

Return to:

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UPPER SAUCON TOWNSHIP
INDUSTRIAL PRETREATMENT PROGRAM
WASTEWATER DISCHARGE APPLICATION

GENERAL USERS

Please complete this application as accurately as possible. The information requested in this form may be used in conjunction with results of inspections, wastewater discharge sampling and/or data provided in the Industrial/Commercial Waste Questionnaire to develop a user permit for your facility. Additional pages can be attached to elaborate on any answers.

A. GENERAL INFORMATION

User Name: _____

Mailing Address: _____

Address of Premises: _____

Name & Title of Signing Official: _____

Person to Whom Any Further Inquiries Should be Directed:

Facility Contact: _____ Phone No. _____

Alternate Contact: _____ Phone No. _____

The information contained in this application report is familiar to me and to the best of my knowledge and belief, such information is true, complete, and accurate. I am aware that there are significant penalties for submitting false information, including the possibility of fines of up to \$25,000.00 per day and suspension or termination of sewer service.

Signature of Official: _____ Date: _____

B. OPERATION DESCRIPTION

List brief description for each section.

Principal products or services: _____

Standard Industrial Classification Code(s) (4-digit SIC): _____

Brief description of manufacturing or service activity on premises: _____

Principal raw materials used: _____

Catalysts, intermediates: _____

Type of operation (check one): Batch _____ Continuous _____

If batch, describe schedule: _____

Is production/operation seasonal? _____

If yes, explain, indicating time(s) of peak production/operation, low production/operation and scheduled shutdowns: _____

Average number of employees per shift: 1st _____ 2nd _____ 3rd _____

Shift start times: 1st _____ 2nd _____ 3rd _____

Shifts normally worked each day (check appropriate shifts):

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
1st	_____	_____	_____	_____	_____	_____	_____
2nd	_____	_____	_____	_____	_____	_____	_____
3rd	_____	_____	_____	_____	_____	_____	_____

C. WATER SUPPLY

List raw water sources (e.g., well water, stream water, purchased water, etc.):

<u>Source</u>	<u>Quantity</u>	
	<u>Gallons per Day</u>	<u>Gallons per Year</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Totals	_____	_____

Describe any raw water treatment processes in use: _____

D. WATER USE AND DISPOSAL

List Water Uses:

<u>Use</u>	<u>Quantity</u>	
	<u>Gallons per Day</u>	<u>Gallons per Year</u>
Sanitary System	_____	_____
Contained in Product	_____	_____
Cooling Water	_____	_____
Boiler Feed	_____	_____
Process Water	_____	_____
Other (specify)	_____	_____
Totals	_____	_____

List volume of discharge or water loss to the following:

<u>Discharge</u>	<u>Quantity</u>	
	<u>Gallons per Day</u>	<u>Gallons per Year</u>
Public wastewater sewer	_____	_____
Storm sewer	_____	_____
Stream Discharge	_____	_____
Waste Hauler	_____	_____
Evaporation	_____	_____
Contained in Product	_____	_____
Totals	_____	_____

Does your facility have an NPDES, or other Permit? If so, list:

<u>Type</u>	<u>Permit No.</u>
NPDES Permit	_____
Hazardous Use Permit	_____
Air Quality Permit	_____
Health Permit	_____
Other (specify) _____	_____

Characterize wastewater discharged to the public sewer:

<u>Type Of Discharge</u>	<u>Quantity</u>	
	<u>Gallons per Day</u>	<u>Gallons per Year</u>
Sanitary Wastewater	_____	_____
Process Wastewater	_____	_____
Totals	_____	_____

Future Expansion

Any plans for future expansion?_____

Anticipated additional wastewater discharge: process/sanitary_____

List plant sewer connections (attach and refer to a map or diagram):

<u>Location of Connection</u>	<u>Size of Connection</u>	<u>Wastewater Source (process/sanitary)</u>	<u>Quantity of Discharge (gallons per day)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is discharge to wastewater sewer: Intermittent_____; Steady_____;

If intermittent, describe schedule as fully as possible including average daily flow rates, peak rates, time and duration of discharge, etc:

E. WASTEWATER CHARACTERISTICS

List unit **process** wastewater streams in terms of source and quantity:

<u>Type Of Process Discharge</u>	<u>Quantity</u>	
	<u>Gallons per Day</u>	<u>Gallons per Year</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Totals	_____	_____

Discharge Quality: (If available)

<u>Parameter</u>	<u>Quantity</u>		
	<u>mg/l</u>	<u>lbs/day</u>	<u>Other Units (specify)</u>
Biochemical Oxygen Demand (BOD)	_____	_____	_____
Total Suspended Solids (TSS)	_____	_____	_____
Oil and Grease	_____	_____	_____
Ammonia, as N	_____	_____	_____
pH	_____	_____	_____
Temperature	_____	_____	_____
Phosphorus, as Total P	_____	_____	_____
Other, specify:	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe source of above data by date, method of collection and analysis, and laboratory conducting analyses:

List any toxicants known or anticipated to be present in the plant:

F. PRETREATMENT

Describe any wastewater treatment equipment or pretreatment equipment in use:

Is this plant subject to an any Federal Pretreatment Standards? (describe):

If so, are Pretreatment Standards being met on a consistent basis?

Yes_____ No_____

Are additional pretreatment facilities and/or operation and maintenance procedures required to meet Pretreatment Standards?_____

If additional pretreatment and/or operation and maintenance are required, list the schedule by which they will be provided:

What are the characteristics of the residuals (e.g. sludge) generated from the pretreatment facility?

Quantity: _____ gallons per day
_____ lbs/day
_____ dry volume, cubic feet

Moisture Content: _____ percent solids

Type of Sludge: _____ Biological (Y/N)
_____ Inert (Y/N)
_____ Toxic (Y/N)

Is the sludge generated by a listed Resource Conservation And Recovery Act (RCRA) waste, or characteristic of a hazardous waste (i.e. ignitable, reactive, corrosive, or EP toxic)?_____

How do you currently dispose of the pretreatment residuals? Check one or more.

Public sewer _____
Storm sewer _____
Haul to landfill _____ Located at _____
Private contractor _____
Manifest # _____