

WASTEWATER DISCHARGE PERMIT APPLICATION

PROPOSED DISCHARGE ( )

Please Check One

EXISTING DISCHARGE ( )

Company Name: \_\_\_\_\_

SIC No.: \_\_\_\_\_  
(Standard Ind. Code)

Company Address: \_\_\_\_\_

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

\_\_\_\_\_

Fax: \_\_\_\_\_

Company Representative: \_\_\_\_\_

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

1. The undersigned, certifying that he/she is the Authorized Representative of the above company, hereby requests a permit be granted to discharge wastewater and stipulates that this firm will be responsible for all sewer use charges and fees. Hereby, submits the following information to the Warminster Township Municipal Authority (WTMA) for its review and approval.

II. Do you own or lease property? \_\_\_\_\_ OWN \_\_\_\_\_ LEASE

III. If leased, name of owner. \_\_\_\_\_

IV. Please describe the business in which the firm is engaged.

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

V. Please describe in detail your plant processes, if any that result in domestic or process wastewater, including an itemization of the raw materials used in the processes and/or operations.

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

VI. Is your operation: Batch: \_\_\_\_\_  
Continuous: \_\_\_\_\_  
Both: \_\_\_\_\_

VII. Number of employees per shift: 1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd

VIII. Shift start & end times: 1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd

IX. Days of plant operations: \_\_\_\_\_

X. Please indicate the type of wastes generated at the your facility and if discharged to the WTMA sewer system. (check all that apply)

Avg/Gal  
Per Day

( ) Domestic wastes (restrooms, employee showers, etc.) \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Cooling water, non-contact \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Boiler/tower blowdown \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Cooling water, contact \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Manufacturing Process \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Equip/facility washdown \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Air pollution control unit \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Storm water runoff \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Water softening/  
demineralization \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

( ) Other (describe) \_\_\_\_\_ ( )Est ( )Meas ( )To WTMA

XI. Please provide details as to wastewater discharge rate to the WTMA sewer system:

1. Time and duration of discharge \_\_\_\_\_

2. Average daily rate, in GPM's \_\_\_\_\_

3. Three minute peak flow rate, in GPM's \_\_\_\_\_

4. Fifteen minute peak flow rate, in GPM's \_\_\_\_\_

5. Please provide all details related to daily, monthly, and/or seasonal variations in discharge rates. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

XII. Please provide physical/chemical characteristics of wastewater discharge to WTMA sewer:

1. For an existing discharge, please attach laboratory analyses of a representative sample of the wastewater. These analyses shall show the characteristics of interest as outlined in Section 2 of the Wastewater Control Ordinance; the applicant may delete analyses that are not applicable to the discharge, but must certify that the discharge is free of those substances for which tests have not been made. Analytical methods shall be in accordance with Standard Methods for the Examination of Water and Wastes or U.S. EPA Methods for Chemical Analysis of Water and Wastes.
2. For a proposed discharge, please provide an estimate of the characteristics of the wastewater, taking into account the Authority's concerns outlined in Section 2 of the Ordinance. Please provide average and peak concentrations and average and peak contributions in absolute amounts (in pounds per day) and state the basis for and the qualifications of the person who prepared this estimate.

XIII. Please attach a site plan indicating location of sewer lines, connections, and appurtenances by size, location and elevation.

XVI. Please attach to this application a description of what facilities, provisions, and operating procedures are or will be taken to preclude the accidental discharge of pollutants to the WTMA sewer. A spill plan and slug control plan are required.

The Authority shall evaluate the data furnished by the applicant and may require additional information to properly make a determination.

Upon granting this permit, the applicant agrees:

1. To furnish any additional information for which this permit is sought as may be requested by the Authority.
2. To accept and abide by all the provisions of Ordinance No. 561 of Warminster Township and of the Regulations and Rates of Warminster Township Municipal Authority and all other pertinent ordinances and regulations that may be amended or adopted in the future.

3. To operate and maintain any wastewater facility(s) as may be required as a condition of the acceptance into the wastewater treatment system of the wastes involved, in an efficient manner at all times, and at no expense to the Authority.
4. To cooperate at all times with the Authority and its representatives in their inspecting, sampling, and study of the wastewater, and any facilities.
5. To notify the Authority immediately in the event of any accident, or other occurrence, that occasion's contributions to the wastewater treatment system of any wastewater or substance prohibited or not covered by this permit.

Signature \_\_\_\_\_

Title \_\_\_\_\_

Typed/Printed \_\_\_\_\_

Date Signed \_\_\_\_\_

(For Authority Use Only)

Permit Fee Paid	Yes _____	No _____	Amount \$
Recommended by Consulting Engineer	_____		Date Signed _____
Recommended by Plant Superintendent	_____		Date Signed _____
Approved by General Manager	_____		Date Signed _____

PRIORITY POLLUTANT INFORMATION: Please indicate if you know of any pollutants in your manufacturing or service activity or generated as a by-product.

CHEMICAL COMPOUNDS

- A. METALS & INORGANICS
- B. PHENOLS AND CRESOLS
- C. MONOCYCLIC AROMATICS
- D. PCB'S & RELATED COMPOUNDS
- E. ETHERS
- F. NITROSAMINES AND OTHER NITROGEN-CONTAINING COMPOUNDS
- G. HALOGENATED ALIPHATICS
- H. PHTHALATE ESTERS
- I. POLYCYCLIC AROMATIC HYDROCARBONS
- J. PESTICIDES

\*\* If you are unable to identify the chemical constituents of products you use that discharged in your wastewater, attach copies of the materials safety data sheets (MSDS) for such products.