include the following information for other pollutants used or generated at the facility which are not included in the table on pages 17-27. The Industrial User shall keep these lists up-to-date. (Add sheets as needed)

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Pollutant	CAS No.	Known Absent at Facility (Y/N)	Known Present at Facility (Y/N)	Unknown Whether Present at Facility (Y/N)	Known Absent in Discharge (Y/N)	Known Present in Discharge (Y/N)	Unknown Whether Present in Discharge (Y/N)	Characterization Required (City use Only) (Y/N)
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
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Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Click or tap here to enter text.	Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Does your facility use or manufacture nanomaterials in its process? For more information:
<http://www2.epa.gov/sites/production/files/2013-12/documents/nanotechnology-fact-sheet.pdf>
If yes, please provide further information on the use, manufacture and discharge of these materials or pollutants (attach pages as necessary):
Click or tap here to enter text.

Slug Discharge Control Plan (SDCP)		
	YES	NO
Do you have a Slug Discharge Control Plan?	<input type="checkbox"/>	<input type="checkbox"/>
Date of most recent Slug Discharge Control Plan: <i>Click or tap here to enter text.</i>		
If yes, has it been submitted to the City and approved?	<input type="checkbox"/>	<input type="checkbox"/>
Is a copy of the plan kept on-site at the facility?	<input type="checkbox"/>	<input type="checkbox"/>
<p>Existing SDCPs should be attached to the permit application with the following certification, signed by the Authorized Representative, that the plan has been reviewed and reflects the current situation at the applicant’s facility: “I certify that the current Slug Discharge Control Plan submitted to the Business Operations Division is up to date and that I have the financial resources and authority to implement the plan.”</p> <p><i>Please reference “Attachment 2” if the facility does not have an existing SDCP</i></p>		

Slug Discharge Control Plan Submittal – TO BE COMPLETED BY City		
	YES	NO
Is the City requiring that the Industrial User completing this application submit a SDCP as described in Attachment 2?	<input type="checkbox"/>	<input type="checkbox"/>
If the Industrial User is not required to submit a SDCP with this application, the City will be notifying the Industrial User if and when a SDCP shall be submitted.		

Current and Projected Waste Reduction (Pollution Prevention) Activities		
Current	Projected	Description
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	Improved maintenance scheduling recordkeeping, or procedures.
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	Changed production schedule to minimize equipment and feedstock changeovers.
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	Other changes in operating practices (explain briefly in comments).
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	Instituted procedures to ensure that materials do not stay in inventory beyond shelf-life.
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	Began to test outdated material-continue to use if still effective.
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	Eliminated shelf-life requirements for stable materials.

Click or tap here to enter text.	Click or tap here to enter text.	Instituted better labeling procedures.
Click or tap here to enter text.	Click or tap here to enter text.	Instituted clearinghouse to exchange materials that would otherwise be discarded.
Click or tap here to enter text.	Click or tap here to enter text.	Other changes in inventory control (explain briefly in comments).
Click or tap here to enter text.	Click or tap here to enter text.	Improved storage or stacking procedures.
Click or tap here to enter text.	Click or tap here to enter text.	Improved procedures for loading, unloading and transfer operations.

Current and Projected Waste Reduction (Pollution Prevention) Activities

Current	Projected	Description
Click or tap here to enter text.	Click or tap here to enter text.	Installed overflow alarms or automatic shutoff valves.
Click or tap here to enter text.	Click or tap here to enter text.	Installed secondary containment.
Click or tap here to enter text.	Click or tap here to enter text.	Installed vapor recovery systems.
Click or tap here to enter text.	Click or tap here to enter text.	Implemented inspection or monitoring program of potential spill or leak sources.
Click or tap here to enter text.	Click or tap here to enter text.	Other spill and leak prevention (explain briefly in comments).
Click or tap here to enter text.	Click or tap here to enter text.	Increased purity of raw materials.
Click or tap here to enter text.	Click or tap here to enter text.	Substituted raw materials.
Click or tap here to enter text.	Click or tap here to enter text.	Other raw material modifications (explain briefly in comments).
Click or tap here to enter text.	Click or tap here to enter text.	Instituted recirculation within a process
Click or tap here to enter text.	Click or tap here to enter text.	Modified equipment, layout, or piping
Click or tap here to enter text.	Click or tap here to enter text.	Use of a different process catalyst
Click or tap here to enter text.	Click or tap here to enter text.	Instituted better controls on operating bulk containers to minimize discarding of empty containers
Click or tap here to enter text.	Click or tap here to enter text.	Changed from small volume containers to bulk containers to minimize discarding of empty containers
Click or tap here to enter text.	Click or tap here to enter text.	Other process modifications (explain briefly in comments)
Click or tap here to enter text.	Click or tap here to enter text.	Modified stripping / cleaning equipment.

Current and Projected Waste Reduction (Pollution Prevention) Activities

Current	Projected	Description
Click or tap here to enter text.	Click or tap here to enter text.	Changed to mechanical stripping / cleaning devices (from solvents or other materials)
Click or tap here to enter text.	Click or tap here to enter text.	Changed to aqueous cleaners (from solvents or other materials)
Click or tap here to enter text.	Click or tap here to enter text.	Reduced the number of solvents used to make waste more amenable to recycling
Click or tap here to enter text.	Click or tap here to enter text.	Modified containment procedures for cleaning units
Click or tap here to enter text.	Click or tap here to enter text.	Improved draining procedures
Click or tap here to enter text.	Click or tap here to enter text.	Redesign parts racks to reduce drag-out
Click or tap here to enter text.	Click or tap here to enter text.	Modified or installed rinse systems
Click or tap here to enter text.	Click or tap here to enter text.	Improved rinse equipment design
Click or tap here to enter text.	Click or tap here to enter text.	Improved rinse equipment operation
Click or tap here to enter text.	Click or tap here to enter text.	Other cleaning and degreasing operation (explain briefly in comments)
Click or tap here to enter text.	Click or tap here to enter text.	Modified spray systems or equipment
Click or tap here to enter text.	Click or tap here to enter text.	Substituted coating materials used
Click or tap here to enter text.	Click or tap here to enter text.	Improved application techniques
Click or tap here to enter text.	Click or tap here to enter text.	Changed from spray to other system
Click or tap here to enter text.	Click or tap here to enter text.	Other surface preparation and finishing (explain briefly in comments)
Click or tap here to enter text.	Click or tap here to enter text.	Changed product specifications

Current and Projected Waste Reduction (Pollution Prevention) Activities

Current	Projected	Description
here to enter text.	here to enter text.	
Click or tap here to enter text.	Click or tap here to enter text.	Modified design or composition of product
Click or tap here to enter text.	Click or tap here to enter text.	Modified packaging
Click or tap here to enter text.	Click or tap here to enter text.	Other product modifications (explain briefly in comments)

Current and Projected Waste Reduction (Pollution Prevention) Activities

Current	Projected	Description
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
<p>Comments: Click or tap here to enter text.</p>		

HAZARDOUS WASTE DISCHARGE REPORTING NOTIFICATION

This notification is intended to inform your business of their obligations under 40 CFR Section 403.12(p) and Tacoma Municipal Code (TMC) 12.08.150.C to report discharges of hazardous waste to the sanitary sewer.

The Industrial User shall notify the City, the EPA Regional Waste Management Division Director, and State hazardous waste authorities in writing of any discharge into the POTW of a substance, which, if otherwise disposed of, would be a hazardous waste under 40 CFR Part 261. Such notification must include the name of the hazardous waste as set forth in 40 CFR Part 261, the EPA hazardous waste number, and the type of discharge (continuous, batch, or other). If the Industrial User discharges more than 100 kilograms of such waste per calendar month to the POTW, the notification shall also contain the following information to the extent such information is known and readily available to the Industrial User: An identification of the hazardous constituents contained in the wastes, an estimation of the mass and concentration of such constituents in the wastestream discharged during that calendar month, and an estimation of the mass of constituents in the wastestream expected to be discharged during the following twelve months. All notifications must take place within 180 days of the effective date of this rule. Industrial Users who commence discharging after the effective date of this rule shall provide the notification no later than 180 days after the discharge of the listed or characteristic hazardous waste. Any notification under this paragraph need be submitted only once for each hazardous waste discharged. However, notifications of changed discharges must be submitted under 40 CFR 403.12 (j). The notification requirement in this section does not apply to pollutants already reported under the self-monitoring requirements of 40 CFR 403.12 (b), (d), and (e).

The City is requiring this notification for the discharge of hazardous waste to the POTW and the report shall be made immediately upon learning of the discharge.

The Authorized Representative for the facility shall review and sign this application and return to the City with the completed permit application (see TMC 12.08.140.F).

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 upon my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted 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/or imprisonment for knowing violations.

Signature of Authorized
Representative for facility Owner

Date

Printed Name

Title

For an existing discharger subject to a new Categorical Standard (not a New Source), check the appropriate box and complete the Signatory Certification by a Qualified Professional:

I certify that based upon my review of this Permit Application, that all applicable Pretreatment Standards will be met on a consistent basis.

All applicable Pretreatment Standards will NOT be met on a consistent basis. Attached to the Permit Application is a description that I have reviewed regarding additional pretreatment needed and/or Operation and Maintenance required to meet applicable Pretreatment Standards.

Signature of Qualified Professional

Date

Printed Name and Name of Firm

Title

The Authorized Representative for the Operator, or the Facility, or treatment plant, if different from Authorized Representative of the Industrial User, shall also review the information, sign this application and return it to the City with the completed permit application.

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 upon my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted 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/or imprisonment for knowing violations.

Signature of Authorized
Representative for Operator

Date

Printed Name

Title

Attachment 1

Authorized Representative of the Industrial User:

1. If the Industrial User is a corporation:
 - a. The president, secretary, treasurer, or vice president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or
 - b. The manager of one or more manufacturing, production, or operation facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25,000,000, if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures;
2. If the Industrial User is a partnership or sole proprietorship: a general partner or proprietor, respectively;
3. If the Industrial User is a federal, state, or local governmental facility: a director or highest official appointed or designated to oversee the operation and performance of the activities of the government facility, or his or her designee;
4. The individuals described in paragraphs 1 through 3 above may designate another authorized representative if the authorization is in writing, the authorization specifies the individual or position responsible for the overall operation of the facility from which the discharge originates or having overall responsibility for environmental matters for the company, and the written authorization is submitted to the City.

Industrial User: A source of an indirect discharge or any other industrial or commercial facility or business that has a sewer connection to the POTW, whether or not the Industrial User discharges non-domestic wastewater.

Significant Industrial User (SIU): Except as provided in subparagraph 3, "Significant Industrial User" means:

1. All Industrial Users subject to Categorical Pretreatment Standards under 40 CFR 403.6 and 40 CFR Chapter I, Subchapter N.
2. Any other Industrial User which discharges an average of 25,000 gallons per day or more of process wastewater to the POTW (excluding domestic, noncontact cooling and boiler blowdown wastewater); or contributes a process waste stream which makes up 5 percent or more of the average dry weather hydraulic or organic capacity of the POTW; or is designated as such by the Director on the basis that the Industrial User has a reasonable potential for adversely affecting the POTW's operation; or for violating any pretreatment standard or requirement (in accordance with 40 CFR 403.8 (F)(6), as found in 55 FR 30128, July 24, 1990).
3. Upon finding that an Industrial User meeting the criteria in paragraph 2 above has no reasonable potential for adversely affecting the POTW's operation or for violating any pretreatment standard or requirements, the Director may, at any time, on his or her own initiative or in response to a petition received from an Industrial User, and in accordance with 40 CFR 403.8(F)(6), determine that such Industrial User is not a Significant Industrial User.

Attachment 2

City of Tacoma Industrial Pretreatment Program

SLUG DISCHARGE CONTROL PLAN

Date	Click or tap here to enter text.
Company Representative (print)	Click or tap here to enter text.
Representative Title (print)	Click or tap here to enter text.
Phone Number	Click or tap here to enter text.

I. General Information

Industrial User/Company Name	Click or tap here to enter text.
Physical Address	Click or tap here to enter text.
Mailing Address	Click or tap here to enter text.
Discharger's Permit Number	Click or tap here to enter text.
Authorized Representative of the Industrial User	Click or tap here to enter text.
24-Hour Phone Number	Click or tap here to enter text.
Email Address	Click or tap here to enter text.
Secondary Facility Contact	Click or tap here to enter text.
24-Hour Phone Number	Click or tap here to enter text.
Email Address	Click or tap here to enter text.

II. Facility Description

Description of Business Operations	Click or tap here to enter text.
Operation Hours	Click or tap here to enter text.
Number of Employees	Click or tap here to enter text.

III. Slug/Spill Control

Slug Load or Slug Discharge means: Any discharge at a flow rate or concentration which could cause a violation of any Pretreatment Standard or Requirement, as defined by 40 CFR Part 403.3(1) including any discharge of a non-routine, episodic nature, including, but not limited to, an accidental spill or a non-customary batch discharge.

IV. Slug Discharge Control Plan (SDCP)

Prepare and submit a Slug Discharge Control Plan. The Slug Discharge Control Plan shall address, at a minimum, the following:

1. Detailed plans (schematics) showing facility layout and plumbing representative of operating procedures. Attach detailed drawings of facility, including locations of all:
 - Raw materials;
 - Chemicals;
 - Wastes – solid and/or liquid;
 - Floor drains;
 - Discharge points to sewer-floor drains/sinks;
 - Outside exits;
 - Posted notices of emergency contacts; and
 - Storm water drains
2. Description of contents and volumes of any process tanks
3. Description of discharge practices, including non-routine batch discharges
4. Listing of all stored chemicals and raw materials, including location and volumes - include a description of any secondary containment or procedures to isolate these storage areas and visual or audio alarms that used to notify of a spill or slug.
5. Procedures for immediately notifying the City of any spill or Slug Discharge. A notice to employees shall be permanently posted on the Industrial User's bulletin board or other prominent place advising employees who to call in the event of an accidental or slug discharge. Also provide a copy of the notice for employees. Employers shall ensure that all employees who work in any area where an accidental or slug discharge may occur or originate are advised of the emergency notification procedures. Provide a synopsis of your training program for employees.
6. Procedures to prevent adverse impact from any accidental or Slug Discharge. Provide specific procedures to prevent adverse impact from accidental spills and slug discharges including:
 - Inspection and maintenance of storage areas;
 - Handling and transfer of materials;
 - Loading and unloading operations;
 - Control of plant site run-off;
 - Building of containment structures or equipment;
 - Measures for containing toxic organics (including solvents); and
 - Measures and equipment for emergency response.

V. Notification of Slug Discharge

In the case of any changes at its facility affecting potential for a Slug Discharge or any actual discharge, the Industrial User shall immediately telephone and notify the City of the incident at:

Monday-Friday, 7 am - 3:30 pm: (253-502-2222)

If no answer or at other days/times: (253-591-5595). This notification shall include:

1. Name of the facility;
2. Location of the facility;
3. Name of the caller;
4. Date and time of discharge ;
5. Date and time discharge was halted ;
6. Location of the discharge;
7. Estimated volume of discharge ;
8. A general description of the material that was discharged;
9. Estimated concentration of pollutants in discharge;
10. Corrective actions taken to halt the discharge; and
11. Method of disposal if applicable.

Within five (5) working days following such discharge, the Industrial User shall submit a detailed written report describing the cause(s) of the discharge and the measures to be taken by the Industrial User to prevent similar future occurrences. Such notification shall not relieve the Industrial User of any expense, loss, damage, or other liability which might be incurred as a result of damage to the POTW, natural resources, or any other damage to person or property; nor shall such notification relieve the Industrial User of any fines, penalties, or other liability which may be imposed. Reports shall be provided to:

Pretreatment Coordinator
City of Tacoma
2201 Portland Ave East
Bldg. P-1
Tacoma WA, 98421

VI. Signature and Certification

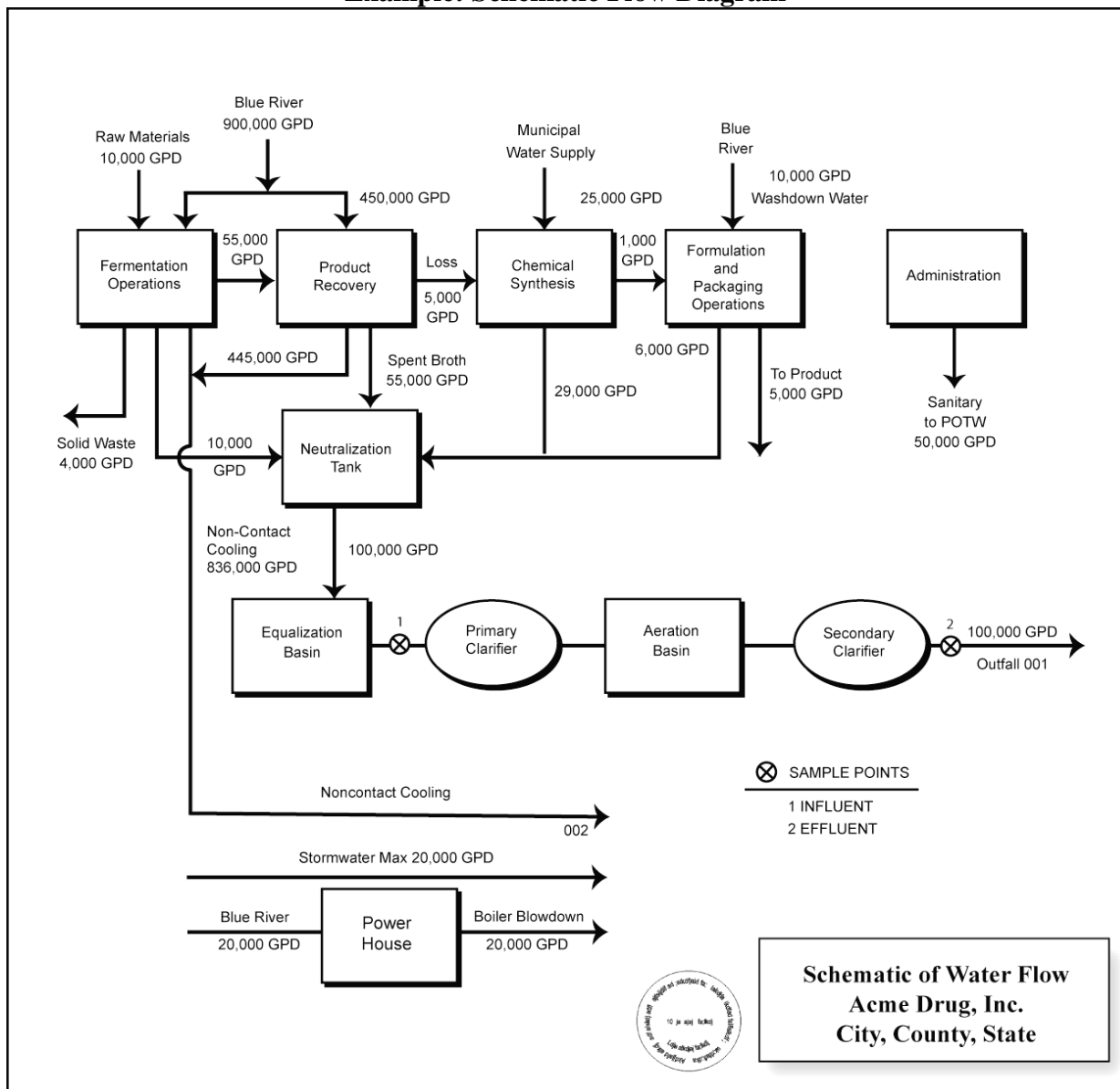
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted 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):	Click or tap here to enter text.
Title:	Click or tap here to enter text.

<p>Signature of Authorized Representative of the Industrial User:</p>	<p>Click or tap here to enter text.</p>
<p>Date:</p>	<p>Click or tap here to enter text.</p>

Attachment 3

Example: Schematic Flow Diagram



Attachment 4

Example: Facility Schematic

