

General Information

(applies to all licenses)

A. Type of Operation:

- 1. **Type of Industry:** _____
- 2. **Raw Materials and Chemicals used:** _____

- 3. **Production Rate of Finished Product:** _____
Normal (tons or lbs/day) _____
Peak (tons or lbs/day) _____
- 4. **Normal Operation (hrs/day, days/wk)** _____
- 5. **If operation is seasonal, explain** _____

B. Is there any non-domestic discharge to ground or surface water? Yes [] No []

C. Do you use a septic tank? Yes [] No []

D. Are there storage tanks at this facility? Yes [] No []
If yes, are they: Above ground [] Underground []

E. Are any chemicals, solvents, paints, etc. used, handled, or stored at the facility? Yes [] No []

If Yes, provide inventory list (see attached form - Page 5)

F. Do you have any licenses from the Broward County Environment Protection Department?
If Yes, give type and license number: _____

Industrial Wastewater Characteristics

A. Wastewater Flow Rate (Gal/Day)

Average	Maximum	Design
----------------	----------------	---------------

B. Method(s) and locations(s) of flow measure.

C. Submit emergency plan to be followed to insure adequate waste treatment during emergencies such as power loss and equipment failure causing shutdown of pollution abatement equipment of the proposed facilities.

D. Water Quality Characteristics of Effluent.

The following are parameters which should be considered for effluent analysis. Specific parameters required may include others not listed below.

<u>Parameters</u>	<u>Concentration (note units)</u>		<u>30-Day Average</u>
	<u>Minimum</u>	<u>Maximum</u>	
pH			
BOD			
Oil & Grease			
COD			
Cadmium			
Chromium			
Copper			
Lead			
Nickel			
Silver			
Zinc			
Cyanide			
Phenols			
Chlorides			
TDS			
Temperature			
VOCs			

E. Laboratory designated for testing. _____

Effluent Disposal

A. If effluent is discharged to surface waters, complete the following for each discharge point.

1. Immediate receiving body of water (RBW):

- a. Name _____
- b. Type of Receiving Waters: Fresh Salt/Brackish
 Drainage Ditch Landlocked Lake
 Creek Lake with Outlet
 River Tidal Estuary
 Other (specify) _____
- c. Classification of receiving water (in accordance with FAC 173). _____

- d. Minimum 7 day 10 year low flow of the RBW at the discharge point (if appropriate). _____ cfs

2. Outfall Information

- a. Discharge location
Latitude _____° _____' _____"N Longitude _____° _____' _____"W
- b. Distance from shore _____
- c. Diameter _____
- d. Elevation of discharge invert _____ MSL

B. If effluent is discharged to groundwater, complete the following.

1. Disposal Method

- Drainfield _____
- Percolation/Evaporation Pond _____
- Combination (specify) _____
- Other (specify) _____

2. Location(s) of application area(s) _____

3. Ownership of Land (if different from applicant)

Fee Schedule Section 27-201(b)

