

CITY OF GREELEY

HAULED WASTEWATER DISCHARGE PERMIT APPLICATION

1. a) NAME OF BUSINESS _____
- b) MAILING ADDRESS _____
- c) ADDRESS OF PREMISES _____
- d) TYPE OF BUSINESS (Check)
Industrial Commercial
- e) DESCRIPTION OF BUSINESS _____ Federal SIC No. _____
- f) PERSON TO CONTACT ABOUT THIS APPLICATION: _____
PHONE: _____

2. a) METHOD OF WASTE DISPOSAL (Check)
City Sewer Septic Tank and Leaching Haul
- (IF SEPTIC TANK IS CHECKED, GO TO ITEM NO. 6 AND RETURN FORM. NO ADDITIONAL INFORMATION IS NEEDED).

- b) TYPE OF WASTE DISCHARGE: Domestic Only Industrial & Domestic
- (IF ANSWER IS "DOMESTIC ONLY", GO TO ITEM NO. 6 AND RETURN FORM).

3. a) DAYS OF OPERATION PER WEEK M T W TH F SA SU (Circle)
SHIFTS PER DAY: _____
- b) NUMBER OF EMPLOYEES: Full-time _____ Part-time _____
- c) RAW MATERIALS USED (including average rate of usage) _____

- d) PRODUCTS PRODUCED (type and rate of production) _____

e) PROCESS DESCRIPTION _____

f) WASTEWATER PRODUCING OPERATIONS (full description--attach additional sheets if necessary)

g) DURATION OF DISCHARGE _____
HOURLY PEAK _____
SEASONAL VARIATIONS _____
SANITARY, BOILER, COOLING WATER DISCHARGE FLOW _____

4. a) Attach site and/or floor plan of facility showing details of process plumbing, sewer lines, connections and appurtenances.

b) If batch process used, describe procedures used to dispose of waste material:

c) Describe any pretreatment, waste storage, spill control, or house-keeping practices used or planned:

5. POLLUTANT CHARACTERISTICS

Check pollutants found in facility's discharge from manufacture of product or as byproduct and provide average concentrations (mg/l). If industry is governed by Federal Categorical Standards, provide concentrations of discharge from regulated processes.

Group I

BOD	_____	Cyanide	_____
TSS	_____	Fluoride	_____
Dissolved Solids	_____	Sodium	_____
Oil & Grease	_____	Sulfate	_____
Chloride	_____		

Group II

Acid, alkaline or corrosive material	_____
Metal solutions	_____
Pesticides	_____
Phenols and other toxic organic materials	_____
Flammable or explosive materials	_____
Radioactive materials	_____
Large amounts of soaps or detergents	_____
Dyes	_____
Temperature over 160EF maximum or 120E average	_____

Group III

65 TOXIC POLLUTANTS LISTED IN CONSENT DEGREE AND REFERENCED IN 307(a) OF THE CWA OF 1977

Acenaphthene	_____	Endrin and metabolites	_____
Acrolein	_____	Ethylbenzene	_____
Acrylonitrile	_____	Fluoranthene	_____
Aldrin/Dieldrin	_____	Haloethers	_____
Antimony and compounds	_____	Halomethanes	_____
Arsenic and compounds	_____	Haptachlor and metabolites	_____
Asbestos	_____	Hexachlorobutadiene	_____
Benzene	_____	Hexachlorocyclopentadiene	_____
Benzidine	_____	Hexachlorocyclohexane	_____
Beryllium	_____	Hydrocarbons	_____
Cadmium and compounds	_____	Isophorone	_____
Carbon Tetrachloride	_____	Lead and compounds	_____
Chlordane	_____	Mercury and compounds	_____
Chlorinated benzenes	_____	Naphthalene	_____
Chlorinated ethanes	_____	Nickel and compounds	_____
Chlorinated ethers	_____	Nitrobenzene	_____
Chlorinated naphthalene	_____	Nitro phenols	_____
Chlorinated phenols	_____	Nitrosamines	_____
Chloroform	_____	Pentachlorophenol	_____
2-chlorophenol	_____	Phenol	_____
Chromium and compounds	_____	Phthalate esters	_____
Copper and compounds	_____	Polychlorinated biphenyl's (PCB)	_____
Cyanides	_____	Polynuclear aromatic	_____

(Continued)

Group III (continued)

DDT and metabolites	_____	Selenium and compounds	_____
Dichlorobenzenes	_____	Silver and compounds	_____
Dichlorobenzidine	_____	2, 3, 7, 8,-Tetrachlorodibenzo-	
Dichloroethylenes	_____	p-dioxin (TCDD)	_____
2,4-dichlorophenol	_____	Tetrachloroethylene	_____
Dichloropropane &		Thallium and compounds	_____
Dichloropropene	_____	Toluene	_____
2, 4-dimethylphenol	_____	Toxaphene	_____
Dinitrotoluene	_____	Trichloroethylene	_____
Diphenylhydrazine	_____	Vinyl Chloride	_____
Endosulfan and metabolites	_____	Zinc and compounds	_____

List any other toxicants not covered in above groups known or anticipated to be present in your discharge

6. The information contained in this application is familiar to me and to the best of my knowledge and belief is true, complete and accurate.

(Signature of Official) _____
(Position) _____
(Date)

Please return to:

Mr. Thomas E. Dingeman
Plant Superintendent
Water and Sewer Department
City of Greeley
300 East 8th Street
Greeley, CO 80631