



# UPPER BLACKSTONE

## WATER POLLUTION ABATEMENT DISTRICT

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

### 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.)

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:**

If applicable are 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 discharges to the sewer system.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature of Qualified Professional

\_\_\_\_\_  
(Date)

If Federal categorical pretreatment and or local standards are not currently being met by this facility on a consistent basis, answer the following questions and attach a schedule of compliance.

7. **What additional operation and maintenance procedures will be required to ensure compliance with discharge standards?**

---



---



---



---



---

8. **What additional pretreatment equipment is required to ensure compliance with discharge standards?**

---



---



---



---



---

9. **SCHEDULE OF COMPLIANCE REQUESTED TO MEET OR EXCEED STANDARDS**

**COMPLIANCE SCHEDULE**

<u>Increment of Progress</u>	<u>Scheduled Commencement Date</u>	<u>Scheduled Completion Date</u>
1. Select Engineer	_____	_____
2. Operational and/or Maintenance Modifications	_____	_____
3. Engineering Investigations of Plant Conditions (Industrial Process Review & Wastewater Characterization)	_____	_____
4. Select Monitoring Equipment, Treatment Process & Design Criteria (Treatability Studies)	_____	_____
5. Detailed Design of Treatment System (Plans & Specifications)	_____	_____

- 6. Preparation of Operations and Maintenance Manual \_\_\_\_\_
- 7. Select Contractor for Construction \_\_\_\_\_
- 8. Commence Construction \_\_\_\_\_
- 9. Pretreatment System Start-Up \_\_\_\_\_

10. **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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. **PRODUCT OR SERVICE INFORMATION**

a. Narrative description of manufacturing or service activities performed at premise address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Raw Materials Used:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

c. Principal Product or Service:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

d. Describe all Water Using Processes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. **PLANT OPERATION CHARACTERISTICS**

a. Are major processes batch or continuous? \_\_\_\_\_  
Average number of batches per 24 hr. day? \_\_\_\_\_

b. Are your processes subject to seasonal variation? \_\_\_\_\_  
If yes, explain indicating month(s) of peak operation and products:

\_\_\_\_\_  
\_\_\_\_\_

13. **EMPLOYEE INFORMATION**

a. Shift Information: Number of shifts per work day \_\_\_\_\_

Number of work days per week \_\_\_\_\_

b. Average number of employees per shift: Shift start time:

1st. \_\_\_\_\_

1st. \_\_\_\_\_

2nd. \_\_\_\_\_

2nd. \_\_\_\_\_

3rd. \_\_\_\_\_

3rd. \_\_\_\_\_

14. **WATER CONSUMPTION**

List past twelve months water usage from water bill:

a. 1st 6 month period, 20\_\_  
\_\_\_\_\_hundred cubic feet

b. 2nd 6 month period, 20\_\_  
\_\_\_\_\_hundred cubic feet

15. **DISCHARGES**

Total amount of wastewater flow in gal/day: \_\_\_\_\_

List average % of discharge or water losses to:

Estimate

Average

	<u>Outlet</u>	<u>Average % of Total</u>	<u>Flow gal/day</u>
a.	municipal sewer	_____	_____
b.	natural (surface water-brook etc.)	_____	_____
c.	waste haulers	_____	_____
d.	evaporation	_____	_____
e.	contained in product	_____	_____

16. **PROCESS STREAM INFORMATION**

Number of Process Streams with an Industrial Wastewater Discharge: \_\_\_\_\_

(Assign a sequential reference number to each process stream. Supply the following information for each. Attach additional sheets if necessary.)

<u>Process Stream No.</u>	<u>Process Description</u>	<u>Categorical Standard (yes/no)</u>	<u>Average Production (Units/Time)</u>	<u>Average Flow gal/day</u>	<u>Max. Flow gal/day</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____

17. **SEWER OUTLETS**

List plant sewer outlets, size and flow: (If possible use same sequential reference numbers for each sewer [starting with No.1] as in 16 above. If that is not possible, note which process streams are combined).

<u>Ref.#</u>	<u>Sewer Sz. (inches)</u>	<u>Descriptive location of sewer connection or discharge point</u>	<u>avg.Flow gal/day</u>	<u>Max.Flow gal/day</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

18. **Please attach to this application a schematic process diagram which indicates points of discharge to the sewer system from the regulated processes. Use same sewer outlet reference numbers on diagram as noted above.**

19. **LISTING OF HAZARDOUS SUBSTANCES STORED ON PREMISES**

Substance	Storage Method/Container	Amount stored on Site (volume, gallons, lbs)	
		Average	Maximum
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

20. **SPILL PREVENTION**

- a. Does the facility have a written Spill Prevention Plan?  
 yes                       no
- b. If no, describe equipment and practices used for spill prevention.

21. Firms which may be subject to Federal Categorical Standards for process wastewater discharges must carefully read the General Pretreatment Regulations 40 CFR 403. This section describes Industry Reporting Requirements, sample collection procedures to be followed, and the number of samples to be tested for pollutant concentrations. These firms, and any other firm specified by the District, must also complete and submit a Priority Pollutant Scan.