

Permit Fee: \$ \_\_\_\_\_

Participant \_\_\_\_\_  
BOD \_\_\_\_\_ TSS \_\_\_\_\_  
User Charge \_\_\_\_\_  
SIC \_\_\_\_\_  
Key Map \_\_\_\_\_

## City of Sealy Application For Industrial Waste Permit

**Please Print in Ink or Type:**

(1) Name of Company: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Company Owner / Chief Executive: \_\_\_\_\_  
Name of Person Filing Application: \_\_\_\_\_  
Title: \_\_\_\_\_ Phone: \_\_\_\_\_

(2) Company Product / Service: \_\_\_\_\_  
Shifts: \_\_\_\_\_ Hours: \_\_\_\_\_ Days/Week: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

(3) Water Account #'s: \_\_\_\_\_  
Water Source: District \_\_\_\_\_ Private Well \_\_\_\_\_  
Metered/ Unmetered \_\_\_\_\_  
Sewer Discharge Meter: Yes \_\_\_\_\_ No \_\_\_\_\_ (Check One)  
Name on Water/Sewer Bill: \_\_\_\_\_

(4) Number of connections to sanitary sewer: \_\_\_\_\_

(5) Do you firm use any of the following to pretreat a wastewater discharge?  
Grease Trap (Volume) \_\_\_\_\_ Gallons  
Mud Trap (Volume) \_\_\_\_\_ Gallons  
Waste Oil Tank ( Volume) \_\_\_\_\_ Gallons  
Silver Recovery Unit \_\_\_\_\_ Gallons  
Other \_\_\_\_\_

List Name and address of hauling company used to dispose of waste collected (Attach additional sheet (s) if needed). \_\_\_\_\_

(6) List below any environmental control wastewater discharge permits held by or for the facility.  
\_\_\_\_\_  
\_\_\_\_\_

(7) Provide a brief description of the nature, average rate of production, and standard industrial classifications of the operations carried out at this facility by the proposed industrial user. This description should include a schematic process diagram which indicates points of discharge to the POTW from the industrial process with both the time and durations of discharges.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(8) Provide complete information showing the measured average daily and maximum daily flow, in gallons per day, to POTW from process streams and other waste streams as necessary, to allow use of the combined wastewater formula set out in 40 CFR 403.6 (e).

---

---

(9) Identify the categorical pretreatment standards applicable to each process, if any.

---

---

(10) Characteristics of a representative composite sample of the wastewater discharge during representative operating hours: \_\_\_\_\_

(11) Attach a statement reviewed by the user's authorized representative and certified by a qualified professional engineer, indicating whether all treatment standards are being met on a consistent basis – and, if not, what additions are necessary to meet all treatment requirements.

(12) If additional treatment and/or O&M will be required to meet the treatment standards, provide a compliance time schedule. The compliance schedule must meet the requirements set out in Section 4.6 of the City of Sealy Industrial Waste Ordinance.

(13) Prepare and submit an "Accidental Discharge/Slug Control Plan".

(14) Provide a list of all raw materials and chemicals used or stored at the facility which are, or could accidentally or intentionally be, discharged to the POTW.

(15) List the type and amount of raw materials processed (average and maximum per day).

PARAMETER	mg/l	METHOD OF ANALYSIS	LIMIT OF DETECTABILITY
(a) 5-day BOD @ 20 C			
(b) Total Suspended Solids			
(c) pH			
(d) Grease and Oil Content			
(e) Temperature			
(f) COD			
(g) Cyanide			
(h) Arsenic			
(i) Barium			
(j) Boron			
(k) Cadmium			
(l) Chromium – Total			
(m) Copper			
(n) Lead			
(o) Manganese			
(p) Mercury			
(q) Nickel			
(r) Selenium			
(s) Silver			
(t) Zinc			
(u) Total Phenols			
(v) PCB's			

**CERTIFICATION:**

**I hereby certify that the analysis results indicated in Item No. 10, above, have been made under my direction and that it is a true and correct analysis:**

By: \_\_\_\_\_  
 Firm: \_\_\_\_\_

The State of Texas) ( \_\_\_\_\_  
 County of Austin ) ( \_\_\_\_\_

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing certification, and acknowledged to me that the information contained therein is true and correct.

Given under my hand and seal of office, this is the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
 Notary Public

Applicant (Company Name) : \_\_\_\_\_

Date: \_\_\_\_\_

By (Company representative): \_\_\_\_\_

**CERTIFICATION OF APPLICATION**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

The State of Texas) ( \_\_\_\_\_  
County of Austin ) ( \_\_\_\_\_

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_,  
\_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing certifications,  
and acknowledged to me that the information contained therein is true and correct.

Given under my hand and seal of office, this is the \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Applicant (Company Name)

\_\_\_\_\_  
By (Company Representative)