

TOWN OF HUDSON, NEW HAMPSHIRE

INSTRUCTIONS FOR PERMIT **MODIFICATION** APPLICATION

INDUSTRIAL DISCHARGE AGREEMENT (IDA) APPLICATION

The owner or operator of any industrial or commercial establishment, public or privately owned, which discharges or intends to discharge wastewater within the Town of Hudson, must complete the enclosed application. The modification application is to be completed in duplicate and returned to the Town Engineer within ninety (90) days prior to change of discharge. Upon initial submission of the application, the Town Engineer shall establish an estimated fee, sufficient to cover all anticipated costs incurred by the Town for administration, consultant review and/or testing. Applicants must maintain sufficient escrow funds to cover all costs incurred by the Town. At the conclusion of the review, the applicant may receive any surplus. A minimum of \$25.00 will be required. The application submission is not considered complete until all fees are paid.

The Industrial Discharge Agreement is required by the United States Environmental Protection Agency in accordance with Public Law 92-500 and 40 CFR and by the Town of Hudson in accordance with the municipal Sewer Use Ordinance.

If wastewater is other than domestic wastewater as defined in the Sewer Use Ordinance, data must be obtained and the application, prepared by a Sanitary Engineer registered as a Professional Engineer in the State of New Hampshire; and all analysis must be completed by a laboratory approved by the Environmental Protection Agency. The authorized agent must sign Page 15.

GENERAL INSTRUCTIONS

All applicants must complete the entire application. Two copies of the application form are attached (both copies shall be returned with original signatures/ stamps). Where necessary, separate sheets, referenced to the appropriate item number, should be added for additional information.

The application shall be accompanied by a site plan(s) of a suitable size; preferably 24" x 36". The plan should contain the applicant's name, the address of the applicant, and the date. The plan should show buildings from which wastewater is being discharged and all points of discharge; existing and proposed discharge connections to the municipal sewerage system; or to a private sewerage disposal system, whichever is applicable; type size and slope of discharge conduits; approximate inverts, location and method of private sewerage disposal, if applicable; location of sampling stations, ground and building elevations; stormwater drains and other appurtenant utilities; adjacent street and waterways and a north arrow. The plan should be drawn at a scale not greater than 50 feet to the inch, unless otherwise approved by the Town Engineer.

SPECIFIC INSTRUCTIONS

ITEM 7 – Provide a concise description of the business description. A job shop is as defined in 40 CFR. The definition can be found on the internet at www.gpoaccess.gov/cfr/index.html.

ITEM 9 – Provide the actual number of employees currently employed by the Applicant. If some are not ever based out of the Hudson facility note the number of off-site employees. Provide the number of employees the facility plans to employ or permit at the end of the modification process.

ITEM 12 – The applicable Standard Industrial Classifications (SIC) numeric code and description can be found in the “Standard Industrial Classifications Manual,” latest edition, prepared by the Executive Office of the President, Office of Management and Budget. A complete listing of SIC Codes can be found on the internet at www.census.gov/epcd/www/sic.html.

The applicable North American Industry Classification System (NAICS) numeric code and description can be found in the North American Industry Classification System Manual,” latest edition, prepared by the Executive Office of the President, Office of Management and Budget. A complete listing of NAICS Codes can be found on the internet at www.census.gov/eos/www/naics/. Both manuals are available at the Reference Desk of the NH State Library and are available for purchase from the U.S. Government Printing Office, Washington, D.C.

The “Industrial Group” blank should show a verbal description of the numeric code.

ITEM 14 – Provide a list of any or all environmental permits related to the facility. This list should include, but not be limited to, any Small or Large Quantity Generator Permits, Air Permits, and Water Permits, including NPDES permits.

ITEM 16 – The applicable Federal Categorical Pretreatment Category can be found in the Code of Federal Regulations, 40 CFR, Parts 403 through 699. A complete listing of Federal Categorical Pretreatment Categories can be found on the internet at www.gpoaccess.gov/cfr/index.html. If not applicable, the applicant must confirm that none of the categories applies to the facility.

ITEM 20 - Discharge locations are all points at which the wastewater is discharged into the municipal sewerage system or into any private sewerage disposal system. Those points should be numbered and cross-referenced to the site plan.

ITEM 21 - Wastewater categories include sanitary (domestic), process and other (such as non-contact cooling). Values for process and other discharges should be determined by using existing water source information or existing meters. If data does not yet exist,

applicant should make a best guess for both estimated average daily values and estimated maximum daily flows.

Sanitary (domestic) wastewater shall include only that wastewater which is discharged from normal water-carried household and toilet wastes and waste from sanitary conveniences. This does not include wastewater from commercial laundries, commercial kitchens, cleaning establishments or car-washing establishments, and ground, surface, or stormwater. Estimated maximum flow figures are based upon the State of New Hampshire Department of Environmental Services, Subdivision and Individual Sewage Disposal System Design Rules (Env-Ws 1000), Table 1008-I, Unit Design Flow Figures, but must be monitored to set/determine actual flows.

Process wastewater includes all wastewater from industrial processes, trade or business as distinct from domestic wastes, stormwater or noncontact cooling water.

Other wastewater includes stormwater and any other wastewaters, which cannot be defined in the two aforementioned categories.

Non-contact cooling wastewater includes only water or wastewater, which is sufficiently clean and uncontaminated and is able to be discharged without treatment or purification into any natural stream or watercourse without causing offense. Non-contact cooling wastewaters include wastewater from air conditioners, industrial cooling, condensing and from hydraulically powered equipment. This wastewater generally is not accepted into the Town of Hudson Sanitary Sewage collection system. The applicant should pursue other means of discharging the "clean" wastewater.

If domestic, uncontaminated, process and other wastewaters are combined in any way, the resulting wastewater shall be considered process wastewater.

ITEM 22 – Each process discharge must be described showing information required to calculate maximum gallons per day of discharge.

ITEM 23 – Is water part of the final product? Such as a liquid sold as product that uses water. (such as juice for drinking).

ITEM 24 – Is water lost to evaporation as part of the process? Such as water lost to evaporation in a cooling tower or evaporator.

ITEM 25 – If any wastewater, such as non-contact cooling water, is discharged other than to the sewer, describe the wastewater, discharge location, estimated volume, and list the permit information. If any wastewater is discharged to an alternate or private disposal system, please also describe system and list permit information.

ITEM 26 – Is a cafeteria provided on-site which involves on-site cooking or commercial style dishwashing? This does not include lunchrooms provided for employees to "heat" previously cooked foods.

ITEM 27 – Are showers available to employees to use in non-emergency situations? This does not include emergency showers for use during an accident or chemical spill.

ITEM 28 – If any chemicals are used or stored on-site, potential exists for them to be discharged to the sewer. All chemicals used or stored on-site should be listed. If no chemicals are normally discharged to the sewer, the estimated % lost to sewer is 0%. Current MSDS or SDS sheets must be provided.

ITEM 29 – Each production line and process discharge must be described using a diagram showing information relevant to the production process and pretreatment system.

ITEM 30 - The principal products and maximum yearly quantities produced are to be stated in the units of measurement as specified in 40 CFR, 403 through 699. For other industries not described in the Federal Regulations, units of measurement should be those normally used within the industry. Materials used in process should include all raw materials used in the production process.

ITEM 32 – Copies of available water usage data for the last year should be attached. If the data is for a different facility, the applicant should note process and site differences. Key site differences to include are: on-site cafeteria (where food is cooked for purchase), showers available for employees, formerly water through cooling system proposed as closed looped, etc.

ITEM 34 – A copy of a general site location map should be provided. The attached plan should be detailed enough to allow someone unfamiliar with the area to locate the facility and provide relation of facility to Nashua's Wastewater Treatment Plant.

ITEM 35 – Each process discharge line should be equipped with a flow meter. Meter location should be clearly shown on the attached site/floor plan.

ITEM 37 – Does the facility have an adopted Spill Prevention Control and Countermeasure Plan? If so, list the date last revised. If not, the facility should check with Federal and State regulations to confirm that a plan is not required for the facility. Does the facility have a general spill plan? If any liquids or chemicals are stored on site and could be spilled or dumped into the sewer, a general spill plan is required.

ITEM 38 – The facility should list all water sources. If the facility has an on-site well used only for lawn sprinkling or cooling water, the applicant should clearly note this information in the application. Include all relevant incoming meter numbers.

ITEM 39 – If the facility has a water recycle system, please describe the system. If the system must be drained occasionally, this information should be included under Item 15 regarding proposed process water use.

ITEM 40 – List all waste (other than normal trash) that is hauled away for disposal or recycling.

ITEM 41 – List all information requested related to any process water that will be discharged to the municipal sewer system. Test and analysis shall be performed in accordance with methods outlined by 40 CFR, Part 136. This information can be found on the internet at www.gpoaccess.gov/cfr/index.html. If sampling results indicate non-compliance with Federal, State or local limits, the applicant should provide a schedule and information regarding how the applicant will comply with all of the applicable limits. The information should include:

- a. The schedule shall contain increments of progress for the commencement and completion of major events leading to the construction and operation of additional pretreatment required for the industrial user to meet the applicable categorical pretreatment standards. (e.g., hiring an engineer, completing preliminary plans, completing final plans, executing a contract for major components, commencing construction, completing construction, etc.)
- b. No increment referred to in the previous paragraph shall exceed 9 months.
- c. Not later than 14 days following each date in the schedule and the final date for compliance, the industrial user shall submit a progress report to the Town Engineer including at a minimum, whether or not it complies with the increment or progress to be met on such date and, if not, the date on which it expects to comply with this increment of progress, the reason for delay, and the steps being taken by the industrial user to return the construction to the schedule established. In no event shall more than 9 months elapse between such progress reports to the Town Engineer.

The data must reflect the condition of the wastewater after any pretreatment process, but before entrance into the municipal sewerage system or any private sewerage disposal facility. A copy of the Laboratory Analysis Report shall accompany each copy of the application.

Analyses shall be performed by a laboratory certified in the State of New Hampshire.

ITEM 42 – Check one or more of the applicable columns for each parameter. All line items must be addressed for all (discharging or non-discharging) facilities.

ITEM 43 – The application must be signed by a valid Business Owner (or Business Owner's Agent) signing official and Land Property Owner (or Land Property Owner's Agent) in accordance with Hudson Sewer Use Ordinance No. 77 and with 40 CFR 403.

Date Received:	_____
Application No.:	_____
Existing Permit No.	_____

TOWN OF HUDSON, NEW HAMPSHIRE
INDUSTRIAL DISCHARGE AGREEMENT (IDA)
PERMIT **MODIFICATION** APPLICATION

I hereby apply for a permit modification to discharge the waste(s) described herein to the public sewerage system in the Town of Hudson, New Hampshire.

By filing this application, it is agreed that the applicant shall comply with the Sewer Use Ordinance of the Town of Hudson and all applicable State and Federal Regulations. *(Please print or type all responses unless noted otherwise. If none, state "None", if not applicable, please provide evidence that the question is not relevant to your facility).*

1. DATE OF APPLICATION: _____
2. LAND OWNER OR OWNER'S AGENT NAME:

Name: _____ Title: _____

Address (Site): _____

Address (Mailing): _____

Telephone No.: _____ Fax: _____

Email Address: _____

Tax Map Number: _____ Lot Number: _____
3. BUSINESS APPLICANT'S NAME (or Business Owner's Agent – Permit Signing Official):

Name: _____ Title: _____

Business Name: _____

Address (Site): _____

Address (Mailing): _____

Telephone No.: _____ Fax: _____

Email Address: _____

Application No. _____

4. APPLICANT'S ON-SITE REPRESENTATIVE IN CHARGE OF WASTEWATER DISPOSAL
(Permit Contact Person):

Name: _____ Title: _____

Address: _____

Telephone No.: _____ Fax: _____

Email Address: _____

5. ENGINEER OR AUTHORIZED AGENT PREPARING APPLICATION (IF APPLICABLE):

Name: _____ Title: _____

Address: _____

Telephone No.: _____ Fax: _____

Email Address: _____

6. LABORATORY PERFORMING WASTEWATER ANALYSIS:

Name: _____ Title: _____

Address: _____

Telephone No.: _____ Fax: _____

Email Address: _____

7. TYPE OF BUSINESS (If Job Shop, Please Note): _____

8. THE INDUSTRY GENERALLY WORKS _____ SHIFTS PER DAY.

9. CURRENTLY, THIS INDUSTRY EMPLOYS _____ PEOPLE FULL TIME.

THIS INDUSTRY REQUESTS TO PERMIT _____ PEOPLE FULL TIME.

CURRENTLY, THIS INDUSTRY EMPLOYS _____ PEOPLE PART-TIME.

THIS INDUSTRY REQUESTS TO PERMIT _____ PEOPLE PART-TIME.

COMMENT: _____

10. CURRENTLY, THE INDUSTRY WORKS THE FOLLOWING DAYS: S M T W R F S
(Circle Applicable Days):

THIS INDUSTRY PLANS TO WORK THE FOLLOWING DAYS: S M T W R F S
(Circle Applicable Days):

11. THE INDUSTRY GENERAL OPERATES AND/OR PLANS TO OPERATE DURING THE
FOLLOWING HOURS:

Application No. _____

12. SIC CODE NO.: _____ INDUSTRIAL GROUP: _____
NAICS CODE NO.: _____

13. THE INDUSTRY HAS THE FOLLOWING EXPANSION PLANS:

14. PLEASE LIST ALL ENVIRONMENTAL PERMITS HELD BY OR FOR THE FACILITY:

15. DOES THE INDUSTRY PRETREAT INDUSTRIAL PROCESS WASTEWATER?
EXISTING? _____ NOW? _____

16. APPLICABLE FEDERAL CATEGORICAL PRETREATMENT CATEGORY:
(If Any, if None, State "None".)

17. WHY IS PERMIT MODIFICATION REQUESTED? (CHECK ALL THAT APPLY)
 Increase in flow. Employee increase. Process increase. Other:
If other: _____
 Change or additional industrial process(es).
 Change or additional industrial process chemistry(ies).
 Change or additional pretreatment process(es) (PROVIDE PLANS AND SPECIFICATIONS).
 Change or additional pretreatment chemistry(ies).

18. BRIEFLY DESCRIBE EXISTING PRODUCTION PROCESS AND/OR CHEMISTRY:

BRIEFLY DESCRIBE EXISTING WATER TREATMENT OR CHEMISTRY:
(If Any, if None, state "None".)

19. BRIEFLY DESCRIBE PROPOSED PRODUCTION PROCESS AND/OR CHEMISTRY:

BRIEFLY DESCRIBE PROPOSED WATER TREATMENT OR CHEMISTRY:
(If Any, if None, state "None".)

20. IF THERE EXISTS MORE THAN ONE DISCHARGE LOCATION, PLEASE DESCRIBE LOCATION OF DISCHARGE IMPACTED BY MODIFICATION (If only one discharge location exists state, "only one discharge location".):

21. PLEASE COMPLETE THE FOLLOWING:

		Average (gpd)	Maximum (gpd)
Existing	Sanitary		
	Process		
	Other		
Existing	Total		
Proposed	Sanitary		
	Process		
	Other		
Proposed	Total		

22. DESCRIBE FREQUENCY OF PROCESS WASTEWATER DISCHARGES:

Process Name	Continuous, Intermittent, Batch Dump?	Volume	Frequency of Batch Dumps	Hours per day of Continuous Dumps

23. IS ANY WATER CONSUMED IN THE PRODUCT(S)? NO _____ IF YES, _____ GPD
24. IS ANY WATER LOST TO EVAPORATION? NO _____ IF YES, _____ GPD
25. IS ANY WASTEWATER DISCHARGED OTHER THAN TO MUNICIPAL SEWER? NO _____

IF YES, LIST NPDES PERMIT NUMBER AND PROVIDE A COPY OF NPDES PERMIT OR GROUNDWATER REGISTRATION INFORMATION: _____

TYPE	AVERAGE VOLUME	WHERE DISCHARGED
_____	_____	_____
_____	_____	_____
_____	_____	_____

26. IS A FORMAL CAFETERIA PROVIDED ON-SITE? YES _____ NO _____
27. ARE SHOWERS PROVIDED IN THE FACILITY? YES _____ NO _____

28. PLEASE LIST ALL CHEMICALS USED IN THE FACILITY, I.E.; PRODUCTION CHEMICALS, DEGREASERS, CLEANING SOLVENTS, PRETREATMENT CHEMICALS, ETC. (**ATTACH COPIES OF MSDS AND/OR SDS SHEETS.**)

RAW MATERIALS	AMOUNT USED/YEAR	ESTIMATED % LOST TO SEWER (If None, indicate 0%)	LOCATION OF USE WITHIN FACILITY	MSDS/ SDS SHEETS ATTACHED
_____	_____	_____	_____	<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"/>

29. PLEASE ATTACH THE FOLLOWING LINE DIAGRAMS (Process and Pretreatment Flow Sketches) SHOWING THE EXISTING AND PROPOSED PRODUCTION AND PRETREATMENT PROCESSES.

- | | | |
|---|---|--|
| EXISTING PRODUCTION PROCESS FLOW SKETCH | | <input type="checkbox"/> Attached – (Required) |
| PROPOSED PROCESS FLOW SKETCH | <input type="checkbox"/> N/A – NO PRODUCTION CHANGE | <input type="checkbox"/> Attached |
| EXISTING PRETREATMENT PROCESS SKETCH | <input type="checkbox"/> NO PROCESS DISCHARGE | <input type="checkbox"/> Attached |
| PROPOSED PRETREATMENT PROCESS SKETCH | <input type="checkbox"/> NO PROCESS DISCHARGE | <input type="checkbox"/> Attached |

30. PROVIDE A SUMMARY OF THE PRODUCTION PROCESS INFORMATION:
(Attach Additional Sheets as needed)

Product Produced	Average Rate of Production/Quantity of Services Provided		
	Amount	Units (See Below)	Time Basis (Day, Week, Month, Year)

Units: Pounds, Kilograms, Square Feet, Square Meters, Tons, Gallons, Liters, Barrels, Pieces or Units, Bushels, or Other, please specify: _____

31. PLEASE ATTACH ANY ADDITIONAL INFORMATION WHICH MAY CLARIFY INTENDED CHANGES (MANUFACTURER’S PRODUCT LITERATURE, TOXICITY DATA, TREATABILITY STUDIES, ETC.).
32. PLEASE ATTACH COPIES OF WATER USAGE DATA (Meter Log Sheet or Water Bills) FOR THE PAST YEAR
33. PLEASE ATTACH A DETAILED MAP OF THE SITE (AND BUILDING) SHOWING THE PIPE SIZES AND APPROXIMATE LOCATION OF ALL SEWER CONNECTIONS, DRAINS, OR OUTFALLS LEAVING THE BUILDING AND ALL SAMPLING LOCATIONS. (If any process wastewater is discharged or proposed to be discharged, this map should also include location of water meters, flow meters, general layout of internal plumbing, sampling stations or control manholes, monitoring equipment and pretreatment facilities.) Include plan scale, north arrow, street names, river, pond, and well locations and an outline of on-lot storage-disposal systems (septic tank and leachfield), municipal sewer, chemical storage areas, bulk chemical storage areas and containment devices, flow arrows, and any other pertinent data.
34. PLEASE ATTACH A GENERAL SITE LOCATION MAP (LOCUS) WITH FACILITY LOCATION IN RELATION TO NASHUA’S WASTEWATER TREATMENT PLANT.

35. PLEASE PROVIDE THE FOLLOWING DISCHARGE FLOW METER DATA:

Manufacturer	_____	Model	_____	Location (Key to Plan)	_____
Manufacturer	_____	Model	_____	Location (Key to Plan)	_____

36. PLEASE DESCRIBE ANY MEASURES TAKEN OR PLANNED TO REDUCE WATER USAGE AND IMPLEMENT POLLUTION PREVENTION TECHNIQUES, IF ANY, SUCH AS; FLOW RESTRICTERS, COUNTERCURRENT RINSES, RECYCLING OF NON-CONTACT COOLING WATER, CHEMICAL SUBSTITUTIONS, AND POLLUTANT SOURCE REDUCTION.

37. IS A SPILL PREVENTION CONTROL AND COUNTERMEASURE PLAN PREPARED FOR THE FACILITY? (PETROLEUM RELATED)

NO YES IF YES, LIST DATE LAST REVISED: _____

IS A GENERAL CHEMICAL SPILL PLAN PREPARED FOR YOUR FACILITY?

NO YES IF YES, LIST DATE LAST REVISED: _____

38. PLEASE LIST ALL INFLUENT WATER SOURCES:

	Meter #	Estimated Average Volume (gpd)	Estimated Maximum Volume (gpd)
Hudson Water Utility:	_____	_____	_____
Other: (Well, River, Stream, Pond, etc.)	_____	_____	_____
Other: (Well, River, Stream, Pond, etc.)	_____	_____	_____
Other: (Well, River, Stream, Pond, etc.)	_____	_____	_____
Other: (Well, River, Stream, Pond, etc.)	_____	_____	_____
Other: (Well, River, Stream, Pond, etc.)	_____	_____	_____

Application No. _____

39. IS ANY WATER RECYCLED? IF SO, PLEASE DESCRIBE:

40. DESCRIBE LIQUID AND/OR SOLID WASTES THAT ARE HAULED AWAY FOR DISPOSAL (Use additional sheets if needed):

Type of Waste	Waste Hauler	Disposal Site
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

41. IF ANY PROCESS WASTEWATER IS (OR WILL BE) DISCHARGED, PLEASE PROVIDE THE FOLLOWING INFORMATION: (Including Requested Sampling Data.—Attach copy of lab report and chain of custody. Data for existing process may be submitted if proposed data is not yet available. Provide a brief narrative explaining potential differences, if any):

IS ANY DISCHARGE DEFINED AS HAZARDOUS WASTE BY NEW HAMPSHIRE OR EPA? YES NO

IF YES, PLEASE POVIDE DETAILS ON PAGE 15.

SAMPLE POINT (Describe) _____
 SOURCE OF WASTEWATER (Process-Key to Plan) _____
 VOLUME _____ GALLONS/DAY
 pH (daily range) _____
 TEMPERATURE (daily range) _____

NAME OF PERSON COLLECTING SAMPLE: _____
 Note: Samples should be representative of daily flow from industrial processes (Flow proportional composite samples, or if batch discharge, a grab sample may be utilized. Temperature, pH, cyanide, and oil and grease must be a series of 4 grab samples).

PARAMETER	CONCENTRATION (mg/l)
Biochemical Oxygen Demand (5 Day)	_____
Suspended Solids	_____
Temperature	_____
Alkalinity (caustic)	_____
pH	_____
Fats, wax, oil & grease	_____
Arsenic	_____
Boron	_____
Cadmium	_____
Chromium (Total)	_____
Chromium (Hexavalent)	_____
Copper	_____
Lead	_____
Mercury	_____
Nickel	_____
Selenium	_____
Silver	_____
Zinc	_____
Cyanides (Total)	_____
Sulfates	_____
Phenols	_____
Total Toxic Organics	_____
Chloroform	_____
Carbon disulfide	_____

42. PRIORITY POLLUTANT INFORMATION:

Indicate with an "X" the priority pollutants that are or will be utilized in the manufacturing processes or generated as by-products. Also, mark all items not known or suspected to be present as appropriate. All parameters should be marked

Chemical Compound	Suspected or Known Present in Waste-water	NOT Suspected or Known Present in Waste-water	Suspected or Known Present in the Facility	NOT Suspected or Known Present in the Facility	Unknown Whether Present in the Facility or Wastestream (Will Require Follow-up)
001 Acenaphthene					
002 Acrolein					
003 Acrylonitrile					
004 Benzene					
005 Benzidine					
006 Carbon tetrachloride (tetrachloromethane)					
007 Chlorobenzene					
008 1,2,4-trichlorobenzene					
009 Hexachlorobenzene					
010 1,2-dichloroethane					
011 1,1,1-trichloroethane					
012 Hexachloroethane					
013 1,1-dichloroethane					
014 1,1,2-trichloroethane					
015 1,1,2,2-tetrachloroethane					
016 Chloroethane					
018 Bis(2-chloroethyl) ether					
019 2-chloroethyl vinyl ether (mixed)					
020 2-chloronaphthalene					
021 2,4, 6-trichlorophenol					
022 Parachlorometa cresol					
023 Chloroform (trichloromethane)					
024 2-chlorophenol					
025 1,2-dichlorobenzene					
026 1,3-dichlorobenzene					
027 1,4-dichlorobenzene					
028 3,3-dichlorobenzidine					
029 1,1-dichloroethylene					
030 1,2-trans-dichloroethylene					
031 2,4-dichlorophenol					
032 1,2-dichloropropane					
033 1,2-dichloropropylene (1,3-dichloropropene)					

Chemical Compound	Suspected or Known Present in Waste-water	NOT Suspected or Known Present in Waste-water	Suspected or Known Present in the Facility	NOT Suspected or Known Present in the Facility	Unknown Whether Present in the Facility or Wastestream (Will Require Follow-up)
034 2,4-dimethylphenol	_____	_____	_____	_____	_____
035 2,4-dinitrotoluene	_____	_____	_____	_____	_____
036 2,6-dinitrotoluene	_____	_____	_____	_____	_____
037 1,2-diphenylhydrazine	_____	_____	_____	_____	_____
038 Ethylbenzene	_____	_____	_____	_____	_____
039 Fluoranthene	_____	_____	_____	_____	_____
040 4-chlorophenyl phenyl ether	_____	_____	_____	_____	_____
041 4-bromophenyl phenyl ether	_____	_____	_____	_____	_____
042 Bis(2-chloroisopropyl) ether	_____	_____	_____	_____	_____
043 Bis(2-chloroethoxy) methane	_____	_____	_____	_____	_____
044 Methylene chloride (dichloromethane)	_____	_____	_____	_____	_____
045 Methyl chloride (dichloromethane)	_____	_____	_____	_____	_____
046 Methyl bromide (bromomethane)	_____	_____	_____	_____	_____
047 Bromoform (tribromomethane)	_____	_____	_____	_____	_____
048 Dichlorobromomethane	_____	_____	_____	_____	_____
051 Chlorodibromomethane	_____	_____	_____	_____	_____
052 Hexachlorobutadiene	_____	_____	_____	_____	_____
053 Hexachlorocyclopentadiene	_____	_____	_____	_____	_____
054 Isophorone	_____	_____	_____	_____	_____
055 Naphthalene	_____	_____	_____	_____	_____
056 Nitrobenzene	_____	_____	_____	_____	_____
057 2-nitrophenol	_____	_____	_____	_____	_____
058 4-nitrophenol	_____	_____	_____	_____	_____
059 2,4-dinitrophenol	_____	_____	_____	_____	_____
060 4,6-dinitro-o-cresol	_____	_____	_____	_____	_____
061 N-nitrosodimethylamine	_____	_____	_____	_____	_____
062 N-nitrosodiphenylamine	_____	_____	_____	_____	_____
063 N-nitrosodi-n-propylamine	_____	_____	_____	_____	_____
064 Pentachlorophenol	_____	_____	_____	_____	_____
065 Phenol	_____	_____	_____	_____	_____
066 Bis(2-ethylhexyl) phthalate	_____	_____	_____	_____	_____
067 Butyl benzyl phthalate	_____	_____	_____	_____	_____
068 Di-N-Butyl Phthalate	_____	_____	_____	_____	_____
069 Di-n-octyl phthalate	_____	_____	_____	_____	_____
070 Diethyl Phthalate	_____	_____	_____	_____	_____
071 Dimethyl phthalate	_____	_____	_____	_____	_____
072 1,2-benzanthracene (benzo(a)anthracene)	_____	_____	_____	_____	_____

Chemical Compound	Suspected or Known Present in Waste-water	NOT Suspected or Known Present in Waste-water	Suspected or Known Present in the Facility	NOT Suspected or Known Present in the Facility	Unknown Whether Present in the Facility or Wastestream (Will Require Follow up)
073 Benzo(a)pyrene (3,4-benzo-pyrene)	_____	_____	_____	_____	_____
074 Benzofluoranthene (benzo(b) fluoranthene)	_____	_____	_____	_____	_____
075 benzofluoranthene (benzo(b) fluoranthene)	_____	_____	_____	_____	_____
076 Chrysene	_____	_____	_____	_____	_____
073 Benzo(a)pyrene (3,4-benzo-pyrene)	_____	_____	_____	_____	_____
074 Benzofluoranthene (benzo(b) fluoranthene)	_____	_____	_____	_____	_____
075 benzofluoranthene (benzo(b) fluoranthene)	_____	_____	_____	_____	_____
076 Chrysene	_____	_____	_____	_____	_____
077 Acenaphthylene	_____	_____	_____	_____	_____
078 Anthracene	_____	_____	_____	_____	_____
079 Benzoperylene (benzo(ghi) perylene)	_____	_____	_____	_____	_____
080 Fluorene	_____	_____	_____	_____	_____
081 Phenanthrene	_____	_____	_____	_____	_____
082 Dibenzanthracene (dibenzo(h) anthracene)	_____	_____	_____	_____	_____
083 Indeno (1,2,3-cd) pyrene (2,3-o-pheynylene pyrene)	_____	_____	_____	_____	_____
084 Pyrene	_____	_____	_____	_____	_____
085 Tetrachloroethylene	_____	_____	_____	_____	_____
086 Toluene	_____	_____	_____	_____	_____
087 Trichloroethylene	_____	_____	_____	_____	_____
088 Vinyl chloride (chloroethylene)	_____	_____	_____	_____	_____
089 Aldrin	_____	_____	_____	_____	_____
090 Dieldrin	_____	_____	_____	_____	_____
091 Chlordane (technical mixture and metabolites)	_____	_____	_____	_____	_____
092 4,4-DDT	_____	_____	_____	_____	_____
093 4,4-DDE (p,p-DDX)	_____	_____	_____	_____	_____
094 4,4-DDD (p,p-TDE)	_____	_____	_____	_____	_____
095 Alpha-endosulfan	_____	_____	_____	_____	_____
096 Beta-endosulfan	_____	_____	_____	_____	_____
097 Endosulfan sulfate	_____	_____	_____	_____	_____
098 Endrin	_____	_____	_____	_____	_____
099 Endrin aldehyde	_____	_____	_____	_____	_____
100 Heptachlor	_____	_____	_____	_____	_____

Chemical Compound	Suspected or Known Present in Waste-water	Suspected or Known Present in Waste-water	Suspected or Known Present in the Facility	NOT Suspected or Known Present in the Facility	Unknown Whether Present in the Facility or Wastestream (Will Require Follow up)
101 Heptachlor epoxide (BHC-hexachlorocyclohexane)					
102 Alpha-BHC					
103 Beta-BHC					
104 Gamma-BHC (lindane)					
105 Delta-BHC (PCB-polychlorinated biphenyls)					
103 Beta-BHC					
103 Beta-BHC					
104 Gamma-BHC (lindane)					
105 Delta-BHC (PCB-polychlorinated biphenyls)					
106 PCB-1242 (Arochlor 1242)					
107 PCB-1254 (Arochlor 1254)					
108 PCB-1221 (Arochlor 1221)					
109 PCB-1232 (Arochlor 1232)					
110 PCB-1248 (Arochlor 1248)					
111 PCB-1260 (Arochlor 1260)					
112 PCB-1016 (Arochlor 1016)					
113 Toxaphene					
114 Antimony					
115 Arsenic					
116 Asbestos					
117 Beryllium					
118 Cadmium					
119 Chromium					
120 Copper					
121 Cyanide, Total					
122 Lead					
123 Mercury					
124 Nickel					
125 Selenium					
126 Silver					
127 Thallium					
128 Zinc					
129 2,3,7,8-tetrachloro-dibenzo-p-dioxin (TCDD)					

43. SIGNATURES

- A. PROFESSIONAL ENGINEER (Required if significant pretreatment system design changes and/or significant chemistry changes are proposed.)

I certify that I have prepared this application and that to the best of my knowledge the information herein provided is true, complete and accurate.

Engineering Firm

Engineer's Signature

Engineer's Name (Print or Type)

Professional Engineer's Stamp

Date

- B. APPLICANT/AUTHORIZED AGENT (Required for all applications.)
(Must be Property Owner or Property Owner's Agent)

I certify that I have personally reviewed and am familiar with this application. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

Land Owner or Land Owner's Agent
(Signature)

Business Owner or Business Owner's Agent
(Signature)

Land Owner or Land Owner's Agent
(Print or Type)

Business Owner or Business Owner's Agent
(Print or Type)

Date

Date

Confidentiality: Any claim for confidentiality may be made by stamping the words "Confidential Business Information" on each page containing such information. Information relating to wastewater discharge characteristics shall be available to the public without restriction. Other information shall be available to the extent provided by 40 CFR Section 403.

Application No. _____

**HUDSON INDUSTRIAL PRETREATMENT PROGRAM
NOTIFICATION OF HAZARDOUS WASTE DISCHARGED TO THE PUBLIC SEWER**

Company Name: _____

Address: _____

Contact Person: _____

Title: _____

Telephone Number: _____

Email Address: _____

CHECK ONE:

- No Process water discharged.
- No hazardous wastes discharged in reportable quantities.
- Hazardous wastes discharged already reported.
- The following hazardous wastes are or will be discharged to the public sewer: _____

HAZARDOUS WASTE INFORMATION (use additional sheets if necessary):

NAME OF WASTE: _____

EPA HAZARDOUS WASTE NUMBER: _____

TYPE OF DISCHARGE:

- Continuous Batch Other: _____

HAZARDOUS WASTE INFORMATION:

If more than 100 kilograms of any hazardous waste per calendar month is discharged to the sewer, please include the following items of information for each hazardous waste, to the extent such information is known and readily available.

Name of Constituent	Mass in Wastestream (this month)	Concentration on Wastestream (this month)	Mass in Wastestream (next 12 mos.)

I certify that I have a program in place to reduce the volume and toxicity of hazardous waste generated to a degree I have determined economically practical.

Signature of Company Representative

Date