

CITY OF Tipp City

APPLICATION FOR WASTEWATER SERVICE &
WASTEWATER DISCHARGE DISCLOSURE DECLARATION FORM

INSTRUCTIONS: Complete the entire form. Submit the original to the City. Submit a copy, including all attachments, to Tri-Cities North Regional Wastewater Authority

City of Tipp City
Attention: Eric Mack,
Deputy Director of Municipal
Services
260 S. Garber Drive
Tipp City, Ohio 45371

Tri-Cities North Regional
Wastewater Authority
Attention: Jeremy Bowser
3777 Old Needmore Road
Dayton OH 45424

**Application for Wastewater Service &
Wastewater Discharge Disclosure Declaration**

**City of Tipp City
260 S. Garber Drive
Tipp City, Ohio 45371**

GENERAL INFORMATION

Facility Name: _____

Address: _____

Day Time Phone: _____ Contact Person: _____

Describe the manufacturing, business, or service activity conducted on the premises:

List all Standard Industrial Classification (SIC) numbers and Federal Categorical pretreatment standards that apply to this facility:

SIC Numbers

Categorical Pretreatment Standards

_____	_____
_____	_____
_____	_____

PRODUCTION INFORMATION

Hours of operation, including days of week and number of employees per shift.

Describe the type and number or amount of products produced. For example: Printed Circuit Boards: 1,000 per day, or Liquid Wood Preservative: 500,000 gallons per week.

Identify the type and amount (number, pounds, or gallons) of raw materials and chemicals used at this facility and specify per day, week, month. Use actual chemical names. DO NOT use trade names or general terms such as solvent or cutting oil. Attach MSDS if available.

Raw Materials

Amount Used

<hr/>	<hr/>

Chemicals

Amount Used

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

FACILITIES INFORMATION

Sketch below, or attach a drawing, showing the layout of the building(s) and the streets surrounding this facility. Label each manufacturing area, locate the pretreatment plant, chemical storage areas and sampling locations. Label all “process” discharge points. Label all wastewater discharge pipes exiting the facility. Identify connections to the City sanitary and storm sewers.

WATER USAGE

Identify all water supplies to this facility, including private wells. If flows are not metered, estimate and mark with an E.

Water Source	Average Amount Used (gpd)
_____	_____
_____	_____
_____	_____

Identify all wastewater discharges from this facility, including destination of discharge. For example: Non-contact cooling water is discharged to the storm sewer; regulated process wastewater is discharged to an on-site pretreatment plant or sanitary sewer.

Source	Quantity (gpd)	Destination of Discharge
Restrooms/Sinks:	_____	_____
Laboratory:	_____	_____
Process Wastewater:	_____	_____
	_____	_____
	_____	_____
	_____	_____
Contact Cooling Water:	_____	_____
Non-Contact Cooling Water:	_____	_____
Contained in Product:	_____	_____
Other: (evaporation, cleaning vehicles, watering grounds)	_____	_____
	_____	_____

Method of Discharge

Will Discharge be Batch or Continuous? _____

Wastewater Flow Rates

Average Daily Flow: _____ Gal/day

Instantaneous Peak Flow: _____ Gal/day

Describe any variations in flow: _____

Daily: _____

Monthly: _____

Seasonal: _____

List any water savings measures and/or water reuse?

Does process wastewater require pH neutralization before discharge to sewer?

Proposed pH neutralization chemistry, holding tank, feed equipment and monitoring.

SPILL PREVENTION & CONTROL

Briefly describe the facilities available and the procedures followed in the event of a spill. For example: Curbs and dikes surround liquid chemical storage areas; floor drains are capped or plugged; absorbent pads and portable, self-contained sump pumps on hand, cathodic protection.

WASTEWATER SAMPLING & MONITORING DATA

Attach the analytical results from a wastewater sample collected from your facility for the following pollutants:

- | | |
|------------------|---|
| Cadmium | Arsenic |
| Chromium | Cyanide |
| Copper | pH |
| Lead | Oil & Grease |
| Mercury | TBOD ₅ |
| | sBOD ₅ (soluble using 0.45 micron filter) |
| Nickel | TSS |
| Silver | COD |
| Zinc | Indeno (1,2,3-CD) Pyrene |
| Ortho Phosphorus | Bis(2-ethylhexyl)Phthalate |
| Total Phosphorus | Chromium ⁺⁶ |
| Molybdenum | Total Kjeldahl Nitrogen (with ammonia and organic nitrogen fractions) |
| Barium | Total sulfur |

Are the samples collected as flow proportioned composites prior to dilution with sanitary wastewater? Are these values representative of the entire process wastewater discharge over time? If parameter concentrations could be characterized as “spikes” due to process operation/discharge, provide range of constituent values.

Describe in writing or with a sketch, where this sample was obtained:

Are there any sulfur compounds that are added to the process flow stream or as a constituent in the product? Examples of common sulfur compounds are sulfuric acid, sodium metabisulfite, surfactants or detergents that use a sodium lauryl sulfate and/or sulfonic acids, calcium sulfate and sulfites.

PRETREATMENT & FLOW EQUALIZATION FACILITIES

Describe any wastewater pretreatment or flow equalization equipment used, including grease traps, pH control systems, sand and grit collectors, surge tanks and screening or grinding devices. Attach diagrams.

Describe any wastewater pretreatment or flow equalization equipment planned for the future.

HAULED WASTES

Describe any other wastes, liquid or solid, that are collected and/or generated on-site and the method of disposal:

<u>Type of Waste</u>	<u>Quantity</u>	<u>Hauler</u>	<u>Disposal Site</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CERTIFICATION

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 person 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.

Signature of Applicant, Title

Date