BUFFALO SEWER AUTHORITY
B.P.D.E.S. DISCHARGE PERMIT APPLICATION

FOR BSA USE ONLY
DATE APPLICATION REC'D:_____
INDUSTRIAL NUMBER:_____
INVESTIGATOR:_____

PART A - GENERAL INFORMATION

A1. Applicant Business Name_____

A2. Address of premises discharging wastewater:

_____
Street City State Zip

A3a. Business Address (if different than above):

_____
Street City State Zip

b. Mailing Address (if different than above):

_____
Street City State Zip

A4. Chief Business Official:

Name: _____Title:_____

A5. Facility Representative:

Name:_____Title:_____ Phone:_____

Fax:_____ Cell Phone:_____

E-mail address_____

A6. Person to be contacted about this application, if different from above:

Name:_____ Title:_____ Phone:_____

A7. Person to be contacted in case of emergency, if different from above:

Name:_____Day Phone:_____ Night Phone:_____

A8. Confidentiality:
Please indicate those sections of this questionnaire that you wish to remain confidential and your basis for requesting confidentiality.

_____

_____

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 believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information.

_____ _____
Date Signature of Official (Seal if Applicable)

PART B - BUSINESS DESCRIPTION

PURPOSE The business description is primarily used to determine the substances which may enter into the wastewater discharge from the business activity.

B1. Brief Description:_____

_____

_____

B2. Business Activity: North American Industry Classification System (NAICS) Codes for Principal Products or Services:

Activity	NAICS Code (5-6 Digits)	Production (Monthly Avg.)*
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B3. Is there a scheduled shutdown? Yes_____ No____ If yes, when?_____

B4. Is production seasonal? Yes___ No___ If yes, explain, indicating month(s) of peak production:

_____

_____

B5. Average number of employees per shift: 1st _____ 2nd _____ 3rd _____

Shift start times: 1st _____ 2nd _____ 3rd _____

Shift end times: 1st _____ 2nd _____ 3rd _____

Shifts normally worked each day:

	Sun.	Mon.	Tue.	Wed.	Thu.	Fri.	Sat.
1st	_____	_____	_____	_____	_____	_____	_____
2nd	_____	_____	_____	_____	_____	_____	_____
3rd	_____	_____	_____	_____	_____	_____	_____

* Monthly average stated shall be the highest monthly average production in the previous three years.

PART C - WATER SOURCE AND USE

PURPOSE - The Water Source and Use information will enable BSA to determine the Volumes and Sources of wastewater discharged to the BSA sewer.

WATER/WASTEWATER DATA

C1. Water Sources	Average Volume (Gallons per Day)	Peak Flow & Estimated Duration (Gallons per Minute & Time)
Municipal System		
Recycled		
Private Wells		
Other (Specify)_____		
Water Account No.(s)		

C2. Water Usage	Average Volume (Gallons per Day)	Peak Flow & Estimated Duration (Gallons per Minute & Time)
Cooling Water		
Boiler Makeup		
Process Water		
Sanitary Purposes		
Other (Specify) _____		

C3. Waste Water Discharge	Average Discharge (Gallons per Day)	Peak Discharge & Estimated Duration (Gallons per Minute & Time)
Municipal Sewer/Sanitary		
- Process		
- Sanitary:		
- Cooling		

Non-Sewered Discharges

- Natural Receiving Water _____
- Storm Drain _____
- Waste Hauler _____
- Evaporation _____
- Contained in Product _____
- Recycled _____
- Other (Specify) _____ _____

C4. Is your facility permitted to discharge liquid wastes under a State (S.P.D.E.S.) Permit?

Yes _____ No _____ Permit No. _____

C5. Does your facility have a wastewater discharge from any air pollution control equipment?

Yes _____ No _____ If so what discharge point _____

PART D - SUBSTANCES OF CONCERN
(REFER TO ATTACHED TABLE I)

Complete all information for those substances your facility has used, produced, stored, distributed, listed under the TRI report or otherwise disposed of since last application. Do not include chemicals used only in analytical laboratory work. Enter the name and code from Table I. If facility uses a substance in any of the Classes A-M which is not specified in the list, enter it as code class plus 99, e.g. B99 with name, usage, etc.

NAME OF SUBSTANCE	CLASS	AVERAGE ANNUAL USAGE	AMOUNT NOW ON HAND	PURPOSE OF USE (STATE WHETHER PRODUCED, REACTED BLENDED PACKAGED, DISTRIBUTED, NO LONGER USED)

TABLE 1 - SUBSTANCES OF CONCERN

CLASS A - HALOGENATED HYDROCARBONS AROMATICS

A01. Methyl chloride
A02. Methylene chloride
A03. Chloroform
A04. Carbon tetrachloride
A05. Freon/Genatron
A06. Other halomethanes
A07. 1, 1, 1-Trichlorethane
A08. Other haleothanes
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. Dechlorane ($C_{10}C1_{12}$)

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
B17. Dichlorovinyl sulfonyl pyridine
B18. Chloropicrin
B20. Tricloro-propylsulfonyl pyridine
B21. Tetrachloro-methylsulfonyl pyridine
B22. Tetrachloro-isophthalonitrile

B99. Halogenated organics not specified above

CLASS C - PESTICIDES (including herbicides algaecides, biocides, slimicides and mildewcides)

C01. Aldrin/Dieldrin
C02. Chlordane and 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/Karbutilate
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. Fluranthene
D99. Aromatic hydrocarbons not specified above

CLASS E - TARS

E01. Coal tar
E02. Petroleum tar

CLASS G - MISCELLANEOUS

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

CLASS F – SUBSTITUTE

(other than hydrocarbons and non-halogenated)

F01. Phenol, cresol, or xylenol
F02. Catechol, resorcinol, or hydroqinone
F03. Nitrophenols
F04. Nitrobenzenes
F05. Nitrotoluenes
F06. Aniline
F07. Toluidines
F08. Nitroanilines
F09. Nitroanisole
F10. Toluene diisocyanate
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 (including benzidine)
F20. Diphenylhydrazine
F21. Naphthylamines
F22. Carbazole
F23. Acetylaminofluorene
F24. Dyes and organic pigments
F25. Pyridine
F99. Substituted aromatics not specified above

CLASS M - METALS AND THEIR COMPOUNDS

M01. Anthimony
M02. Arsenic
M03. Beryllium
M04. Cadmium
M05. Chromium
M06. Copper
M07. Lead
M08. Mercury
M09. Nickel
M10. Selenium
M11. Silver
M12. Thallium
M13. Zinc
M14. Boron
M15. Manganese
M18. Titanium
M21. Tungster
M22. Gold
M83. Pladium
M84. Platinum
M99. Metals not specified

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

NAME	AVERAGE ANNUAL USAGE	AMOUNT NOW ON HAND	SUPPLIER	PURPOSE OF USE (STATE WHETHER PRODUCED, REACTED, BLENDED, PACKAGED, DISTRUBUTED, NO LONGER USED)

Are you presently permitted to discharge radiological waste by the N.Y.S.D.E.C.? Yes ____ No ____

PART E - MISCELLANEOUS

E1. Do you have automatic sampling equipment or continuous wastewater flow metering equipment currently in use or included in future plans?

Current: Flow Metering Yes ____ No ____ Sampling Equipment Yes ____ No ____
Planned: Flow Metering Yes ____ No ____ Sampling Equipment Yes ____ No ____

E2. Does your facility pretreat any wastewater prior to discharge to a sanitary sewer? Yes ____ No ____

If so, please show locations of pretreatment processes on attached schematic process diagram (Part F) and describe below:

_____

_____

_____

E3. Do you have a Spill Prevention, Containment and Control Plan (SPCC) and/or Slug Discharge Control Plan for your plant? Yes ____ No ____

E4. Do you have a Solvent Management Plan or a Toxic Organic Management Plan? Yes ____ No ____

E5. 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 PRETREATMENT CHECK HERE	AMOUNT PER YEAR (SPECIFY LBS, TONS OR GALS)	METHOD OF DISPOSAL CHECK EACH METHOD USED				
			ON-SITE	SANITARY LANDFILL	HAZARDOUS WASTE FACILITY	RECLAIMED OR RESUED	OTHER

E6. Description of Disposal Method:

a. Disposal Site

_____

b. Hazardous Waste Hauler - Please give name and address _____

_____

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

_____

_____

d. Other - Please describe _____

_____

E7. Do you store any hazardous wastes on-site? Yes ____ No ____

E8. Have you filed an EPA Form 8700-12 (Notification of Hazardous Waste Activity)? Yes ____ No ____
If yes, please attach.

E9. What is your Hazardous Waste Number?_____

E10. Do you discharge into the Buffalo Sewer Authority a waste identified by 40 CFR 261 as hazardous waste?
Yes ____ No ____

E11. If your facility is discharging a hazardous waste, have you properly notified the Buffalo Sewer Authority?
Yes _____ No _____

PART F - SCHEMATIC FLOW DIAGRAM

PURPOSE - The Schematic Flow Diagram shows the flow pattern of products through the facility and the various sources of wastewater.

F1. Schematic Flow Diagram - For each major activity in which wastewater is generated, draw a diagram of the flow of materials and water from start to completed project, showing all unit processes generating wastewater. Number each unit process having wastewater discharges to the community sewer.

F2. General Instructions - Type or print the information. A line drawing (schematic flow diagram) of each major business activity described in Part B is to be drawn in on an attached sheet of paper (all sheets should be letter size). An example of drawing required is shown in Figure 1. To determine your average daily volume and maximum daily volume of wastewater flow you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measurable.

FILE:L/WPDOCS/APPLICATIONS/BPDESPERMITAPPLICAITON.DOC

REVISED 3/19/93, 8/30/94, 12/1/94,10/7/96, 10/25/98, 5/1/05

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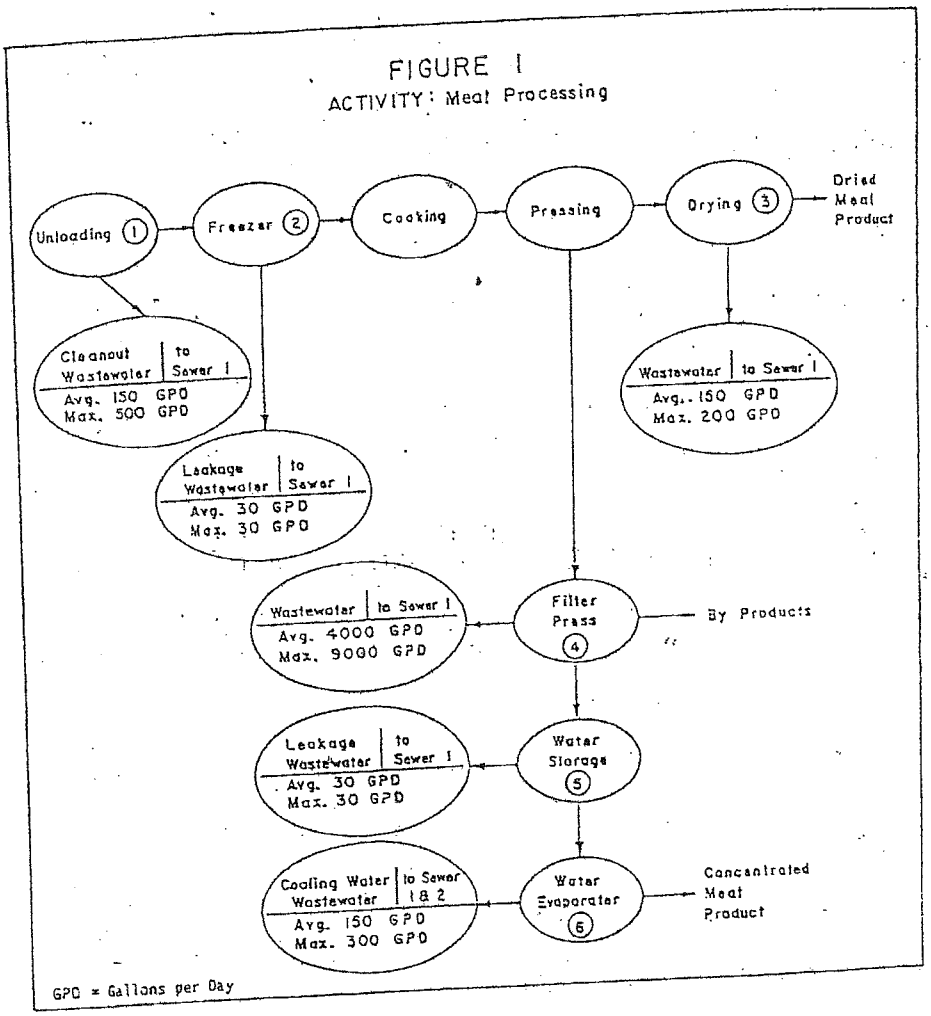
FIGURE 1

ACTIVITY: Meat Processing



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PART G - BUILDING LAYOUT

PURPOSE - The building layout shows the wastewater generating operations which contribute to each side sewer.

INSTRUCTIONS FOR COMPLETING PART G : General Instructions - Type or print the information.

Building Layout - A building layout or plant site plan of the premise is required to complete Part G. An arrow showing north as well as the map scale must be shown. The location of each existing and proposed sampling manhole and side sewer must be clearly identified, including distances as well as all sanitary and wastewater drainage plumbing. Number each unit process discharging wastewater to the community sewer. Use the same numbering system shown in Part F (Schematic Flow Diagram). An example of the drawing required is shown below in Figure 2.

FIGURE 2
ANYBODY'S MEAT CO.
(SCALE: 1" = 100')