



UPPER BLACKSTONE WATER POLLUTION ABATEMENT DISTRICT

Engineer - Director / Treasurer Karla H Sangrey, P.E.

Industrial/Commercial HAULED WASTE PERMIT APPLICATION (BASELINE MONITORING REPORT)

(Note to Signing Official: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.12 (b) & 403.14, information and data provided herein which identifies the nature and frequency of the discharge shall be available to the public without restriction. Requests for confidential treatment of information shall be governed by procedures specified in 40 CFR Part 2 PUBLIC INFORMATION.)

1. **Corporate/Company Name:** _____
2. **Company Mailing Address:** _____
3. **Facility Premise address:** _____
4. **SIC Number(s):** _____
5. **Person to Contact Concerning Information Provided Herein:**
Name: _____ Phone: _____
E-mail address: _____
6. **Name of Owner:** _____
 - a. **Certified Statement:**
Are Upper Blackstone's Sewer and Pretreatment Standards for this company being met on a consistent basis?
() yes () no
 - b. **Year of Incorporation:** _____

I have personally examined and am familiar with the information submitted in this document and attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information reported here, I believe that the submitted information is true, accurate, and complete. Furthermore, I certify that the results of process effluent sampling and analysis submitted with this application are representative of normal work cycles and expected hauled waste loads. I have also, read and understand the Upper Blackstone Water Pollution Abatement District's Sewer and Pretreatment Regulations.

Signature of Authorized Representative

(Date)

7. **Listing of all Environmental Permits (issued by local, State, and Federal agencies) held by this corporation/company for this operating location:**

Permit Name	Issuing Agency	Effective Date	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. **PRODUCT OR SERVICE INFORMATION**

a. Narrative description of manufacturing, principal product and or service activity at premise address:

b. Principal Raw Materials Used:

c. Origin of wastewater:

9. **DISCHARGES**

Total amount of wastewater in gal/month: _____

Frequency of loads: _____

10. **LISTING OF SUBSTANCES AND CONCENTRATIONS THAT MAY BE PRESENT IN LOAD**

a. List substances:

Substance	concentration
_____	_____
_____	_____

Substance

concentration

- b. Sample and provide analysis, conducted in accordance with the techniques prescribed in 40 CFR Part 136 or otherwise approved by the U.S. Environmental Protection Agency the following parameters.

Aluminum, Arsenic, Beryllium, Cadmium, Chromium, Copper, Lead, Mercury, Nickel, Silver, Zinc, Cyanide, Total Nitrogen, Total Phosphorus, pH, Fats, oil and grease.

For permit renewal: Consult Upper Blackstone for parameters to be analyzed.

11. **CONTRACTED HAULER(S) (note: Contracted haulers must be licensed by the District prior to hauling)**

Name

Number

12. **SPILL PREVENTION**

- a. Does the facility have a written Spill Prevention Plan?
() yes () no () Not Applicable

- b. If no, describe equipment and practices used for spill prevention
