

# SELMA-KINGSBURG-FOWLER COUNTY SANITATION DISTRICT

DO NOT WRITE IN THIS SPACE - FOR DISTRICT USE ONLY.

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## APPLICATION FOR PERMIT TO DISCHARGE NON-RESIDENTIAL WASTEWATER

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NOTE TO SIGNING OFFICIAL: THE COMPLETED APPLICATION IS A DISTRICT WORKING DOCUMENT. CONFIDENTIAL INFORMATION CONTAINED HEREIN WILL BE USED BY DISTRICT STAFF ONLY. HOWEVER, INFORMATION AND DATA PROVIDED IN THIS APPLICATION WHICH IDENTIFIES THE NATURE AND FREQUENCY OF DISCHARGE WILL BE AVAILABLE TO THE PUBLIC WITHOUT RESTRICTION.

### SECTION A. GENERAL INFORMATION

1. COMPANY NAME: \_\_\_\_\_
2. MAILING ADDRESS: \_\_\_\_\_ ZIP CODE \_\_\_\_\_
3. FACILITY ADDRESS: \_\_\_\_\_ ZIP CODE \_\_\_\_\_
4. ASSESSOR'S PARCEL NUMBER FOR PROPERTY: APN \_\_\_\_\_
5. NAME OF SIGNING OFFICIAL: \_\_\_\_\_
6. TITLE OF SIGNING OFFICIAL: \_\_\_\_\_
7. PERSON TO CONTACT CONCERNING INFORMATION PROVIDED HEREIN:  
NAME: \_\_\_\_\_
8. TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_
9. STATEMENT OF SIGNING OFFICIAL:

I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS DOCUMENT AND ATTACHMENTS. BASED UPON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION REPORTED HEREIN, I AFFIRM THAT THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE.

I UNDERSTAND AND AGREE THAT OMISSION OR MISREPRESENTATION OF DATA PROVIDED IN THIS APPLICATION MAY RESULT IN REVOCATION OR MODIFICATION OF ANY PERMIT ISSUED.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OFFICIAL

### SECTION B. PRODUCT OR SERVICE INFORMATION

1. BRIEF NARRATIVE DESCRIPTION OF MANUFACTURING OR SERVICE ACTIVITY TO TAKE PLACE AT FACILITY ADDRESS:  
\_\_\_\_\_
2. PRINCIPAL RAW MATERIALS TO BE USED: \_\_\_\_\_
3. PROCESS CATALYSTS TO BE USED: \_\_\_\_\_
4. PRINCIPAL PRODUCTS OR SERVICES: \_\_\_\_\_

**SECTION C. PROCESS INFORMATION**

DESCRIBE ALL MANUFACTURING, OPERATIONAL, CLEAN-UP, MAINTENANCE OR SERVICE PROCESSES AND LIST NAMES OF ALL MATERIALS TO BE USED, INCLUDING, BUT NOT LIMITED TO RAW MATERIALS, CATALYSTS, BATHS, STRIPPERS, SOLVENTS, COATINGS, PAINTS, CLEANSERS, POWDERS, GRANULES, LIQUIDS, CHEMICALS, PESTICIDES (PLANT AND ANIMAL), LUBRICANTS AND HYDRAULIC FLUIDS. USE ONE NUMBER FOR EACH PROCESS. USE ADDITIONAL SHEETS IF NECESSARY.

PROCESS	MATERIALS USED

**SECTION D. MATERIALS USE AND DISPOSAL INFORMATION**

FOR EACH OF THE MATERIALS LISTED IN SECTION C, GIVE THE PROPOSED AVERAGE DAILY VOLUME (IN GALLONS) OR WEIGHT (IN POUNDS) AND DENOTE THE PROPOSED DISPOSAL METHOD BY PLACING AN "X" IN THE APPROPRIATE BOX. USE ADDITIONAL SHEETS IF NECESSARY.

PROC. # FROM SECTION C	MATERIAL NAME	AVG. DAY VOLUME (GALS.)	AVG. DAY WEIGHT (LBS.)	ULTIMATE DISPOSITION OF MATERIAL					
				SEWER	SEPTIC TANK	PERCOLATION	EVAPORATION	WASTE HAULER	IN THE PRODUCT
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION E. OPERATIONAL AND SITE CHARACTERISTICS**

1. WILL MAJOR PROCESSES BE BATCH OR CONTINUOUS? \_\_\_\_\_
2. IF BATCH, GIVE NUMBER OF BATCHES PER 24 HOUR DAY: \_\_\_\_\_
3. WILL YOUR PROCESSES BE SUBJECT TO SEASONAL VARIATION? \_\_\_\_\_
4. IF YES, EXPLAIN INDICATING MONTH(S) OF PEAK OPERATION AND PRODUCTS: \_\_\_\_\_  
\_\_\_\_\_
5. WORK DAYS PER WEEK (CHECK)  MON  TUE  WED  THUR  FRI  SAT  SUN
6. WORKING HOURS: \_\_\_\_\_
7. NUMBER OF SHIFTS PER WORK DAY: \_\_\_\_\_
8. SHIFT STARTING TIMES: 1ST \_\_\_\_\_ 2ND \_\_\_\_\_ 3RD \_\_\_\_\_
9. AVERAGE NUMBER OF EMPLOYEES PER SHIFT:  

	<u>ADMINISTRATIVE</u>	<u>NON ADMINISTRATIVE</u>
1ST SHIFT	_____	_____
2ND SHIFT	_____	_____
3RD SHIFT	_____	_____
10. DESCRIBE ANY POTABLE WATER TREATMENT PROCESS OR EQUIPMENT TO BE UTILIZED: \_\_\_\_\_  
\_\_\_\_\_
11. DESCRIBE ANY WATER RECYCLING OR MATERIAL RECLAIMING PROCESSES TO BE UTILIZED: \_\_\_\_\_  
\_\_\_\_\_
12. DESCRIBE ANY WASTEWATER TREATMENT PROCESSES OR EQUIPMENT TO BE UTILIZED: \_\_\_\_\_  
\_\_\_\_\_
13. DESCRIBE FLOOR DRAINS IN YOUR FACILITY TO BE CONNECTED TO THE SEWER: \_\_\_\_\_  
\_\_\_\_\_
14. DESCRIBE GREASE/OIL/SEDIMENT INTERCEPTOR TO BE INSTALLED BEFORE DISCHARGE TO SEWER, IF ANY: \_\_\_\_\_  
\_\_\_\_\_
15. HOW OFTEN WILL GREASE/OIL/SEDIMENT INTERCEPTOR (IF ANY) BE CLEANED AND WHAT WILL THE ULTIMATE DISPOSAL OF THE MATERIALS REMOVED BE? \_\_\_\_\_  
\_\_\_\_\_
16. IF HOLDING TANKS WILL BE USED ANYWHERE IN YOUR FACILITY, DESCRIBE THEIR MAKEUP AND THEIR CAPACITY: \_\_\_\_\_  
\_\_\_\_\_
17. WILL HOLDING TANKS BE DISCHARGED TO THE SEWER? \_\_\_\_\_
18. IF SO, HOW OFTEN? \_\_\_\_\_
19. WILL THERE BE A SPILL PREVENTION, CONTROL AND COUNTERMEASURE PLAN PREPARED FOR YOUR FACILITY? \_\_\_\_\_
20. WILL THERE BE AN ILLICIT DISCHARGE PREVENTION PLAN PREPARED FOR YOU FACILITY? \_\_\_\_\_
21. WILL YOUR FACILITY HAVE A SCHEDULED SHUT DOWN? \_\_\_\_\_
22. IF YES, WHEN \_\_\_\_\_
23. DESCRIBE WATER AND WASTEWATER FLOW METERING DEVICES, IF ANY: \_\_\_\_\_  
\_\_\_\_\_

24. DESCRIBE WASTEWATER SAMPLING LOCATIONS AND DEVICES, IF ANY:

25. WHAT AREA OF LAWN WILL BE UNDER LANDSCAPE IRRIGATION? \_\_\_\_\_ SQ. FT. OR \_\_\_\_ ACRES. HOW MANY SPRINKLER HEADS? \_\_\_\_\_ @ \_\_\_\_\_ GALS/MIN. HOW LONG WILL YOU IRRIGATE? \_\_\_\_\_ MINS/DAY. WHICH DAYS? (CHECK) M T W T F S S

26. WHAT AREA OF TREES OR SHRUBS WILL BE IRRIGATED? \_\_\_\_\_ SQ. FT. OR \_\_\_\_ ACRES. HOW MANY SPRINKLER HEADS? \_\_\_\_\_ @ \_\_\_\_\_ GALS/MIN. HOW LONG WILL YOU IRRIGATE? \_\_\_\_\_ MIN/DAY. WHICH DAYS? (CHECK) M T W T F S S

27. WHAT WILL THE FACILITY'S TOTAL FLOOR SPACE AREA BE? \_\_\_\_\_ SQ. FT.

28. WILL THE AIR CONDITIONING SYSTEM COMPRESSOR BE A/C  OR EVAPORATIVE COOLER ? IF EVAPORATIVE COOLER, HOW MANY PADS WILL THERE BE? \_\_\_\_\_

29. WILL FACILITY HAVE FOOD/BEVERAGE COLD STORAGE? \_\_\_\_\_ FREEZER? \_\_\_\_\_ WHAT SIZE COLD STORAGE? \_\_\_\_\_ CU. FT. FREEZER? \_\_\_\_\_ CU. FT. WILL COOLING COILS BE WATER FLUSHED? \_\_\_\_\_ IF YES, WILL IT BE A CLOSED SYSTEM COOLING TOWER? \_\_\_\_\_ WILL IT BE A SINGLE PASS WATER FLUSH? HOW MANY GALLONS PER DAY OF FLUSH? \_\_\_\_\_ G.P.D. WILL THE FLUSH WATER BE DISPOSED OF TO SEWER? \_\_\_\_\_ STORM DRAIN? \_\_\_\_\_ IS A WATER CONDITIONER AND/OR ALGAE INHIBITOR USED ON THE COOLING WATER SYSTEM? \_\_\_\_\_ IF YES, WHAT?

30. WILL FACILITY HAVE KITCHEN? \_\_\_\_\_ WILL FACILITY HAVE LUNCHROOM WITH COOKING AND SINK? \_\_\_\_\_

31. WILL FACILITY HAVE GARBAGE GRINDER? \_\_\_\_\_ MOTOR HORSEPOWER? \_\_\_\_\_

32. WILL FACILITY HAVE WATER SOFTENER? \_\_\_\_\_ IF YES, WHAT WILL THE SIZE OF THE RESIN TANK BE? CU. FT. WILL IT BE A RENTAL? \_\_\_\_\_ WILL IT BE REGENERATED ON SITE? WILL BRINE GO TO SEWER? \_\_\_\_\_

33. **CHURCHES:** WHAT WILL THE SEATING CAPACITY BE IN THE CHAPEL OR WORSHIP FACILITIES? \_\_\_ PERSONS. WILL THERE BE DAY CARE FACILITIES? \_\_\_\_\_ IF YES, HOW LONG? \_\_\_\_\_ HOURS. WHAT DAYS? (CHECK) M T W T F S S WILL THERE BE SCHOOL (PAROCHIAL) FACILITIES? WHICH GRADES? \_\_\_ AVERAGE DAILY ATTENDANCE: \_\_\_ CLASS DAYS PER YEAR: \_\_\_ (PROVIDE SCHEDULE) HOLIDAYS PER YEAR: \_\_\_ VACATION: (MO./DAY) \_\_\_ TO \_\_\_ (MO./DAY). WILL FACILITIES BE USED FOR COMMUNITY GATHERINGS OR DINNERS? \_\_\_ HOW OFTEN? \_\_\_ DAYS PER YEAR (ESTIMATE) WILL FACILITIES BE USED FOR OTHER ACTIVITIES? \_\_\_ IF YES, DESCRIBE: \_\_\_\_\_ HOW OFTEN? \_\_\_ DAYS PER YEAR (ESTIMATE) ADDRESS OF PARSONAGE, IF ANY: \_\_\_\_\_

34. **RECREATION/MEETING/LODGE HALLS:**

MEETING DAYS PER MONTH: \_\_\_ HOURS PER MEETING: \_\_\_\_\_

MEMBERS AND OTHERS IN ATTENDANCE: \_\_\_\_\_ PERSONS.

WILL FACILITIES BE USED FOR OTHER ACTIVITIES? \_\_\_\_\_ IF YES, DESCRIBE: \_\_\_\_\_

35. **RESTAURANTS AND CAFES:** (SEATING)

COUNTER: \_\_\_\_\_ SEATS      BOOTHS: \_\_\_\_\_ SEATS

TABLES: \_\_\_\_\_ SEATS      TOTAL: \_\_\_\_\_ SEATS

36. **LAUNDROMATS:** HOW MANY SINGLE LOAD WASHERS? \_\_\_\_\_ DOUBLE LOAD WASHERS: \_\_\_\_\_ TRIPLE

LOAD WASHERS: \_\_\_\_\_ FOR A SINGLE LOAD WASHER, HOW MANY GALLONS WILL BE USED IN THE WASH CYCLE? \_\_\_\_\_ GALLONS. HOW MANY GALLONS FOR RINSE CYCLES? \_\_\_\_\_ NO. OF RINSES \_\_\_\_\_

**SECTION F. WATER CONSUMPTION AND LOSS**

1. ESTIMATE THE ANTICIPATED MONTHLY WATER USAGE AND ITS SOURCE OF SUPPLY

MONTH	GALLONS USED (ESTIMATE)	FROM CITY	FROM COUNTY	PRIVATE PURVEYOR	PRIVATE WELL
JAN		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FEB		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MAR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MAY		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JUN		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JUL		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AUG		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEP		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OCT		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NOV		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEC		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. LIST WATER USE IN YOUR FACILITY AND INDICATE ITS ULTIMATE DISPOSAL

TYPE OF WATER USE	AVERAGE DAILY VOLUME (GALS.)	ULTIMATE DISPOSAL OF WATER						
		SEWER	SEPTIC TANK	PERCOLATION	EVAPORATION	WASTE HAULER	IN PRODUCT	STORM DRAIN
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. (continued) LIST WATER USE IN YOUR FACILITY AND INDICATE ITS ULTIMATE DISPOSAL

TYPE OF WATER USE	AVERAGE DAILY VOLUME (GALS.)	ULTIMATE DISPOSAL OF WATER						
		SEWER	SEPTIC TANK	PERCOLATION	EVAPORATION	WASTE HAULER	IN PRODUCT	STORM DRAIN
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		LIST ALL PROCESS AND ANY OTHER USED BELOW (USE ADDITIONAL SHEETS IN NECESSARY)						
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION G. SEWER CONNECTION AND DISCHARGE INFORMATION**

LIST YOUR FACILITY'S PROPOSED SEWER OUTLETS, SIZES AND FLOWS:

DESCRIPTIVE LOCATION OF SEWER CONNECTION DISCHARGE POINT	AVERAGE DAILY FLOW (GALS.)	SEWER SIZE (INCHES)

**SECTION H. PLANS AND DRAWINGS**

ATTACH PLOT PLAN, FLOOR PLAN, PLUMBING PLAN, MECHANICAL PLAN AND OTHER DRAWINGS IN ACCORDANCE WITH THE S-K-F CSD WASTEWATER SEWER DESIGN AND CONSTRUCTION STANDARDS AND AS NECESSARY TO SHOW LOCATIONS AND ELEVATIONS OF SEWERS AND CONNECTIONS, RAINWATER DISPOSAL, PRETREATMENT SITES, SAMPLING AND FLOW MONITORING SITES, PLANT PROCESSES, FLOOR DRAINS, HOLDING TANKS, CAFETERIAS, RESTROOMS, SHOWERS, WATER AND WASTEWATER TREATMENT PROCESSES AND EQUIPMENT, LANDSCAPING IRRIGATION SYSTEM AND GREASE/OIL/SEDIMENT INTERCEPTORS.

**SECTION I. LABORATORY ANALYSIS OF DISCHARGE**

THE TYPICAL PROPOSED WASTEWATER DISCHARGE MUST BE CHARACTERIZED. THEREFORE, EITHER THE RESULTS OF LABORATORY ANALYSES PERFORMED ON SIMILAR WASTEWATER OR AN ESTIMATION OF THE POTENTIAL CONCENTRATION OF WASTEWATER CONSTITUENTS MUST BE ATTACHED TO THIS APPLICATION. THE CHARACTERIZATION MUST INCLUDE CONSTITUENTS LISTED IN TABLE 2.03-1 OF THE S-K-F CSD SEWER USE ORDINANCE AND SHOULD INCLUDE, IF KNOWN TO BE PRESENT IN PROPOSED DISCHARGE, CONSTITUENTS LISTED IN TABLE 2.03-2 OF SAID ORDINANCE. LABORATORY ANALYSES MUST BE PERFORMED BY A LABORATORY CERTIFIED BY THE STATE DEPARTMENT OF HEALTH SERVICES. THE ESTIMATION OF POTENTIAL CONSTITUENTS MUST CITE THE BASIS FOR THE ESTIMATION.