Appendix G - Industrial Wastewater Connection Permit Application

Town of Orleans, Massachusetts Board of Water and Sewer Commissioners

Section 1 - General Information A. Company Name: B. Facility Address: C. Owner's Mailing Address: D. Telephone Number/Email/Cell Phone Number: E. Name, Address, Contact Name, Telephone Number, Cell Phone Number, and License Number of Building Contractor: F. Name, Address, Contact Name, Telephone Number, Cell Phone Number, and License Number of Licensed Drain Layer: G. Name, Address, Contact Name, Telephone Number, Cell Phone Number, and License Number of Consulting Engineer: Н. Status of Application (new, renewal or change of use): Name and Title of Corporate Officer Signing Application: Ι. J. Name and Title of Facility Manager: K. Name and Title of Employee Responsible for Wastewater Discharge: **Section 2 - Description of Operations** A. Type of Business:

Standard Industrial Classification (SIC) Code and/or North American Industry Classification

System (NAICS) Code:

B.

C.	Principle product or service:	
D.	Briefly describe the operation and activities which take place at this facility (attach additional pages if necessary):	
E.	Describe the operating schedule (Days of operation, number of shifts, hours or operation, etc.):	
F.	Describe any special factors affecting operation - seasonal production, scheduled shutdown, peak operation, batch operation, etc. (attach additional pages if necessary):	
G.	Number of employees – total and per shift including seasonal variations (attach additional pages if necessary):	
H.	List all raw materials used in the operation (attach additional pages if necessary):	
I.	List any flammable, combustible or explosive substances which are stored, utilized or produced at this facility (attach additional pages if necessary):	
J.	List any hazardous substances, SDS sheets, as defined in 310 CMR 30.00, which are stored utilized or produced at this facility (attach additional pages if necessary):	
K.	Describe all measures which are taken to isolate those areas of the facility where the substances listed in Item I and Item J above are stored, utilized or produced. In particular, list efforts to prevent the discharge of these substances to the sewer system (attach additional pages if necessary):	
L.	Is there a "spill prevention plan" in effect for this facility (attach copy). If not, describe all measures which will be adopted to handle spills of these substances (attach additional pages if necessary):	
Section 3 -	Water Consumption and Usage	
A.	List the source (Town of Orleans Water Department, private well or other source) and quantity (average and maximum flow in gallons per day and peak flow in gallons per minute) of <u>all</u> water utilized on site. Attach records of use if available (attach additional pages if necessary):	
В.	Describe any treatment of this water at this facility, including chemical additions (attach additional pages if necessary):	
C.	Describe any methods which are employed at this facility to recycle and conserve water (attach additional pages if necessary):	

Section 4 - Wastewater Generation and Discharge

- A. List the source (sanitary, process, cooling, drain, etc.) and quantity (average and maximum flow in gallons per day and peak flow in gallons per minute) of all wastewater discharged to the sewer system. Attach records of discharge if available (attach additional pages if necessary):
- B. List the size, location, average daily flow and maximum daily flow of all connections to the sewer system: Note: The maximum daily flow listed will be considered the maximum daily permitted flow, if this application is accepted (attach additional pages if necessary):
- C. List all other methods of wastewater disposal direct to the body of water or to ground, waste hauling service, etc. (attach additional pages if necessary):

Section 5 - Wastewater Quality

A. Date that "Baseline Monitoring Report" was conducted on the wastewater generated at this facility (attach copy of report):

Note: The Department requires that an applicant for an industrial connection permit submit a "Baseline Monitoring Report" which shall be prepared by a Professional Civil Engineer, registered in the Commonwealth of Massachusetts, in accordance with the U.S. EPA "General Pretreatment Regulations for Existing and New Sources of Pollution" (40 CFR 403, as amended). The completed Baseline Monitoring Report shall be reviewed by the Manager of the facility from which the wastewater is discharged and the Manager of the facility shall certify in writing that "all sampling for the Report was performed under normal operating conditions at the Facility, particularly with regard to the quantity and characteristics of the wastewater which was generated during the sampling".

B. Attach copies of the results of all analyses conducted on the wastewater (raw and pretreated) over the past two years.

Section 6 - Pretreatment

- A. Describe any proposed or existing pretreatment which this wastewater will receive prior to discharge. If this is a proposed process or a modification to an existing process, attach a copy of a design report prepared by a Professional Civil Engineer, registered in the Commonwealth of Massachusetts, including detailed flow schematic and plans and specifications (attach additional pages if necessary):
- B. Describe the actual or anticipated efficiency of the pretreatment process in removing pollutants (attach additional pages if necessary):

Section 7 - Certification

In consideration of the granting of this permit, the undersigned company official agrees to the following:

- A. To accept and abide by the Town's **Sewer Use Rules and Regulations**.
- B. To maintain the connection to the Town's wastewater system at no expense to the Town.

C. To furnish and install the connection in full accordance with the Appendix H - Standar Specifications for Sewer Construction and Appendix I - Construction Details of th Sewer Use Rules and Regulations.
I hereby certify that we shall adhere to all discharge limitations imposed by the Town and to th Sewer Use Rules and Regulations of the Department and I understand that failure to adhere t all discharge limitations and to the Sewer Use Rules and Regulations will be cause for the Tow to revoke the connection permit and plug the connection to the Town's wastewater system.
The information contained in this questionnaire is familiar to me and to the best of my knowledg and belief is true, complete and accurate.
Signature of Corporate Officer
Signature of Applicant
Signature of Property Owner
Name
Title
Date

DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY TO BE COMPLETED BY THE TOWN

Application Complete: Yes No			
Supporting Documentation Attached, Complete and Adequate: Yes No			
Connection Permit Fee Paid: Yes No			
Betterment Assessment Paid:			
Privilege Fee Paid: Yes No N/A			
Compensatory Sewer Privilege Fee Paid: Yes No N/A			
Flow Offset Fee Paid: Yes No N/A			
Reserve Capacity Fee Paid: Yes No No N/A			
Water Meter on site:			
Drain Layer's License Valid: ☐ Yes ☐ No			
Street Opening Permit Obtained: Yes No N/A			
Trench Permit Obtained: Yes No N/A			
State Highway Opening Permit Obtained:			
Sewer Extension Permit Obtained:			
Application Approved and Permit Issued by the Department: Yes No			
If no, Why?			

Signature of Department Staff	Signature of Board of Health Staff
Name of Department Staff	Name of Board of Health Staff
Title of Department Staff	Title of Board of Health Staff
 Date	 Date