



**WASTEWATER DISCHARGE PERMIT APPLICATION
GENERAL**

PART A – BASIC INFORMATION

A1. Business Discharging Wastewater _____

Street Address _____

City _____ State _____ Zip _____

Business Phone # _____ Business Fax # _____

Business Emergency # _____

A2. Business Mailing Contact _____

Mailing Address _____

City _____ State _____ Zip _____

A3. Owner/ Responsible Party _____

Title _____

Office Phone # _____ Mobile Phone # _____

Email Address _____

A4. On Site Contact Person _____

Title _____

Office Phone # _____ Mobile Phone # _____

Email Address _____

PART B - BUSINESS DESCRIPTION

B1. Type of Business: Service Wholesale Manufacturing Retail

B2. a. Business License # _____

b. EPA Generator ID # _____

d. Sewer/Water Account # _____ **Water Meter #** _____

Shared With Other Business? _____

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SEBASTOPOLE
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B3. Products Produced or Services Rendered: _____

B4. Federal SIC Number: _____

B5. Hours of Operation: _____

B6. Water Use / Disposition:

| Water Used For: | Supply from: City | Supply from: Well | Discharged to: Sewer | Discharged to: Other | Discharged to: Septic |
|---------------------------|------------------------------|------------------------------|---------------------------------|---------------------------------|----------------------------------|
| Sanitary Processes | | | | | |
| Boiler | | | | | |
| Cooling | | | | | |
| Washing | | | | | |
| Irrigation | | | | | |
| Other | | | | | |

B7. Wastewater Pretreatment: Check the type of treatment, if any, given wastewater from this building sewer before it is discharged to the community sewer

- None
 Grease Removal Device
 Sedimentation
 Holding Tank
 Screening
 Oil/Water Separator
 pH Adjustment
 Chlorination
 Biological Treatment
 Other (explain): _____

PART C - BUILDING LAYOUT

BUILDING LAYOUT REQUIRED FOR ALL NEW BUSINESSES OR TENNANT IMPROVEMENTS

Draw to scale the location of each building on the premises. Show the location of all water meters, storm drains, pretreatment facilities, grease traps, interceptors and each building sewer connected to the community sewers. Number each building sewer and show possible sample locations. Plumbing plans with equipment locations indicated are acceptable.

This document and any 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.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Responsible Person

Date

Print Name

Title

This document must be signed by the most responsible person of the organization applying for the discharge permit. This includes the owner, president, corporate officer, or any other representative of the organization in a decision-making capacity. The person signing this document is legally responsible for all information contained herein, and becomes liable for any and all future enforcement actions.

Submit To:
City of Santa Rosa
Environmental Compliance Section
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Phone: (707) 543-3369
Fax: (707) 543-3398
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