

## COMMERCIAL/INDUSTRIAL WASTE DISCHARGE PERMIT APPLICATION

1. Type or print all requested information. Incomplete application will delay the review process. Include initial permit fee of \$600.00
2. Attach any additional sheets of information as necessary or required.
3. This application must be signed by a Company Authorized Representative which shall be as follows:
  - A) By a responsible corporate officer which means, a president, secretary, treasurer, vice president or any other person who performs similar policy or decision making functions for the corporation.
  - B) By a general partner or proprietor.
  - C) By a duly authorized representatives of the individuals designated in A) or B). This authorization is to be made in writing and shall be submitted with this application. This authorization specifies either an individual or a position have responsibility for the overall operation of the facility or a position of equivalent responsibility, or having overall responsibility for environmental matters for the company.
4. If any questions arise concerning this application, contact the Engineering Department at (760) 789-1330.
5. Return the completed and signed application to:

Ramona Municipal Water District  
Engineering Department  
105 Earham Street  
Ramona, CA 92065

COMMERCIAL/INDUSTRIAL WASTE DISCHARGE PERMIT APPLICATION

Section A - General Information

A1. Business name of applicant: \_\_\_\_\_

A2. Facility address:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_

A3. Mailing address: (if different than facility)  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_

A4. Consultant name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_

A5. Person(s) to contact concerning this application:

	Name	Phone
Applicant contact:	_____	_____
Consultant Contact:	_____	_____
Sampling Contact:	_____	_____

A6. Are you the (check one)  Land Owner  Lessee  
If lessee, include the name, address and phone number of  
 Owner  Manager  
Name: \_\_\_\_\_ Phone \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_

A7. Describe the business activity occurring at the facility. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A8. Attach a sketch or scaled drawing of the facility site. If known, show the locations of the sewer laterals and possible sample points. Include building walls, streets, alleys, process areas or equipment, and any other pertinent physical structure.

A9. Attach a drawing of the pretreatment processes, if applicable, describing flow, operation and sampling points.

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OFFICIAL USE ONLY

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Date application mailed \_\_\_\_\_ Received \_\_\_\_\_  
Date permit issued \_\_\_\_\_ Expiration \_\_\_\_\_  
Permit # \_\_\_\_\_  
Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

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Section B - Waste Description

B1. Discharge is  Existing  Proposed  
If discharge is proposed, what is the anticipated date of discharge initiation: \_\_\_\_\_

B2. Proposed Quantities - List the estimated gallons per day to be discharged. \_\_\_\_\_

B3. Indicate with an (X) any of the following constituents, characteristics, or substances that are or could be present in the wastewater discharged as a result of this facility's operations or by accidental spill.

- | (X)                      | CONSTITUENTS             | (X)                      | CONSTITUENTS              |
|--------------------------|--------------------------|--------------------------|---------------------------|
| <input type="checkbox"/> | Alcohols (1)             | <input type="checkbox"/> | Molybdenum                |
| <input type="checkbox"/> | Algicides (1)            | <input type="checkbox"/> | Nickel                    |
| <input type="checkbox"/> | Aluminum                 | <input type="checkbox"/> | Odorous Wastes (1)        |
| <input type="checkbox"/> | Ammonia                  | <input type="checkbox"/> | Oil & Grease (1)          |
| <input type="checkbox"/> | Antimony                 | <input type="checkbox"/> | PCB's                     |
| <input type="checkbox"/> | Arsenic                  | <input type="checkbox"/> | Pesticides (1)            |
| <input type="checkbox"/> | Barium                   | <input type="checkbox"/> | pH - acids (1)            |
| <input type="checkbox"/> | Beryllium                | <input type="checkbox"/> | pH - caustic (1)          |
| <input type="checkbox"/> | Boron                    | <input type="checkbox"/> | Phenols (1)               |
| <input type="checkbox"/> | Bromide                  | <input type="checkbox"/> | Phosphorus                |
| <input type="checkbox"/> | Cadmium                  | <input type="checkbox"/> | Potassium                 |
| <input type="checkbox"/> | Calcium                  | <input type="checkbox"/> | Radioactive Wastes (1)    |
| <input type="checkbox"/> | Chloride                 | <input type="checkbox"/> | R.O./ other Brines (1)    |
| <input type="checkbox"/> | Chlorinated Solvents (1) | <input type="checkbox"/> | Selenium                  |
| <input type="checkbox"/> | Chlorine                 | <input type="checkbox"/> | Silver                    |
| <input type="checkbox"/> | Chromium                 | <input type="checkbox"/> | Sodium                    |
| <input type="checkbox"/> | Cobalt                   | <input type="checkbox"/> | Solvents (1)              |
| <input type="checkbox"/> | Copper                   | <input type="checkbox"/> | Sulfate                   |
| <input type="checkbox"/> | Cyanide                  | <input type="checkbox"/> | Sulfide                   |
| <input type="checkbox"/> | Fibrous Wastes (1)       | <input type="checkbox"/> | Sulfite                   |
| <input type="checkbox"/> | Flammable Solvents       | <input type="checkbox"/> | Surfactants - MBAS (1)    |
| <input type="checkbox"/> | Fluoride                 | <input type="checkbox"/> | Temp - Increase (1)       |
| <input type="checkbox"/> | Fuels (1)                | <input type="checkbox"/> | Temp - Decrease (1)       |
| <input type="checkbox"/> | Formaldehyde             | <input type="checkbox"/> | Titanium                  |
| <input type="checkbox"/> | Hydrocarbons (1)         | <input type="checkbox"/> | Tin                       |
| <input type="checkbox"/> | Iodide                   | <input type="checkbox"/> | Toxic Organics (1)        |
| <input type="checkbox"/> | Iron                     | <input type="checkbox"/> | Uncontaminated Water      |
| <input type="checkbox"/> | Ketones (1)              | <input type="checkbox"/> | Vanadium                  |
| <input type="checkbox"/> | Lead                     | <input type="checkbox"/> | Viscous Wastes/Solids (1) |
| <input type="checkbox"/> | Magnesium                | <input type="checkbox"/> | Zinc                      |
| <input type="checkbox"/> | Manganese                | <input type="checkbox"/> | Other (1)                 |
| <input type="checkbox"/> | Mercury                  |                          |                           |

B4. Identify the chemical constituents or elements checked above followed by (1). \_\_\_\_\_

\_\_\_\_\_

B5. Describe the wastewater to be discharged. \_\_\_\_\_

\_\_\_\_\_

B6. Describe any known or suspected pollutant source (s) and history of the contaminant of the waste to be discharged. \_\_\_\_\_

\_\_\_\_\_

B7. Describe any pretreatment prior to discharge to the sewer system, and give expected pollutant removal efficiencies. \_\_\_\_\_

\_\_\_\_\_

B8. Proposed discharged period.

a. discharged will occur daily from \_\_\_\_\_ to \_\_\_\_\_

b. circle the day(s) of the week that discharge will occur.

S M T W T F S

c. circle the month (s) of the year the discharge will occur.

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

d. indicate the total proposed discharge period (years). \_\_\_\_\_

B9. Describe sludge disposal methods that will be utilized, if applicable. Sludge is not to be discharged into the sewer system.

\_\_\_\_\_

\_\_\_\_\_

B10. Describe grease disposal methods that will be utilized, if applicable. Grease is not to be discharged into the sewer system. \_\_\_\_\_

\_\_\_\_\_

B11. Describe sand/oil disposal methods that will be utilized, if applicable. Sand/oil are not to be discharged into the sewer system. \_\_\_\_\_

\_\_\_\_\_

B12. Describe any other pertinent facts or factors that warrant consideration. \_\_\_\_\_

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B13. Attach laboratory analyses to verify contaminants and concentrations for any constituents identified in B3.

Section C - Diagrams

- C1. Attach description of the proposed pumping plan, if applicable, including number and size of wells, type and capacity of pumps and all other related information.
- C2. Attach as accurate a diagram of the plume or area of contamination, as is available.

Section D - Requirements

D1. Fully describe the waste disposal options and alternatives considered. Explain the need to discharge to the public sewer.

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D2. Certify that the waste to be discharged is or is not considered to be toxic or hazardous using criteria established by regulations of the EPA and the State.  
Toxic:         Yes         No        Hazardous     Yes         No  
If yes, explain: \_\_\_\_\_

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D3. Attach a copy of the National Pollution Discharge Elimination System (NPDES) permit application, if applicable, that was sent into the local Regional Water Quality Control Board (RWQCB).

D4. Attach a copy of the issued NPDES permit, if applicable, or the letter from the local RWQCB indicating the reasons for denial of the permit.

D5. Before considering any waste for disposal that has been denied an NPDES permit a "Letter of Request" to accept the waste into the public sewer must be received by the local RWQCB and signed by its Executive Officer.

Section E - Certification Statements

Note to signing company authorized representative:

Information and data identifying the nature and frequency of a discharge shall be available to the public. Request for confidential treatment of all other information shall be governed by procedures specified in 40 CFR, Part 2.

This firm's operation and its resultant wastewater discharge shall achieve consistent compliance with applicable Local, State and Federal wastewater discharge requirements. If the wastewater does not meet all the applicable regulation, the company shall modify process equipment, limit production, limit industrial waste discharge, install pretreatment equipment and shall do whatever is necessary to comply with all discharge requirements.

To be signed by a Company Authorized Representative:

"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."

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_