VALLEY SANITARY DISTRICT

INDUSTRIAL

Wastewater Discharge Permit Application / Record

www.valley-sanitary.org

Return completed form to Pretreatment Services Section via Email or Mail:
Email: ec@valley-sanitary.org Mail: 45500 Van Buren St; Indio, CA 92201

FOR VSD USE

Received Date: _____
Fee Collected: Yes ☐ No ☐
Receipt Number: _____
Accepted By: _____

Permit Number: _____
Approved By: _____

SECTION A – GENERAL INFORMATION **Application Date _____**

A.1 Company name: _____

Company Address: _____

Telephone: _____

A.2 Address of production or manufacturing facility. If same as above, check ☐

_____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealings with the Sewer Authority and/or city:

_____ _____
Name Title Telephone

A.4 Alternate person to contact concerning information provided herein:

_____ _____
Name Title Telephone

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, meatpacking, food processing, etc.)

_____

Note to Signing Official: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provided in this questionnaire that identifies the nature of frequency of discharge shall be available to the public without restriction. Request for confidential treatment of other information shall be governed by procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire will be used to issue the permit.

This statement is to be signed by an authorized official of your company after adequate completion of this form and review of information by the signing official.

"I have personally examined and am familiar with the information submitted in this document and attachment. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment."

_____ _____
Signature of Official (Company Seal if applicable) Date

_____
Name and Title (Type)

A.6 Provide a brief narrative description of the manufacturing, production, or service activities of your company:

_____

_____

_____

A.7 Standard Industrial Classification Number(s) (SIC Code) for your facilities:

_____ _____ _____ _____ _____ _____

A.8 This facility generates the following types of wastewater (check all that apply):

	Average GPD	Max GPD	Estimated	Measured
Domestic Wastewater			○	○
Noncontact Cooling Water			○	○
Boiling / cooling Tower Water			○	○
Contact Cooling Water			○	○
Process Wastewater			○	○
Equipment Facility Wash Down			○	○
Air Pollution Control Unit			○	○
Storm Water Runoff to Sewer			○	○
Other :			○	○
Total			○	○

A.9 Wastewater is discharged to (check all that apply):

	Average GPD	Max GPD	Estimated	Measured
Sanitary Sewer			○	○
Storm Sewer			○	○
Surface Water			○	○
Ground Water			○	○
Waste Haulers			○	○
Evaporation			○	○
Other :			○	○

Provide name and address of waste hauler(s), if used: _____

_____

A.10 Has Spill Prevention Control and Countermeasure Plan or a Hazardous Materials/Waste Contingency Plan been prepared for the facility? ○ Yes ○ No

Note: *If your facility* ***did not*** *check one or more of the items listed in A.8.4 through A.8.9 above, then you need not to complete any further sections in this survey/application. If any items A.8.4 through A.8.9* ***were checked****, complete the remainder of this survey/application.*

A. 11 Size of Facility

Assessor's Parcel Number (APN): _____ Total Parcel Area: _____

Manufacturing / Assembly Area: _____

SECTION B – FACILITY OPERATION CHARACTERISTICS

B.1 Personnel Schedule

	Office		First Shift		Second Shift		Third Shift	
	Number	Hours	Number	Hours	Number	Hours	Number	Hours
Weekdays								
Saturdays								
Sundays								

Note: The following information in this section must be completed for each product line.

B.3 Principal Product produced: _____

B.4 Raw materials and process additives used: _____

_____

_____

B.5 Production process is:

◯ Batch ◯ Continuous ◯ Both _____% batch _____% continuous

B.6 Days of Operation: □ Monday □ Tuesday □ Wednesday □ Thursday □ Friday □ Saturday □ Sunday

Hours of operation: _____am to _____pm □ continuous

B.7 Is production subject to seasonal variation: ◯ Yes ◯ No

If yes, briefly describe seasonal production cycle: _____

_____

_____

B.8 Are any process changes or expansions planned during the next three years?

◯ Yes ◯ No

If yes, describe the nature of planned changes or expansions. Use additional sheets if necessary.

_____

_____

_____

_____

_____

SECTION C – WASTEWATER INFORMATION

C.1 If your facility employees processes in any of the 34 industrial categories of business activities listed below and any of these process generate wastewater or waste sludge, place a check beside the category or business activity (check all that apply).

A. Industrial Categories

- ☐ Adhesives
- ☐ Aluminum Foaming
- ☐ Auto & Other Laundries
- ☐ Battery Manufacturing
- ☐ Coal Mining
- ☐ Coil Coating
- ☐ Copper Forming
- ☐ Electric & Electric Components
- ☐ Electroplating
- ☐ Explosive Manufacturing
- ☐ Foundries
- ☐ Gum & Wood Chemicals
- ☐ Inorganic Chemicals
- ☐ Iron & Steel
- ☐ Leather Tanning & Finishing
- ☐ Mechanical Products
- ☐ Nonferrous Metals
- ☐ Ore Mining
- ☐ Organic Chemicals
- ☐ Paint & Ink
- ☐ Pesticides
- ☐ Petroleum Refining
- ☐ Pharmaceuticals
- ☐ Photographic Supplies
- ☐ Plastic & Synthetic Materials
- ☐ Plastics Processing
- ☐ Porcelain Enamel
- ☐ Printing & Publishing
- ☐ Pulp & Paper
- ☐ Rubber
- ☐ Soaps & Detergents
- ☐ Steam Electric
- ☐ Textiles Mills
- ☐ Timber
- ☐ Other:

B. Other Business Activity

- ☐ Air Flotation
- ☐ Centrifuge
- ☐ Chemical Precipitation
- ☐ Chlorination
- ☐ Cyclone
- ☐ Filtration
- ☐ Flow Equalization
- ☐ Grease / Oil Separation, Type: _____
- ☐ Grease Trap
- ☐ Grit Removal
- ☐ Iron Exchange
- ☐ Neutralization, pH correction
- ☐ Ozonation
- ☐ Reverse Osmosis
- ☐ Screen
- ☐ Sedimentation
- ☐ Septic Tank
- ☐ Solvent Separation
- ☐ Spill Protection
- ☐ Sump
- ☐ Biological Treatment, Type: _____
- ☐ Rainwater Diversion / Storage
- ☐ Other, Chemical Treatment: _____
- ☐ Other, Type: _____
- ☐ No Pretreatment: _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this questionnaire. Be sure to include the data of the analysis, name of laboratory performing the analysis, and location(s) from which sample(s) were taken (attach sketches, plans, etc., as necessary).

C.4 Priority Pollutant Information: Please indicate by checking the appropriate box by listed chemical if it is "Suspected to be Present", or "Known to be Present" in your manufacturing or service activity or generated as a by-product.

EPA Priority Pollutants

Volatiles

- ☐ Acrolein
- ☐ Acrylonitrile
- ☐ Benzene
- ☐ Bromodichloromethane
- ☐ Bromoform
- ☐ Bromomethane
- ☐ Carbon tetrachloride
- ☐ Chlorobenzene
- ☐ Chlorodibromomethane
- ☐ Dichlorodifluoromethane
- ☐ 1,1,1-trichloromethane-TCA
- ☐ 1,1,2 trichloroethane
- ☐ Trichlorofluoroethane
- ☐ 1,2-dichloroethane
- ☐ 1,1,1-trichloromethane
- ☐ 1,1-dichloroethylene
- ☐ 1,1,2-trichloromethane
- ☐ 1,1,2,2-tetrachloroethane
- ☐ Chloroethane
- ☐ 2-chloroethylvinyl ether
- ☐ Chloroform
- ☐ 1,1-dichloroethylene
- ☐ 1,2-trans-dichloroethylene
- ☐ 1,2-dichloroproane
- ☐ 1,3-dichloropropylene
- ☐ Ethylbenzene
- ☐ Methylene chloride
- ☐ Methyl chloride
- ☐ Methyl bromide
- ☐ Tetrachloroethylene PCE
- ☐ Toluene
- ☐ Trichloroethylene TCE
- ☐ Vinyl Chloride

Semi-Volatiles

- ☐ Acenaphthene
- ☐ Acenaphthylene
- ☐ Anthracene
- ☐ Benzidine
- ☐ Benzo(a)anthracene
- ☐ Benz(a)pyrene
- ☐ Benzo(k)fluoranthene
- ☐ Benzo(ghi)perylene
- ☐ 3,4-Benzofluoranthene
- ☐ Bis(2-chloroethyl)ether
- ☐ Bis(2-chloroethoxy)methane
- ☐ Bis(2-ethylhexyl)phthalate
- ☐ 4-bromophenyl phenyl ether
- ☐ Butyl benzyl phthalate
- ☐ Chrysene

Semi-Volatiles

- ☐ 2-chlorphenol ether
- ☐ 4-chlorophenyl-phenylether
- ☐ Dibenzo(a,h) anthracene
- ☐ 1,2-dichlorobenze
- ☐ 1,3-dichlorobenze
- ☐ 1,4-dichlorobenze
- ☐ 3,3-dichlorobenzidine
- ☐ 2,4-dichlorophenol
- ☐ Di-n-octyl phthalate
- ☐ Di-n-butyl phthalate
- ☐ 2,4-dinitrophenol
- ☐ 4,6-dintrio-o-cresol
- ☐ 1,2-diphenylthydrazine
- ☐ 2,4-dintrotoluene
- ☐ Fluoranthene
- ☐ Fluorene
- ☐ Hexachlorobenzene
- ☐ Hexachloroethane
- ☐ Hexachlorobutadiene
- ☐ Hexachlorocyclopentadiene
- ☐ Ideno(1,2,3-cd)pyrene
- ☐ Isophorone
- ☐ Naphthalene
- ☐ Nitrobenzene
- ☐ 2-nitrophenol
- ☐ 4-nitrophenol
- ☐ N-nitroso dimethylamine
- ☐ N-nitroso diphenylamine
- ☐ N-nitrosodi-n-propylamine
- ☐ Parachlorometacresol
- ☐ Pentachlorophenol
- ☐ Phenanthrene
- ☐ Phenol
- ☐ Pyrene
- ☐ 1,2,4-trichlorobenzene
- ☐ 2,4,6-trichlorophenol

Pesticides & PCBs

- ☐ Aldrin
- ☐ Chlordane
- ☐ Dieldrin
- ☐ 4,4-DDT
- ☐ 4,4-DDE (p,p'DDX)
- ☐ 4,4-DDD (pm,pTDE)
- ☐ Alpha-endosulfan
- ☐ Beta-endosulfan
- ☐ Endosulfan sulfate
- ☐ Endrin
- ☐ Endrin aldehyde
- ☐ Heptachlor

Pesticides & PCBs

- ☐ Heptachlor epoxide
- ☐ Alpha-BHC
- ☐ Beta-BHC
- ☐ Delta-BHC
- ☐ Gamma-BHC (Lindane)
- ☐ PCB-1016 (Aroclor 1016)
- ☐ PCB-1221 (Aroclor 1221)
- ☐ PCB-1232 (Aroclor 1232)
- ☐ PCB-1242 (Aroclor 1242)
- ☐ PCB-1248 (Aroclor 1248)
- ☐ PCB-1254 (Aroclor 1254)
- ☐ PCB-1260 (Aroclor 1260)
- ☐ Toxaphene
- ☐ 2,3,7,8-TCCD dioxin

Metals & Miscellaneous

- ☐ Antimony
- ☐ Arsenic
- ☐ Beryllium
- ☐ Cadmium
- ☐ Chromium
- ☐ Copper
- ☐ Lead
- ☐ Mercury
- ☐ Nickel
- ☐ Silver
- ☐ Thallium
- ☐ Zinc
- ☐ Asbestos
- ☐ Cyanide, Total
- ☐ Cyanide, amenable

Non-Priority Pollutants

- ☐ Barium
- ☐ Cobalt
- ☐ Hex Chromium
- ☐ Selenium
- ☐ Cresols
- ☐ Radioactivity
- ☐ High pH (>11.0)
- ☐ Low pH (<6.0)
- ☐ Oil / Grease
- ☐ Suspended solids
- ☐ Total Dissolved Solids
- ☐ BOD
- ☐ Other Pollutants: (please list)
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

SECTION D – OTHER WASTES

D.1 Are any liquid wastes or sludge from this firm disposed of by other than discharge to the sewer system?

◯ Yes (complete items D.2 and D.3.) ◯ No (skip remainder of Section D.)

D.2 These Wastes may best be described as:

- ☐ Acid and Alkalis
- ☐ Heavy Metal Sludge
- ☐ Inks / Dyes
- ☐ Oil & Grease
- ☐ Paints
- ☐ Pesticides
- ☐ Planting Waste
- ☐ Pretreatment Sludge
- ☐ Solvents / Thinners
- ☐ Other Hazardous waste (specify): _____
- ☐ Other Waste (specify): _____

D.3 For the above checked waste does your company practice:

Storage: ◯ On-site ◯ Off-site

Disposal: ◯ On-site ◯ Off-site

Briefly describe the method(s) of storage or disposal checked above.

_____

_____

_____

_____

_____