



Return completed application by: _____

1) Applicant Business Name _____

2) Address of premises discharging wastewater:

Street _____

City _____ Zip _____

3) Standard Industrial Classification (SIC) No: _____

4) Assessor's Map & Tax Lot No: _____

5) Mailing Address (if different than above):

6) Person to Contact regarding Application and Permit:

Name _____ Title _____

Phone _____

7) Person to Contact in Case of Emergency:

Name _____ Title _____

Day Phone _____ Night Phone _____

8) Type of Application:

- ☐ New Permit
- ☐ Permit Modification
- ☐ Permit Transfer
- ☐ Permit Renewal
- ☐ Baseline Monitoring Report (BMR)

RWRf USE		Return completed application to:
Received	_____	City of Medford RWRf
CFR	_____	Attn: Source Control
Permit No	_____	1100 Kirtland Rd.
Participant	_____	Central Point, OR 97502



9) Type of Discharge:

- ☐ Existing
☐ Proposed (Anticipated date of commencement _____)
☐ None, currently or anticipated.

10) Certification by a Qualified Professional:

Applicable pretreatment standards for the permit applicant are being met on a consistent basis:

- ☐ Yes
☐ No

Explanation:

Print Name

Title

Signature

Date



11) Certification by Authorized Representative:

(See IWDP Application instructions – Definitions).

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person(s) who manage the system or are directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Print Name

Title

Signature

Date

Mailing Address _____



PURPOSE: The business description is primarily used to determine the substances that may enter into the wastewater discharge from the business activity.

1) BUSINESS ACTIVITY:

Complete a separate Part B for each major business activity on the premises.

Activity _____ SIC No's. _____

a) PRODUCT:

Type of Products (Brand Name)	<u>Past Calendar Year</u>			<u>Estimate This Calendar Year</u>		
	<u>Amount per day</u>			<u>Amount per day</u>		
	Avg.	Max.	Units	Avg.	Max	Units

b) DESCRIPTION: Describe the wastewater generating operations. Indicate variations in production and operations during the year. (Use additional sheets as necessary).

c) SUBSTANCES DISCHARGED: Give common and technical names of each major raw material and product that may be discharged to the sewer. Briefly describe the physical and chemical properties of each substance and products.



2) DISCHARGE PERIOD:

a) Hours/Day Operated:

M _____ T _____ W _____ Th _____ F _____ Sa _____ Su _____

b) Time Duration of Discharge:

M ____ - ____ T ____ - ____ W ____ - ____ Th ____ - ____ F ____ - ____ Sa ____ - ____ Su ____ - ____

3) VARIATION OF OPERATION:

Indicate the operations business activity:

☐ Continuous throughout the year

☐ Seasonal – Indicate months of the year during which discharge occurs:

<input type="checkbox"/> January	<input type="checkbox"/> February	<input type="checkbox"/> March
<input type="checkbox"/> April	<input type="checkbox"/> May	<input type="checkbox"/> June
<input type="checkbox"/> July	<input type="checkbox"/> August	<input type="checkbox"/> September
<input type="checkbox"/> October	<input type="checkbox"/> November	<input type="checkbox"/> December

Comments: _____

4) OTHER WASTES:

List types and volume of liquid waste or sludges removed from the premises by means other than public sewer.

Description	Volume (Gal/Mo)	Removed By	Removed To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5) SPCC: Is a Spill Prevention, Control, and Countermeasure Plan (SPCC) prepared for the business facility?

☐ Yes
☐ No



6) ENVIRONMENTAL CONTROL PERMITS:

List any environmental control permits for or held by the business facility.

PERMIT TYPE	PERMIT NUMBER	ISSUED BY

7) PRETREATMENT STANDARDS:

Identify applicable pretreatment standards (if known) for all wastewater constituents that may be discharged to the sewer.

CONSTITUENT	STANDARD	FEDERAL/STATE/LOCAL

8) CLARIFICATION & COMMENTS CONCERNING PART B:



PURPOSE: The schematic flow diagram shows the flow products through the facility and the various sources of wastewater.

[] Schematic Flow Diagram – For each major activity in which wastewater is generated, draw a diagram of the flow of materials and water from start to completed product showing all unit processes generating wastewater. Number each unit process having wastewater discharges to the sanitary and/or storm sewer. Use these numbers when showing this unit process in the building layout in Part D.



PURPOSE: The building layout shows the wastewater generating operations which contribute to each side sewer.

[] BUILDING LAYOUT – Draw to scale the location of each building on the premises. Show location of all water meters, storm drains, numbered unit processes (from Part C), public sewers, and each side sewer connected to the public sewers. Number each side sewer and show possible sampling locations.

An attached blueprint or drawing of the facilities showing the above items may be substituted for a drawing on this sheet.



PURPOSE: The water and use information will enable the Regional Water Reclamation Facility to determine the volumes and sources of wastewater discharged to the public sewer.

1) WATER USE AND DISTRIBUTION:

Estimate the average quantity of water received and wastewater discharged daily. (Gallons Per Day – gpd)

See Table Below:

	Supply From:		Discharged To:	
	Medford Water Commission (gpd)	Other Source (gpd)	Gallons Per Day (gpd)	Discharge Point
Sanitary				
Processing				
Boiler				
Cooling				
Washing				
Irrigation				
With Products				
Other (Describe)				
TOTAL				

Comments:

2) NUMBER OF EMPLOYEES: TOTAL _____

OFFICE			PRODUCTION					
			No. of Employees per shift and actual shift hours					
	#	Hours	#	Day Shift	#	Swing Shift	#	Night Shift
Weekday		-		-		-		-
Saturday		-		-		-		-
Sunday		-		-		-		-
Seasonal		-		-		-		-
TOTAL								



3) SOURCE OF WATER DISCHARGED:

Water Meter Number	Percent Discharged to Side Sewer:			Total Percent Discharged to All Side Sewers
	No. 1	No. 2	No. 3	

4) DEDUCT METERS:

Describe the use of any deduct water meters in your operation:

5) CLARIFICATION OR COMMENTS CONCERNING PART E:



PURPOSE: The side sewer discharge information will identify the variation in flow rate and the type of constituents and characteristics of the discharge for each individual sewer connection (side sewer).

1) SIDE SEWER NO. _____ (From PART D – Complete a separate PART F for each side sewer discharge).

2) WASTEWATER FLOW RATE:

			IF OPERATIONS ARE SEASONAL – AVG. DAILY GALLONS/DAY	
PEAK HOURLY GALLONS/MINUTE	MAX. DAILY GALLONS/DAY	ANNUAL DAILY AVG. GALLONS/DAY	SEASONAL MINIMUM	SEASONAL MAXIMUM

3) IF BATCH DISCHARGE, INDICATE:

- a) Number of batch discharges per month: _____
- b) Time of batch discharges: _____ at _____
(day of week) (hours of day)
- c) Average quantity per batch: _____ gallons
- d) Flow rate: _____ gallons/minute

4) WASTEWATER CONSTITUENTS:

If any of the following constituents, characteristics, or substances are or can be present in your wastewater discharges as a result your operations or an accidental spill, indicate by placing a ☒ in the open box ☐ and indicate the quantity that is or could be discharged.

<input checked="" type="checkbox"/>	NAME	QUANTITY	<input checked="" type="checkbox"/>	NAME	QUANTITY
<input type="checkbox"/>	Algicides		<input type="checkbox"/>	Oil Total	
<input type="checkbox"/>	Aluminum		<input type="checkbox"/>	Pesticides	
<input type="checkbox"/>	Ammonia		<input type="checkbox"/>	pH Base	
<input type="checkbox"/>	Barium		<input type="checkbox"/>	pH Acid	
<input type="checkbox"/>	Boron		<input type="checkbox"/>	Phosphorus	
<input type="checkbox"/>	Bromide		<input type="checkbox"/>	Potassium	
<input type="checkbox"/>	Calcium		<input type="checkbox"/>	Radioactivity	
<input type="checkbox"/>	Chlorine		<input type="checkbox"/>	Sodium	
<input type="checkbox"/>	Chloride		<input type="checkbox"/>	Solvents	
<input type="checkbox"/>	Cobalt		<input type="checkbox"/>	Sulfate	



<input checked="" type="checkbox"/>	NAME	QUANTITY	<input checked="" type="checkbox"/>	NAME	QUANTITY
<input type="checkbox"/>	Fluoride		<input type="checkbox"/>	Sulfide	
<input type="checkbox"/>	Formaldehyde		<input type="checkbox"/>	Sulfite	
<input type="checkbox"/>	Hydrocarbons		<input type="checkbox"/>	Surfactants	
<input type="checkbox"/>	Iodide		<input type="checkbox"/>	Temp 140 F+	
<input type="checkbox"/>	Iron		<input type="checkbox"/>	Titanium	
<input type="checkbox"/>	Magnesium		<input type="checkbox"/>	Tin	
<input type="checkbox"/>	Manganese		<input type="checkbox"/>	Vanadium	
<input type="checkbox"/>	Molybdenum		<input type="checkbox"/>	Volatile, Acids	
<input type="checkbox"/>	Oil, Min. Orig.		<input type="checkbox"/>	Sand or Mud	

5) EPA CONSTITUENTS:

List substances or constituents that potentially could be present in the wastewater discharge, which if otherwise disposed of, would be considered a hazardous waste under 40 CFR Part 261. Include the name of the hazardous waste, the EPA hazardous waste number, and the type of potential discharge (continuous, batch, or other). If the discharge is more than 100 kilograms of such waste per calendar month, also provide the following information to the extent such information is known and readily available: An identification of the hazardous constituents contained in the wastes, an estimation of the mass and concentration of such constituents in the wastestream discharged during that calendar month, and an estimation of the mass of constituents in the wastestream expected to be discharged during the following 12 months.

NAME	EPA NUMBER	TYPE OF DISCHARGE



6) MEASUREMENT OF POLLUTANTS:

List the daily maximum and average concentrations of all known regulated pollutants in the wastewater discharge.

ELEMENTS OF WASTEWATER STRENGTH	UNIT	MAXIMUM	AVERAGE
pH (Range to be placed in maximum column)			

If data from a laboratory was used to determine the values, please give the name and address of the laboratory:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

7) WASTEWATER PRETREATMENT:

a) Existing: Check the type of wastewater treatment, if any, from this side sewer before it is discharged to the public sewer:

None []
Holding Tank []
Grease Trap []
Oil/Water Separator []
Grinding []
Sedimentation []
pH Adjustment []
Biological Treatment []
Chemical Treatment []
Screening []
Chlorination []
Other []

List: _____



Pretreatment Process Description: Describe the pretreatment process(es) from start to finish and include loading rates, design capacity, physical size, etc. of each pretreatment facility checked above. Please attach on a separate piece of paper if necessary.

b) Planned Wastewater Pretreatment Improvements:

Describe any changes in treatment or disposal methods planned or under construction for the wastewater carried by this side sewer. Please include estimated completion dates.

8) CLARIFICATION OR COMMENTS CONCERNING PART F:

PRIORITY POLLUTANTS (40 CFR Part 423, Appendix A)

For each Pollutant listed in Appendix A; check either "Yes" or "No" as to whether any quantities are kept on site or used in process at your facility. For each pollutant identified with a "yes", identify the quantity kept on site (column 4). If they can be present in your wastewater discharge as a result of your operations or accidental spill, indicate the estimated quantity (column 5). If on site, but with no potential to be in your wastewater discharge, indicate by checking no (column 6). (Example, chemical is stored in an area without access to sewer and is not used in any wastewater generating process areas.) Quantities kept on site might be expressed in pounds or gallons. Quantities that may be present in the facilities discharge might be expressed in pounds, gallons or concentration based in mg/L. Identifying some of the individual constituents on the list may require an evaluation of SDS's (Safety Data Sheets) for chemicals used or stored on site.

Yes	No	Pollutant	If yes, Quantity Kept on Site	Potential to be in wastewater effluent? If yes, estimated quantity.	
				Yes	No
		Acenaphthene			
		Acrolein			
		Acrylonitrile			
		Benzene			
		Benzidine			
		Carbon tetrachloride (tetrachloromethane)			
		Chlorobenzene			
		1,2,4-trichlorobenzene			
		Hexachlorobenzene			
		1,2-dichloroethane			
		1,1,1-trichloroethane			
		Hexachloroethane			
		1,1-dichloroethane			
		1,1,2-trichloroethane			
		1,1,2,2-tetrachloroethane			
		Chloroethane			
		Bis(2-chloroethyl) ether			
		2-chloroethyl vinyl ether (mixed)			
		2-chloronaphthalene			
		2,4, 6-trichlorophenol			
		Parachlorometa cresol			
		Chloroform (trichloromethane)			
		2-chlorophenol			
		1,2-dichlorobenzene			
		1,3-dichlorobenzene			
		1,4-dichlorobenzene			
		3,3-dichlorobenzidine			
		1,1-dichloroethylene			
		1,2-trans-dichloroethylene			



Yes	No	Pollutant	If yes, Quantity Kept on Site	Potential to be in wastewater effluent? If yes, estimate quantity.	
				Yes	No
		2,4-dichlorophenol			
		1,2-dichloropropane			
		1,2-dichloropropylene (1,3-dichloropropene)			
		2,4-dimethylphenol			
		2,4-dinitrotoluene			
		2,6-dinitrotoluene			
		1,2-diphenylhydrazine			
		Ethylbenzene			
		Fluoranthene			
		4-chlorophenyl phenyl ether			
		4-bromophenyl phenyl ether			
		Bis(2-chloroisopropyl) ether			
		Bis(2-chloroethoxy) methane			
		Methylene chloride (dichloromethane)			
		Methyl chloride (dichloromethane)			
		Methyl bromide (bromomethane)			
		Bromoform (tribromomethane)			
		Dichlorobromomethane			
		Chlorodibromomethane			
		Hexachlorobutadiene			
		Hexachlorocyclopentadiene			
		Isophorone			
		Naphthalene			
		Nitrobenzene			
		2-nitrophenol			
		4-nitrophenol			
		2,4-dinitrophenol			
		4,6-dinitro-o-cresol			
		N-nitrosodimethylamine			
		N-nitrosodiphenylamine			
		N-nitrosodi-n-propylamin			
		Pentachlorophenol			
		Phenol			
		Bis(2-ethylhexyl) phthalate			
		Butyl benzyl phthalate			
		Di-N-Butyl Phthalate			
		Di-n-octyl phthalate			

Yes	No	Pollutant	If yes, Quantity Kept on Site	Potential to be in wastewater effluent? If yes, estimate quantity.	
				Yes	No
		Diethyl Phthalate			
		Dimethyl phthalate			
		1,2-benzanthracene (benzo(a)anthracene)			
		Benzo(a)pyrene (3,4-benzo-pyrene)			
		3,4-Benzofluoranthene (benzo(b)fluoranthene)			
		11,12-benzofluoranthene (benzo(k)fluoranthene)			
		Chrysene			
		Acenaphthylene			
		Anthracene			
		1,12-benzoperylene (benzo(ghi)perylene)			
		Fluorene			
		Phenanthrene			
		1,2,5,6-dibenzanthracene (dibenzo(a,h)anthracene)			
		Indeno (1,2,3-cd) pyrene (2,3-o-pheynylene pyrene)			
		Pyrene			
		Tetrachloroethylene			
		Toluene			
		Trichloroethylene			
		Vinyl chloride (chloroethylene)			
		Aldrin			
		Dieldrin			
		Chlordane (technical mixture and metabolites)			
		4,4-DDT			
		4,4-DDE (p,p-DDX)			
		4,4-DDD (p,p-TDE)			
		Alpha-endosulfan			
		Beta-endosulfan			
		Endosulfan sulfate			
		Endrin			
		Endrin aldehyde			
		Heptachlor			
		Heptachlor epoxide (BHC-hexachlorocyclohexane)			
		Alpha-BHC			
		Beta-BHC			
		Gamma-BHC (lindane)			
		Delta-BHC (PCB-polychlorinated biphenyls)			
		PCB-1242 (Arochlor 1242)			



Water Reclamation Division

[illegible]