



INDUSTRIAL PRETREATMENT PERMIT APPLICATION

In accordance with Title 40 of the Code of Federal Regulations, Part 403.14, information and data provided in this permit application which identifies the nature and frequency of discharge shall be available to the public, without restriction. Requests for confidential treatment of other information shall be governed by procedures defined in 40 CFR Part 2. The completed and signed application is to be mailed within thirty (30) days of your receipt to:

City of Surprise
 Water Services Department-Environmental Division
 12425 West Bell Road, Suite D-100
 Surprise, AZ 85374-9002

OFFICIAL USE ONLY

- Survey
- Class I Permit Application
- Class II Permit Application
- Zero Discharge
- Baseline Monitoring Report
- Other _____

Analyst: _____

Date: _____

Phone: 623.222.7000 or 623.222.7035
 Fax 623.222.7001

1. GENERAL INFORMATION

Legal Name:	Facility Name:
Mailing Address:	Address:
City/State/Zip:	City/State/Zip:
Name of Owner:	Name of Operator:
Name of Owner:	Name of Operator:
Facility Contact:	Property Owner:
Title:	Property Management:
Phone Number:	Phone Number:

2. NATURE OF OPERATION

Raw Materials Used

Describe Manufacturing or Service Conducted

Final Products

Summary of Each Regulated Process

Process Description	Production Rate	40-CFR	Sub-Part	SIC

3. WATER USAGE

Is Water used in manufacturing Process? <input type="checkbox"/> Yes <input type="checkbox"/> No		Source of Water? <input type="checkbox"/> City <input type="checkbox"/> Private Well <input type="checkbox"/> Metered <input type="checkbox"/> Unmetered	
Water Account Numbers (Please indicate if meter is used for landscape [L] or fire protection [FP] only)		Daily Water Usage (Total of all Sources)	
1. _____	2. _____	Maximum _____ Gallons / Time of Day _____	
3. _____	4. _____	Minimum _____ Gallons / Time of Day _____	
5. _____	6. _____	Average _____ Gallons	

4. WASTEWATER DISCHARGES

Total Facility Discharge in Gallons per Day: Average _____ Maximum _____	Provide the names(s) of the treatment works that receives your facility's wastewater discharges: 1. _____ 2. _____
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List Individual Regulated Process Wastewater Discharge(s) in Gallons per Day			
Process	Average Discharge	Maximum Discharge	Type of Discharge (Batch, Con., None)

List Individual Non-Regulated Process Wastewater Discharge(s) in Gallons per Day			
Process	Average Discharge	Maximum Discharge	Type of Discharge (Batch, Con., None)
Cooling Wastewater Discharged			
Boiler Wastewater Discharged			
Total Process Wastewater to Sewer			
Total Sanitary Wastewater to Sewer			
Total Discharge to Sewer			

List the average water loss in gallons per day to:			
Landscape Irrigation		Evaporation	
Contained in Product		Waste Recycled	
Liquid Waste Hauled			
Natural Outlet			
Description of Location			
Other		Specify:	
Total Loss (Not to Sewer)			

Provide on a schematic drawing identifying all wastewater discharges and water losses listed above. The schematic must

include the location of any onsite treatment systems and sampling locations. A copy of construction drawings verifying plumbing and treatment facilities must be included with the schematic.

5. HAZARDOUS WASTE

Does the facility generate **any** hazardous waste? Yes No (*List Below*)

Is **any** hazardous waste discharged to the sewer (i.e. Washdowns, rinses, and spills)? Yes No

If Yes, was the City of Surprise notified? Yes No

Does the facility submit Form R? Yes No (*Submit Copies*)

Industry and Hazardous Waste Number	Contaminate/Waste/Substance	Chemical Abstract Number	Hauled (H) Discharged to Sewer (DS) Other (O)

Waste Disposal Information

Waste Transporter	Address	Phone	Permit/Certification

Waste Disposal Site	Address	Phone	Permit/Certification

Waste Recycling	Address	Phone	Permit/Certification

Attach a copy of the preceding year's waste hauling/disposal manifests from the Arizona Department of Environmental Quality Annual Report.

6. PRETREATMENT

Pretreatment Equipment	Size/Capacity	Location
pH Neutralization		
Silver Recovery		
Interceptor		
Grease Trap		

Other (Describe and Submit plans)

7. SLUG LOAD – TOXIC ORGANIC MANAGEMENT PLAN

Does the facility have a Slug Load Control Plan? Yes No (Submit Copy)

Does the facility have a Toxic Organic Management Plan (TOMP)? Yes No (Submit Copy)

8. CHEMICAL USAGE – STORAGE

	Onsite Yes	Onsite No	Discharged to Sewer (Yes/No)	Maximum Amount Stored On-Site	Amount Used in Process	Disposal Method
Acid						
Caustic						
Organic						
Flammable						

9. HAZARDOUS MATERIALS USED

Does the facility use *any* hazardous materials (*D.O.T. Definition*) **other** than those listed in Section 9? Yes No
 (List Below)

Industry and Hazardous Number	Substance/Description	Chemical Abstract Number	Hauled (H) Discharged to Sewer (DS) Used in Process (UP) Other (O)

10. TOXIC POLLUTANTS – USED- STORED - PRODUCED

Chemical	Amount of Chemicals On Site (lbs. or Gal)	Amount Used per Day	Amount Produced Day	Final Disposition (Estimates)			
				% in Product	% to Sewer	% to Waste Hauler	% to Evap.
Acenaphthene							
Acenaphthylene (PAH)							
Acrolein							
Acrylonitrile							
Aldrin							
Antimony							
Anthracene							
Arsenic							
1,2 Benzanthracene (PAH)							
Benzene							
Benzidine							
Benzo (a) Pyrene							
3,4 Benzofluoranthene (PAH)							
Benzo (k) Fluoranthene (PAH)							
1,12 Benzoperylene (PAH)							
Beryllium							
Bromoform							
Bromomethane							
4 Bromophenyl Phenyl Ether							
Cadmium							
Carbon Tetrachloride							
Chlordane							
Chlorobenzene							
Chlorodibromomethane							
Chloroethane							
Chloroethyl Ether (Bis-2)							
1 Chloroethoxy Methane (Bis-2)							
2 Chloroethyl Vinyl Ether							
4-Chloro-3-Methylphenol							
Chloromethane (Methyl Chloride)							
Chloroform (Trichloromethane)							
2 Chlorophenol							
Chloroisopropyl Ether (Bis-2)							
2 Chloronaphthalene							
4 Chlorophenyl Phenyl Ether							
Chromium							
Chrysene (PAH)							
Copper							
Cyanide							

4,4 DDT							
4,4 DDE							
4,4 DDD							

10. TOXIC POLLUTANTS – USED- STORED – PRODUCED (CONTINUED)

Chemical	Amount of Chemicals On Site (lbs. or Gal)	Amount Used per Day	Amount Produced Day	Final Disposition (Estimates)			
				% in Product	% to Sewer	% to Waste Hauler	% to Evap.
Dibenzo (a,h) Anthracene (PAH)							
1,2 Dichlorobenzene							
1,3 Dichlorobenzene							
1,4 Dichlorobenzene							
3,3 Dichlorobenzidine							
1,1 Dichloroethane							
1,2 Dichloroethane							
1,1 Dichloroethylene							
1,2 trans-Dichloroethylene							
Dichlorobromomethane							
Dichloromethane							
2,4 Dichlorophenol							
1,2 Dichloropropane							
1,3 Dichloropropylene							
Dieldrin							
2,4 Dimethylphenol							
Diethylphthalate							
Diethylphthalate							
2,4 Dinitrotoluene							
2,6 Dinitrotoluene							
2,4 Dinitrophenol							
Dioxin (2,3,7,8-TCDD)							
1,2 Diphenylhydrazine							
Alpha Endosulfan							
Beta Endosulfan							
Endosulfan Sulfate							
Endrin							
Endrin Aldehyde							
Ethylbenzene							
Fluorene (PAH)							
Fluoranthene							
Hepatachlor							
Heptachlor Epoxide							
Hexachloroethane							
Hexachlorobenzene							
Hexachlorobutadiene							
Hexachlorocyclohexane (Lindane)							
Hexachlorocyclohexane (Alpha)							
Hexachlorocyclohexane (Beta)							

Hexachlorocyclohexane (Delta)							
Hexachlorocyclopentadiene							
Ildeno (1,2,3-cd) Pyrene (PAH)							

10. TOXIC POLLUTANTS – USED- STORED – PRODUCED (CONTINUED)

Chemical	Amount of Chemicals On Site (lbs. or Gal)	Amount Used per Day	Amount Produced Day	Final Disposition (Estimates)			
				% in Product	% to Sewer	% to Waste Hauler	% to Evap.
Isophorone							
Lead							
Mercury							
Naphthalene							
Nickel							
Nitrobenzene							
2 Nitrophenol							
4 Nitrophenol							
4,6 Dinitro-2-Methylphenol							
Nitrosodimethylamine N							
Nitrosodiphenylamine N							
Nitrosodi-N-Propylamine-N							
PCB 1242							
PCB 1254							
PCB 1221							
PCB 1232							
PCB 1248							
PCB 1260							
PCB 1016							
Phenol							
Pentachlorophenol							
Phenanthrene (PAH)							
Bis (2 Ethyl Hexyl) Phthalate							
Butyl Benzyl Phthalate							
Di-N-Butyl Phthalate							
Di-N-Octyl-Phthalate							
Pyrene (PAH)							
Selenium							
Silver							
1,1,2,2 Tetrachloroethane							
Tetrachloroethylene							
Thallium							
Toluene							
Toxaphene							
1,2,4 Trichlorobenzene							
1,1,1 Trichloroethane							
1,1,2 Trichloroethane							
Trichloroethylene							
2,4,6 Trichlorophenol							

Vinyl Chloride (Chloroethylene)							
Zinc							

11. LABORATORY ANALYSIS

If the purpose of this application is a Baseline Monitoring Report (BMR) and no representative process discharges are occurring, the Applicant shall give estimates of the information requested below.

The Applicant must perform monitoring and analysis of the effluent from all regulated process (after pretreatment, if applicable).

Sampling Technique

Grab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Flow Composite	<input type="checkbox"/>	Hand Composite	<input type="checkbox"/>	Time		Date	
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Sample Frequency

Is only regulated process wastewater discharged at the sample location? Yes No
 If No, please identify other wastewater discharges that are commingled at this sample location:

Sample Location(s)

Grab pH _____ (Standard Units) Grab Temperature _____ (Celsius)

The Applicant must monitor and provide analytical results on only those parameters marked with an "X." If none are checked, disregard this section.

A copy of the original laboratory report must be included with this application

Parameter	Average (Mg/l)	Maximum (Mg/l)	Method	Applicable Standard
<input checked="" type="checkbox"/> Biological Oxygen Demand				
<input checked="" type="checkbox"/> Suspended Solids				
<input checked="" type="checkbox"/> Total Petroleum Hydrocarbons				
<input checked="" type="checkbox"/> Dissolved Sulfides				
<input checked="" type="checkbox"/> Ammonia				
<input checked="" type="checkbox"/> NO2/NO3				
<input checked="" type="checkbox"/> Total Nitrogen				
<input checked="" type="checkbox"/> Fluoride				
<input checked="" type="checkbox"/> Cyanide - Total				
<input type="checkbox"/> Cyanide – Amenable				
<input checked="" type="checkbox"/> Arsenic				
<input checked="" type="checkbox"/> Boron				
<input checked="" type="checkbox"/> Beryllium				
<input checked="" type="checkbox"/> Cadmium				
<input checked="" type="checkbox"/> Chromium				
<input checked="" type="checkbox"/> Copper				
<input checked="" type="checkbox"/> Lead				
<input checked="" type="checkbox"/> Manganese				
<input type="checkbox"/> Mercury				
<input checked="" type="checkbox"/> Molybdenum				
<input checked="" type="checkbox"/> Nickel				
<input checked="" type="checkbox"/> Selenium				
<input checked="" type="checkbox"/> Silver				
<input checked="" type="checkbox"/> Thallium				
<input checked="" type="checkbox"/> Silver				

	Total Toxic Organic Compounds				

12. ENVIRONMENTAL CONTROL PERMITS

List *all* environmental control permits pending, issued, or revoked to this facility

Description of Permit	Permit Number	Issuing Agency	Expiration Date	Status

13. COMPLIANCE CERTIFICATION

Is the facility meeting applicable categorical pretreatment and local discharge standards on a consistent basis? Yes No

If no, do you require additional operation and maintenance to achieve compliance? Yes No

If no, do you require or plan additional pretreatment facilities to achieve compliance? Yes No

If yes, describe *(Submit copies of supporting information)*

If this is an Application for permit renewal, please answer the following question:

Within the last year, has this facility made any changes in operation that has increased or will increase the concentration, volume, or other characteristics of your discharge in the sanitary sewer? Yes No

If yes, describe *(Submit copies of supporting information)*

14. CERTIFICATION BY COMPANY OFFICIAL

A responsible corporate officer must sign this application. For the purpose of this application, a responsible corporate officer means:

A 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;

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 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the Manager in accordance with corporate procedures. By a general partner or proprietor if the Industrial User submitting the reports is a partnership or sole proprietorship, respectively.

I Certify under penalty of law that I am familiar with, and have personally examined the information in this application and all attached documents, and based on my inquiry of those persons immediately responsible for obtaining the information contained in this application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. Submittal of false information in this application shall result in denial of a permit being issued.

_____ Name of Authorized Representative	_____ Official Title
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Signature	Date	Phone
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