

COUNTY OF ERIE
INDUSTRIAL WASTE SURVEY/DISCHARGE PERMIT APPLICATION

ECSD #2 - BIG SISTER WATER RESOURCE RECOVERY FACILITY
ECSD #3 - SOUTHTOWNS WATER RESOURCE RECOVERY FACILITY
ECSD #3 - HOLLAND WATER RESOURCE RECOVERY FACILITY
ECSD #6 - LACKAWANNA WATER RESOURCE RECOVERY FACILITY
ECSD #8 - EAST AURORA WATER RESOURCE RECOVERY FACILITY

I GENERAL INFORMATION

A. Standard Industrial Classification Code (S.I.C.) for Primary Activity (If not known, leave blank) _____

B. Company Name _____

C. Address of Premises _____

D. Mailing Address (If different than above) _____

E. Section, Block and Lot Number _____

F. Person to be contacted about this application:

Name: _____ Title: _____

Phone: _____

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

Date: _____ Signature _____

(Owner or Corporate Official)

II PLANT OPERATION CHARACTERISTICS

A. Brief description of manufacturing or service activity on premises:

B. Standard Industrial Classification (S.I.C.) Codes for Principal Products or Services (if S.I.C. Code is not known leave that portion of the answer blank)

<u>Product or Services</u>	<u>S.I.C. Code (4 Digit)</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

C. Is your production Batch _____ Continuous _____

D. Is there a scheduled shutdown? Yes _____ No _____ If yes, when? _____

E. Is production seasonal? Yes _____ No. _____ If yes, explain, indicating month(s) of peak production: _____

F. Total number of employees working on premises: _____

G. Average number of employees per shift: 1st _____ 2nd _____ 3rd _____

H. Shifts normally worked each day:

	<u>Sun.</u>	<u>Mon.</u>	<u>Tues.</u>	<u>Wed.</u>	<u>Thur.</u>	<u>Fri.</u>	<u>Sat.</u>
1 st	_____	_____	_____	_____	_____	_____	_____
2 nd	_____	_____	_____	_____	_____	_____	_____
3 rd	_____	_____	_____	_____	_____	_____	_____

III. WATER USAGE AND DISCHARGE

A. Raw Water Sources

<u>Source</u>	<u>Check Source(s)</u>	<u>Quantity Per Year</u>	<u>Account #</u>
Erie County Water Authority	_____	_____	_____
Well Water	_____	_____	_____
Other	_____	_____	_____

B. Are any liquid wastes other than sanitary waste (i.e., sinks, showers, toilets) discharged from the premises? Yes _____ No. _____
 If the answer is No, proceed to Question III G.
 If the answer is Yes, answer Questions III C, D, E and F.

C. Check water uses in the plant

	<u>Yes</u>	<u>No</u>	<u>Gal/Day</u>
Cooling Water	_____	_____	_____
Boiler Feed	_____	_____	_____
Water Used in Process(es)	_____	_____	_____
Is water contained in the Product	_____	_____	_____
Other _____	_____	_____	_____

D. What other than sanitary waste is discharged from the premises?

<u>Check (X) applicable Items(s)</u>	<u>Discharge to:</u>
_____ Cooling Water	_____
_____ Boiler Blow Down	_____
_____ Water Used in the Process(es)	_____
_____ Other _____	_____

E. Provide a site plan of the premises indicating all points of discharge and label type of discharge. Show where connection is made to sanitary sewers, storm sewer, surface (ditches, creeks, etc.) if known.

F. Is your non-sanitary discharge intermittent _____ or steady _____

G. Is your facility permitted to discharge liquid wastes under a State (S.P.D.E.S.) permit?
 Yes ___ No _____ Permit No. _____

TABLE I
SUBSTANCE OF CONCERN

Class A – Halogenated Hydrocarbons

- A01. Methyl chloride
- A02. Methylene chloride
- A03. Chloroform
- A04. Carbon tetrachloride
- A05. Frenon/Genatron
- A06. Other halomethanes
- A07. 1,1,1-Trichlorethane
- A08. Other haloethanes
- A09. Vinyl fluoride
- A10. Vinyl chloride
- A11. Dichlorethylene
- A12. Trichloroethylene
- A13. Tetrachloroethylene
- A14. Chlorinated propane
- A15. Chlorinated propene
- A16. Hexachlorobutadiene
- A17. Hexachlorocyclopentadiene
- A18. Chlorinated benzene
- A19. Chlorinated toluene
- A20. Fluorinated toluene
- A21. Polychlorinated biphenyl (PCB)
- A22. Chlorinated naphthalene
- A23. Dechloran (C₁₀C₁₂)
- A99. Halogenated hydrocarbons not Specified above

Class B – Halogenated Organics
(Other Than Hydrocarbons)

- B01. Phosgene
- B02. Methyl chloromethyl ether
- B03. Bis-chloromethyl ether
- B04. Other chloroalkyl ethers
- B05. Benzoyl chloride
- B06. Chlorothymol
- B07. Chlorinated phenol
- B08. Chlorinated cresols or xylenols
- B09. Chlorendic acid
- B10. Chloraryl ethers
- B11. Dichlorophene or hexachlorophene
- B12. Chlorinated aniline (including methylene bis (2-chloroaniline))
- B13. Dichlorobenzidine
- B14. Chlorinated diphenyl oxide
- B15. Chlorinated toluidine
- B16. Kepone (C₁₀C₁₀⁰)
- B17. Dichlorovinyl sulfonyl pyridine
- B18. Chloropicrin
- B20. Trichloro-propylsulfonyl pyridine
- B21. Tetrachloro-methylsulfonyl pyridine
- B22. Tetrachloro-isophthalonitrile
- B99. Halogenated organics not specified above

Class C – Pesticides (Including herbicides, algacides, biocides, slimicides and mildewcides)

- C01. Aldrin/Dieldrin
- C02. Chlordane & metabolites
- C03. DDT and metabolites
- C04. Endosulfan/Thiodan and Metabolites
- C05. Endrin and Metabolites
- C06. Heptachlor and Metabolites
- C07. Malathion
- C08. Methoxychlor
- C09. Parathion
- C10. Toxaphene
- C11. Sevin
- C12. Kelthane
- C13. Diazinon
- C15. Carbaryl
- C16. Silvex
- C17. Dithiocarbamates
- C18. Maneb
- C19. Dioxathion
- C20. Tandex/Karutilate
- C21. Carbofurans
- C22. Pentac
- C23. Folpet
- C24. Dichlone
- C25. Rotenone
- C26. Lindane/Isotox
- C27. Simazine
- C28. Methoprene
- C99. Pesticides not specified above

Class D – Aromatic Hydrocarbons

- D01. Benzene
- D02. Toluene
- D03. Xylene
- D04. Biphenyl
- D05. Naphthalene
- D06. Ethylbenzene
- D07. Styrene
- D08. Acenaphthene
- D09. Fluoranthene
- D99. Aromatic hydrocarbons not specified above

Class E – Tars

- E01. Coal tar
- E02. Petroleum tar

Class M – Metals and Their Compounds

- | | | | |
|----------------|---------------|---------------|---------------------------|
| M01. Antimony | M05. Chromium | M09. Nickel | M13. Zinc |
| M02. Arsenic | M06. Copper | M10. Selenium | M14. Boron |
| M03. Beryllium | M07. Lead | M11. Silver | M15. Manganese |
| M04. Cadmium | M08. Mercury | M12. Thallium | M99. Metals not specified |

Class F – Substituted Aromatic (other than hydrocarbons and nonhalogenated)

- F01. Phenol, cresol, or xylenol
- F02. Catechol, resorcinol, or hydroquinone
- F03. Nitrophenols
- F04. Nitrobenzenes
- F05. Nitrotoluenes
- F06. Aniline
- F07. Toluidines
- F08. Nitroanilines
- F09. Nitroanisole
- F10. Toluene disorionate
- F11. Dimethylaminoazobenzene
- F12. Benzoic Acid (and Benzoate salts)
- F13. Phthalic, isophthalic or terephthalic acid
- F14. Phthalic anhydride
- F15. Phthalate Esters
- F16. Phenoxyacetic acid
- F17. Phenylphenols
- F18. Nitrobiphenyls
- F19. Aminobiphenyls
- F20. Diphenylhydrazine
- F21. Naphthylamines
- F22. Carbazole
- F23. Acetylaminofluorene
- F24. Dyes and organic pigments
- F25. Pyridine
- F99. Substituted aromatics not specified above

Class G - Miscellaneous

- G01. Asbestos
- G02. Acrolein
- G03. Acrylonitrile
- G04. Isophorone
- G05. Nitrosamines
- G06. Ethyleneimine
- G07. Propiolactone
- G08. Nitrosodimethylamine
- G09. Dimethyl hydrazine
- G10. Maleic anhydride
- G11. Methyl isocyanate
- G12. Epoxides
- G13. Nitrofurans
- G14. Cyanide

B. If you use chemical of unknown composition, list trade name or other identification, name of supplier and complete information.

Name of Substance	Class	Average Annual Usage	Amount Now on Hand	Supplier	Purpose of Use (State whether produced, reacted, blended, package, distributed, no longer used, etc.)

V. MISCELLANEOUS OPERATIONAL DATA

- A. Is this facility subject to Categorical Pretreatment Standard? (Leave blank if you do not know).
 Yes ___ No ___
- B. Does your facility pretreat any wastewater prior to discharge to a sanitary sewer?
 Yes ___ No ___
- C. Is there a Hazardous Waste Management Plan in effect for this plant?
 Yes ___ No ___
- D. Is there a Spill Prevention Control and Countermeasure Plan in effect for this plant?
 Yes ___ No ___
- E. Do you generate any liquid or solid waste such as solvents, electroplating sludges, thinners, oils, still bottoms, fly ash, filler, etc.
 Yes ___ No ___

If yes, please fill out the following table.

Type of Waste	If this Waste is Produced by Pre-Treatment Check Here	Amount per Year (Specify lbs, tons, or gals)	Method of Disposal (Check one and Describe Below)				
			On-site	Municipal Landfill	Hazardous Waste Hauler	Reclaimed or Reused	Other

F. Hazardous Waste Hauler – Please give name and address _____

G. Reclaimed or Reused – Please describe process, if on-site, or give name and address of reclaimer _____

H. Do you store any hazardous wastes on-site? Yes _____ No _____

- I. Have you filed on EPA Form 8700-12 (Notification of Hazardous Waste Activity)?
Yes _____ No _____
If yes, please attach.
- J. What is your Hazardous Waste Number? _____

MAS:mas

9/2011

11/2017

V:\Sewerage Management\FORMS\Pretreatment\Industrial Waste Survey.docx