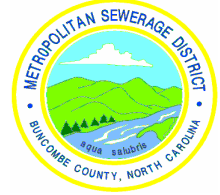


**INDUSTRIAL-COMMERCIAL USER APPLICATION  
FOR  
PERMIT TO DISCHARGE  
AND  
WASTEWATER SURVEY**

**MSD**



**MSD USE ONLY**

Metropolitan Sewerage District of Buncombe County, North Carolina  
Industrial & Commercial Waste Division  
2028 Riverside Drive  
Asheville, North Carolina 28804  
Telephone (828) 254-9646  
Telecopier (828) 232-5546

<b>ISSUED:</b>		<b>20</b>
<b>RECEIVED:</b>		<b>20</b>
<b>REVIEWED:</b>		<b>20</b>
<b>RETURNED FOR COMMENT:</b>		<b>20</b>

Pursuant to the Sewer Use Ordinance of the Metropolitan Sewerage District of Buncombe County, North Carolina (MSD), all persons who are users or may become users of the sewerage systems are subject to regulation. Some of the objectives of our Ordinance and this wastewater survey/and application are:

- To prevent the introduction of pollutants into the Sewerage System which will interfere with the operation of the Sewerage System or contaminate the resulting sludge generated;
- To prevent the introduction of pollutants into the Sewerage System which will pass through the system, inadequately treated, into any waters of the State or otherwise be incompatible with the Sewerage System;
- To promote reuse and recycling of industrial wastewater and sludges from the Sewerage System; and
- To provide for the regulation of direct and indirect contributors to the Sewerage System, through the issuance of permits to certain nondomestic Users and through enforcement of general requirements for the other Users; authorizes monitoring and enforcement activities, requires User reporting and provides for the setting of fees for the equitable distribution of costs.

1. **COMPANY BUSINESS NAME:** \_\_\_\_\_

Site Location: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

City: \_\_\_\_\_ State: NC Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

2. **CHIEF EXECUTIVE OFFICER**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. **PERSON ON SITE (Authorized to Represent this Firm in Official Dealings with the MSD)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

4. **TYPE OF APPLICATION & WASTEWATER SURVEY**
- Renewal for existing facility
  - Revision for change in discharge or facilities modification
  - New facility (Anticipated date of discharge commencement: \_\_\_\_\_)
  - Change in ownership

**5. GENERAL INSTRUCTIONS**

- a. All terms used herein are as defined in the Sewer Use Ordinance of MSD.
- b. **All persons receiving an Application form are to answer Questions 1 through 12., 13., 15, and 16.**
- c. **If water is used in such manner as to produce possible industrial or commercial wastes as indicated by positive answers to any of the Questions 10. a) 4., through 10. a) 8., you are required to furnish additional information by answering Questions 12. And 14.**
- d. Where industrial or commercial wastes are discharged, a Permit to Discharge Waste will be issued to the User (or rejected) subject to the requirements of the Sewer Use Ordinance of MSD and any special requirements as contained in the Permit to Discharge Waste.
- e. The User may, if so desired, assert a business confidentiality claim covering all or part of the information in this Application in accordance with provisions of Section 12 of the Sewer Use Ordinance of MSD. To file such a claim, contact the General-Manager of MSD for further details.
- f. Submit the completed Application/Survey and attachments to:

General Manager  
Metropolitan Sewerage District of Buncombe County  
2018 Riverside Drive  
Asheville, North Carolina 28804

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**6. GENERAL PERMIT CONDITIONS**

- a. A Permit issued in response to this Application/Survey is subject to all applicable provisions of the Sewer Use Ordinance of MSD, NPDES No. NC0024911 for the operation of the Metropolitan Wastewater Treatment Plant by MSD and all applicable State and Federal Regulations.
- b. A Permit issued in response to this Application/Survey is required for construction and operation of any industrial or commercial wastewater pretreatment facilities and/or continued operation of existing wastewater pretreatment facilities.
- c. This Application/Survey, a Permit issued in response to this Application/Survey and all reports or information submitted pursuant to the requirements of such Permit must be signed and certified by an authorized representative of the User.
- d. The provisions of a Permit issued in response to this Application/Survey are severable and, if any provision of such Permit or the Application/Survey of any provision of such Permit to any circumstances is held invalid, the Application/Survey of such provision to other circumstances and the remainder of such Permit shall not be affected thereby.
- e. It is the responsibility of each Industrial or Commercial User to insure that all sludges generated by the User of a Permit issued in response to this Application/Survey, are managed under applicable sludge management requirements specified in all applicable State and Federal regulations.
- f. Notice is hereby given that any and all significant violations of provisions of the Sewer Use Ordinance of MSD by the User of a Permit issued in response to this Application/Survey or any other Users of the MSD Sewerage System and a list of resulting enforcement actions taken by MSD will be published each year in the local newspaper. For the purpose of this Section, a “significant violation” shall be as defined in Subsection 1.03.68 of the Sewer Use Ordinance of MSD.

**7. INDUSTRIAL CATEGORY**

If your facility employs processes in any of the industrial categories or business activities listed below, place a check beside the category or business activity. (Check all that apply.)

a. Industrial Categories

- |  |  |
|--|--|
| (1) <input type="checkbox"/> Aluminum Forming                  | (27) <input type="checkbox"/> Metal Finishing  |
| (2) <input type="checkbox"/> Asphalt Manufacturing             | (28) <input type="checkbox"/> Metal Molding and Casting                                  |
| (3) <input type="checkbox"/> Battery Manufacturing             | (29) <input type="checkbox"/> Mineral and Ore Processing                                 |
| (4) <input type="checkbox"/> Beverage Bottling                 | (30) <input type="checkbox"/> Nonferrous Metal, Form & Powders                           |
| (5) <input type="checkbox"/> Canning Foods                     | (31) <input type="checkbox"/> Nonferrous Metals Manufacturing                            |
| (6) <input type="checkbox"/> Carbon Black Manufacturing        | (32) <input type="checkbox"/> OCPSF, Organic Chemicals, Plastics, & Synthetic Fiber Mfg. |
| (7) <input type="checkbox"/> Cement Manufacturing              | (33) <input type="checkbox"/> Oil & Gas Extraction                                       |
| (8) <input type="checkbox"/> Coil Coating                      | (34) <input type="checkbox"/> Paint Formulating  |
| (9) <input type="checkbox"/> Copper Forming                    | (35) <input type="checkbox"/> Roofing Materials Manufacturing                            |
| (10) <input type="checkbox"/> Dairy Products Processing        | (36) <input type="checkbox"/> Pesticide Manufacturing                                    |
| (11) <input type="checkbox"/> Electronic Components Mfg.       | (37) <input type="checkbox"/> Petroleum Refining   |
| (12) <input type="checkbox"/> Electroplating                   | (38) <input type="checkbox"/> Pharmaceutical Manufacturing                               |
| (13) <input type="checkbox"/> Explosives Manufacturing         | (39) <input type="checkbox"/> Phosphate Manufacturing                                    |
| (14) <input type="checkbox"/> Feedlots                         | (40) <input type="checkbox"/> Photographic Developing                                    |
| (15) <input type="checkbox"/> Ferro Alloy Manufacturing        | (41) <input type="checkbox"/> Plastic Injection Molding and Forming                      |
| (16) <input type="checkbox"/> Fertilizer Manufacturing         | (42) <input type="checkbox"/> Porcelain Enameling  |
| (17) <input type="checkbox"/> Foundries: Metal Mold & Casting  | (43) <input type="checkbox"/> Printing and Publishing                                    |
| (18) <input type="checkbox"/> Glass Manufacturing              | (44) <input type="checkbox"/> Rendering  |
| (19) <input type="checkbox"/> Grain Mills                      | (45) <input type="checkbox"/> Rubber Manufacturing                                       |
| (20) <input type="checkbox"/> Gum & Wood Chemicals Mfg.        | (46) <input type="checkbox"/> Soap & Detergent Manufacturing                             |
| (21) <input type="checkbox"/> Ink Formulating                  | (47) <input type="checkbox"/> Textile Mills  |
| (22) <input type="checkbox"/> Inorganic Chemical Manufacturing | (48) <input type="checkbox"/> Timber products processing                                 |
| (23) <input type="checkbox"/> Laundry                          | (49) <input type="checkbox"/> <b>Service</b>   |
| (24) <input type="checkbox"/> Leather Tanning & Finishing      | (50) <input type="checkbox"/> <b>Other</b>   |
| (25) <input type="checkbox"/> Meat Processing                  |  |
| (26) <input type="checkbox"/> Medical Care Operations          |  |

c. Provide a brief narrative description of the manufacturing, production or service activities your firm performs.

Number	Description of Activities



**9. SPECIFIC USES OF WATER IN THE FACILITY**

a) Identify the Uses of Incoming Water (Gallons Per Day, GPD)

Use	Amount (GPD)	Metered	Estimated
1. Domestic (Restrooms)		<input type="checkbox"/>	<input type="checkbox"/>
2. Boiler make-up		<input type="checkbox"/>	<input type="checkbox"/>
3. Cooling Water, Non-contact		<input type="checkbox"/>	<input type="checkbox"/>
4. Cooling Water, Contact		<input type="checkbox"/>	<input type="checkbox"/>
5. Processing Product		<input type="checkbox"/>	<input type="checkbox"/>
6. Washdown of Plant and/or Equipment		<input type="checkbox"/>	<input type="checkbox"/>
7. Air Pollution Control Unit		<input type="checkbox"/>	<input type="checkbox"/>
8. Other (specify)		<input type="checkbox"/>	<input type="checkbox"/>
<b>9. Total (1) through (8)</b>			

**10. BUSINESS HOURS AND NUMBER OF EMPLOYEES**

a. Days per week that the facility is open for operations: \_\_\_\_\_

b. Number of Employees: \_\_\_\_\_

	1 <sup>st</sup> Shift		2 <sup>nd</sup> Shift		3 <sup>rd</sup> Shift	
Number of Hours						
Average # of Employees						
Start Time						

**11. FUTURE PROCESS CHANGES OR EXPANSIONS**

a. Are any process changes or expansions planned during the next 5 years, which would alter wastewater volumes or characteristics?

Yes

No

1) If yes, briefly describe these changes and their effects on the wastewater volume and characteristics: (Attach additional sheets if needed)

**12. PROCESS WASTES**

a. Are any liquid wastes, by-products, material residues or sludges from this facility disposed of by a means other than discharging to the MSD sewer lines?

Yes (If "yes", complete items 13. b., c., d. and e.)

No (If "no", skip remainder of Section 14.)

b. These wastes may best be described as:

Generated Wastes	Description	Estimated Gallons or Pounds Per Year Generated
Acids		
Alkalies		
Heavy Metal Sludges		
Inks/Dyes		
Oil and/or Grease		
Organic Compounds		
Paints		
Pesticides		
Settleable Residues		
Solvents		
Other Hazardous Wastes		
By-Products		
Other Wastes		

c. For the above checked wastes, does your company practice?

**Storage**

On-site

Off-site

**Disposal**

On-site

Off-site

**13. PROCESS WASTES (Continued)**

d. Briefly describe the method(s) of storage or disposal checked above. Indicate whether landfill, incineration, resource recovery, contract hauling or RCRA regulated practices. Identify contract parties or facilities involved.

**14. PRETREATMENT**

Is any water utilized at the facility pretreated before it is discharged to the MSD sewer lines? (*Possible water uses requiring pretreatment are: contaminated cooling water, water used for processing product, equipment facility washdown, air pollution control unit*)

- Yes (If "Yes", please complete this section, Section 14.a) and 15.)
- No (If "No", skip this section, Section 15.)

a) Indicate all pretreatment devices or processes used for treating wastewater or sludge. (Check all that are utilized.)

- |   |   |
|---|---|
| <input type="checkbox"/> Activated carbon                     | <input type="checkbox"/> Ion Exchange         |
| <input type="checkbox"/> Air stripping                        | <input type="checkbox"/> Microfiltration      |
| <input type="checkbox"/> Centrifuge/ Cyclone Separation       | <input type="checkbox"/> Nanofiltration       |
| <input type="checkbox"/> Chemical Precipitation               | <input type="checkbox"/> Ozonation            |
| <input type="checkbox"/> Chlorination                         | <input type="checkbox"/> pH Neutralization    |
| <input type="checkbox"/> Cyanide Destruction                  | <input type="checkbox"/> Reverse Osmosis      |
| <input type="checkbox"/> Dissolved Air Floatation             | <input type="checkbox"/> Screening            |
| <input type="checkbox"/> Filtration                           | <input type="checkbox"/> Septic Tank          |
| <input type="checkbox"/> Flocculation                         | <input type="checkbox"/> Silver Recovery      |
| <input type="checkbox"/> Flow Equalization                    | <input type="checkbox"/> Solvent Separation   |
| <input type="checkbox"/> Grease or Oil Separation (Petroleum) | <input type="checkbox"/> Biological Treatment |
| <input type="checkbox"/> Grease Trap (Animal/Vegetable)       | <input type="checkbox"/> Ultrafiltration      |
| <input type="checkbox"/> Grit Sedimentation                   | <input type="checkbox"/> Other *              |

\* specify: \_\_\_\_\_

**15. MONITORING**

a. Sewer connection and discharge information:

(1) Is there an existing sump(s) or manhole(s) on the premises where wastes (industrial waste other than sanitary waste) can be sampled and flow measured?

- Yes
- No

**16. EXECUTION OF APPLICATION**

Company Name: \_\_\_\_\_  
Authorized Signature: \* \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

\* *Authorized signature must correspond to Item 2 or 3 from Page 1 of this Application.*