

INSTRUCTIONS FOR COMPLETING SEWER USE PERMIT

New industries: application is due 60 days prior to discharge to the sewer system.

Existing industries: application is due 60 days prior to current permit expiration.

- 1. Enter company or business name.**
- 2. Enter business mailing address.**
- 3. Enter full street address of building or premises producing the wastewater.**
- 4. Enter length of time located at address in #3.**
- 5. Enter the name of the legal owner of the business.**
- 6. Enter the name of the operator of the business, if different from #5.**
- 7. Enter the name of the legal owner of property upon which the business is located, if it is different from the owner of the business.**
- 8. Enter contact person details.**
- 9. Enter details about any previous wastewater discharge permits held with the Portland Water District. Also enter information about any other environmental permits held by the business, including permit number(s) and expiration date(s).**
- 10. Identify type of business and/or describe the nature of the business, in general.**
- 11. Enter individual process description, NAICS (North American Industry Classification System) codes (formerly SIC codes), and the average production per unit time for each process. Use this link to search for NAICS codes: <https://www.census.gov/eos/www/naics/index.html>**
- 12. Describe wastewater generating process occurring on the premises, including process descriptions, type of product(s) produced, and raw materials used. Identify if process wastewater is discharged in a batch or continuously. Indicate whether any processes are subject to Federal Categorical Standards and identify which ones apply (see list on page 3). Indicate the hours of operation, number of employees per shift, and hours of operation of pretreatment facility. Indicate whether the business activity is continuous throughout the year or if it is seasonal. Describe the seasonal variation, listing months of seasonal activity. Describe any changes in production or expansions planned in the next 5 years.**
- 13. Indicate where water used on premises is obtained. Provide average monthly water usage over the previous year in gallons/month and water consumed in product(s) in gallons/day. Note if these are estimates or actual numbers.**
- 14. Enter wastewater flow (average and maximum) for each wastewater discharge process.**
- 15. List wastewater characteristics/constituents. List date of most recent sampling event, location or location(s) from which sample was collected, and laboratory performing the analysis. Submit a copy of the most recent monitoring report, if not previously submitted to the Portland Water District. If no analyses have been conducted of the wastewater discharge, baseline monitoring may be required. Local and ordinance limits exist for arsenic, cadmium, chromium, copper, nickel, lead, silver, zinc, cyanide, biochemical oxygen demand, total suspended solids, oil and grease, mercury, pH and caustic alkalinity. If your business is subject to Federal Categorical Industry classification there may be additional monitoring requirements.**
- 16. Identify significant raw material used or stored on the premises and include duration of storage.**

Include all hazardous, poisonous, or toxic materials even if they are only kept on the premises occasionally. If quantities vary, select an average amount or give ranges.

17. Give name, title and telephone number(s) of a responsible person who can be contacted in case of an emergency (for example, the spill of a toxic material).

18. List most current version of facility's spill prevention, emergency response or SPCC plan(s). Your facility may be required to create a spill prevention plan, if you do not already have one.

19. Identify all chemicals used at your facility, their location, volume used per year, and disposal method.
Attach safety data sheets for all chemicals listed. If previously listed in #16, you do not need to list them here again.

20. These items are regulated and may only be discharged with the specific permission of the Portland Water District and City of Westbrook. Indicate whether you anticipate discharging these. If so, give details in #22.

21. Describe any pretreatment given to the wastewater before it is discharged to the sewer. The treatment facility should be described in sufficient detail to enable an estimation of its effectiveness. Use additional sheets, if necessary.

22. Give details required by #20. Also provide any additional information about your operation that you feel might have an effect on the sewerage system.

23. Draw a site plan showing location of all pertinent buildings, sheds, warehouses, loading and unloading facilities, fences, property lines, streets and roads. Indicate all sewers, storm drains, drainage ditches, monitoring manholes, sampling and monitoring locations, water lines and meters, and show the sizes of these items. Indicate north arrow. Building and/or site plans acceptable to the District and the City may be substituted.

24. Certification: The application must be signed and dated by an officer, employee, or agent of the business who has legal authority to bind the applicant business. Also, type or print the name and title of the person signing the application.

Please submit an electronic copy of the application via email using the address: pretreatment@pwd.org
Important: if an electronic copy is submitted you must retain the original application in your files.

Otherwise, mail it to :

**Portland Water District
c/o Industrial Pretreatment Program Supervisor
PO Box 3553
Portland, ME 04104-3553**

Federal Categorical Industries (updated May 2018)

Activity	Federal Regulation	Activity	Federal Regulation
Dairy Products Processing	40 CFR 405	Centralized Waste Treatment	40 CFR 437
Grain Mills	40 CFR 406	Metals Products and Machinery	40 CFR 438
Canned/Preserved Fruits/ Vegetables	40 CFR 407	Pharmaceutical Manufacturing	40 CFR 439
Canned/Preserved Seafood Processing	40 CFR 408	Ore Mining and Dressing	40 CFR 440
Sugar Processing	40 CFR 409	Dental Office	40 CFR 441
Textile Mills	40 CFR 410	Transportation Equipment Cleaning	40 CFR 442
Cement Manufacturing	40 CFR 411	Paving and Roofing Materials (Tars and Asphalt)	40 CFR 443
Concentrated Animal Feeding Operations (CAFO)	40 CFR 412	Waste Combustors	40 CFR 444
Electroplating	40 CFR 413	Landfills	40 CFR 445
Organic Chemicals, Plastics and Synthetic Fibers	40 CFR 414	Paint Formulating	40 CFR 446
Inorganic Chemicals Manufacturing	40 CFR 415	Ink Formulating	40 CFR 447
Soap and Detergent Manufacturing	40 CFR 417	Airport Deicing	40 CFR 449
Fertilizer Manufacturing	40 CFR 418	Construction and Development	40 CFR 450
Petroleum Refining	40 CFR 419	Concentrated Aquatic Animal Production	40 CFR 451
Iron and Steel Manufacturing	40 CFR 420	Gum and Wood Chemicals Manufacturing	40 CFR 454
Nonferrous Metals Manufacturing	40 CFR 421	Pesticide Chemicals	40 CFR 455
Phosphate Manufacturing	40 CFR 422	Explosives Manufacturing	40 CFR 457
Steam Electric Power Generating	40 CFR 423	Carbon Black Manufacturing	40 CFR 458
Ferroalloy Manufacturing	40 CFR 424	Photographic	40 CFR 459
Leather Tanning and Finishing	40 CFR 425	Hospital	40 CFR 460
Glass Manufacturing	40 CFR 426	Battery Manufacturing	40 CFR 461
Asbestos Manufacturing	40 CFR 427	Plastics Molding and Forming	40 CFR 463
Rubber Manufacturing	40 CFR 428	Metal Molding and Forming	40 CFR 464
Timber Products Processing	40 CFR 429	Coil Coating	40 CFR 465
Pulp, Paper and Paperboard	40 CFR 430	Porcelain Enameling	40 CFR 466
Meat and Poultry Products	40 CFR 432	Aluminum Forming	40 CFR 467
Metal Finishing	40 CFR 433	Copper Forming	40 CFR 468
Coal Mining	40 CFR 434	Electrical and Electronic Components	40 CFR 469
Oil and Gas Extraction	40 CFR 435	Non-ferrous Metals Forming and Metal Powders	40 CFR 471
Mineral Mining and Processing	40 CFR 436		

PORLAND WATER DISTRICT AND CITY OF WESTBROOK

SEWER USE PERMIT APPLICATION

New industries: application is due 60 days prior to discharge to the sewer system.

Existing industries: application is due 60 days prior to current permit expiration.

1. Company Name _____

2. Mailing Address _____

3. Facility Premises Address _____
(If different from above)

4. At above location since

5. Owner(s) of Business

6. Operator of Business

7. Owner of Property

8. Contact Person Name _____ **Title** _____

Email **Phone**

Phone

Cell _____ **Fax** _____

Fax

Cell _____ **Fax** _____

Fax _____

9. Does this company have an industrial waste discharge permit with the Portland Water District or has it had one previously? Check one: Yes No

If yes, what is the permit expiration date? _____

Identify other environmental control permits held by or for the facility:

	Permit Number	Permit Expiration Date
MePDES		
Air Permit		
Hazardous Waste		
Stormwater		
Other:		
Other:		

10. Identify type of business conducted or product(s) manufactured:

11. Individual Process Description **NAICS Code*** **Average Production**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*see <https://www.census.gov/eos/www/naics/index.html> to search for NAICS codes

12. Wastewater Generating Operation—Describe processes, products and raw materials. The following must be completed for each process line:

General description of processes for each product line:

General description of products produced by type and average rate of production:

General description of type and amount of raw materials used:

Process discharge is: **Batch** **Continuous** **Both**

Are your operations subject to federal categorical pretreatment standards (see list on page #3)?

Yes **No**

If yes, identify regulated process(es) and specify applicable standards:

Are categorical pretreatment standards and/or the local discharge prohibitions and limits being met on a consistent basis? Yes No

If no, specify whether additional operational and maintenance and/or additional pretreatment is required to meet standards. PWD will follow up on installation schedules:

Indicate days and hours of operation and specific number of employees per shift:

Describe hours of operation of actual or proposed pretreatment facility. Specify discharge hours:

Indicate any seasonal variations:

Are there any changes or expansions planned in the next 5 years?:

13. Water Source (please check): Private Well Public (metered) Other: _____

Please list all water and/or sewer account numbers and associated water and sewer meters along with location in facility (if applicable):

Account Number

Meter Number

Location

Average total monthly water consumption (gallons/month): _____

Circle one: Estimated or Actual?

Average water consumed in products daily (gallons/day): _____

Circle one: Estimated or Actual?

14. Wastewater Flows (gallons/day):

NAICS Process	Discharge (Gallons/Day)	
	Average	Maximum
Cooling Water		
Sanitary*		
Facility Total		

*To determine sanitary flow: multiply number of employees times 15 gallons/day

15. List wastewater characteristics and constituents, if known, including any pollutants in the discharge which are limited by any Federal, State, or Local standards. If wastewater analyses have been performed on the wastewater discharge(s) from your facility, attach a copy of the most recent data to this application. Include the date of the sample collection and analysis, name of laboratory performing the analysis, and location(s) from which sample(s) were taken (attach sketches, plans, or pictures etc., as necessary).

If no wastewater analyses have been performed, you may be required to perform baseline monitoring on the wastewater discharge(s) from your facility. If available, you may attach monitoring reports from other similar facilities if they can reasonably be expected to represent the wastewater discharge at the new facility.

16. Are any of the following materials used or stored on the premises?

Yes	No	Category
		Flammable or explosive materials
		Acid, alkaline or corrosive materials
		Pesticides or toxic materials such as Aldrin, Dieldrin, Benzidine, Cadmium, Cyanide, DDD, DDE, DDT, Endrin, Mercury, PCBs. Toxaphene, etc.
		Oil, grease or solvents
		Metal Solutions
		Phenols
		Large amounts of soap or detergents
		Radioactive materials
		Dyes

If yes to any of the above, give description and the approximate quantities used and/or stored. Also, submit Safety Data Sheets for each:

17. Person to contact in an emergency: _____

Title: _____ **Phone:** _____

18. Is there an Accidental Spill/Slug Control Plan for this facility? Yes No

If yes, identify name of plan and most recent revision date and attach a copy of the most recent plan:

Is there a Spill Prevention Control and Countermeasure (SPCC) plan for this facility? Yes No

Facilities with 1,320 gallons of above ground storage of oil or 42,000 gallons of buried oil storage MUST have an SPCC plan.

If yes, identify name of plan and most recent revision date and attach a copy of the most recent plan:

19. Identify all chemicals used at your facility, their location, volume used per year, and method of disposal. Include Safety Data Sheets for all chemicals listed. Attach additional sheets as needed.

20. Do you wish permission to discharge any of the following:

		<u>Yes</u>	<u>No</u>
(A)	More than 50,000 gallons per day		
(B)	A "slug" (more than 5 times the normal flow or strength for longer than 15 minutes)		
(C)	A concentration of BOD or suspended solids in excess of 400 mg/L or COD in excess of 600 mg/L		
(D)	Wastes containing fats, wax, grease or oil, whether emulsified or not, in excess of 100 mg/L		
(E)	pH higher than 9.0 S.U. (pH less than 5.0 S.U. is prohibited)		
(F)	Metals, metal pickling wastes or plating solutions		
(G)	Storm water, cooling water, etc., which is polluted or otherwise unacceptable for discharge into storm drains or natural outlets.		
(H)	Wastewater with a temperature over 104 degrees Fahrenheit (40 degrees Celsius)		
(I)	Garbage		
(J)	Radioactive wastes		
(K)	Materials which cause unusual amounts of inert suspended solids (ex: solids), dissolved solids (ex: sodium chlorine), discoloration (ex: dyes)		
(L)	Discharges regulated by the Environmental Protection Agency (EPA) Categorical industries must check YES		

IF ANY OF THE ABOVE ARE MARKED 'YES' , GIVE DETAILS OF EACH IN "REMARKS" BELOW OR ATTACH ADDITIONAL SHEETS.

21. Describe any wastewater pretreatment used or planned (attach additional sheets if necessary):

22. Remarks

23. SITE PLAN OF PREMISES

Attach sketch(es) of general plant processes and waste line layouts including location of floor drains and manholes. Include any existing and proposed pretreatment systems and locations and sizes of all existing and proposed connections to the POTW wastewater collection system. Also include details of present and/or proposed monitoring facilities for each waste stream.

NOTE — DISCHARGES OF SUBSTANCES INTO THE PUBLIC SEWER ARE REGULATED BY LAW AND ARE SUBJECT TO CIVIL AND CRIMINAL PENALTIES. IF YOU ANTICIPATE DISCHARGING ANYTHING OTHER THAN NORMAL DOMESTIC SEWAGE, YOU ARE ADVISED TO READ THE "SEWER RULES AND REGULATIONS" AND THE "SEWER USE ORDINANCE" ADOPTED BY THE CITY OF WESTBROOK.

PROHIBITED WASTES (BRIEF DESCRIPTION)

(see City of Westbrook Sewer Ordinance or Portland Water District Sewer User Rules for full description)

- 1. Unpolluted storm or other waters**
- 2. Flammable or explosive liquids, solids or gases**
- 3. Toxic or poisonous liquids, solids or gases**
- 4. Solid or viscous substances capable of causing an obstruction to the flow in sewers, or other interference with the proper operation or maintenance of the sewerage system.**
- 5. Any slug of wastes.**
- 6. Materials prohibited by the Environmental Protection Agency.**

NOTE — A SEWER USE PERMIT PERTAINS ONLY TO THE DISCHARGE OF WASTEWATER INTO THE PUBLIC SEWERAGE SYSTEM. CONNECTION TO THE PUBLIC SEWER AND THE INSTALLATION OR MODIFICATION OF ON-SITE PLUMBING REQUIRES SEPARATE PERMITS.

24. CERTIFICATION: I have personally examined and am familiar with the information submitted in this document and attachments.

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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons 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 fines and imprisonment for knowing violations.

Signature of Authorized Representative

Date

Name (type or print)

Title