

**Broward County  
Office of Environmental Services  
Environmental Standard and Technology Group**

**WASTEWATER DISCHARGE PERMIT APPLICATION FORM**

In accordance with Broward County Code Chapter 34-142 (A) 2., this application must be completed, executed by an authorized representative, and submitted within ten (10) days of receipt, along with a \$75.00 filing fee (made payable to "Broward County Board of Commissioners") to:

Manager, Compliance & Monitoring Section,  
Environmental Standards and Technology Division, Broward County.  
2401 N. Powerline Road,  
Pompano Beach, FL 33069

The BC-WWMD, C&M Licensing staff is available to assist you. For technical questions, please contact the Licensing section at (954) 831-3030.

**SECTION A - GENERAL INFORMATION**

1. Facility Name: \_\_\_\_\_

a. Operator Name: \_\_\_\_\_

b. Is the operator identified in 1.a., the owner of the facility? **G** Yes **G** No

If no, provide the name and address of the operator and submit a copy of the contract and/or other documents indicating the operator's scope of responsibility for the facility.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Facility address:

Street: \_\_\_\_\_

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

3. Business Mailing Address:

Street or P.O. Box: \_\_\_\_\_

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

4. Designated facility contact:

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

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

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

5. Registered Agent of the facility:

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

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

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

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

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**SECTION B - ENVIRONMENTAL PERMITS AND/OR LICENSES HELD**

1.

<u>Type</u>	<u>Issued by</u>	<u>Exp. Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**SECTION C - BUSINESS ACTIVITY**

1. If your facility employs or will be employing processes in any of the industrial categories or business activities listed below (regardless of whether they generate wastewater, waste sludge, of hazardous wastes), place a check beside the category of business activity (check all that apply).

**Industrial Categories**

- |   |  |
|---|--|
| G Adhesives                                       | G Metal finishing*                           |
| G Aluminum Forming*                               | G Nonferrous Metals Forming & Manufacturing* |
| G Asbestos Manufacturing*                         | G Ore Mining*                                |
| G Auto and Other Laundries                        | G Organic Chemicals Manufacturing*           |
| G Battery Manufacturing*                          | G Paint and Ink Formulating*                 |
| G Beverage Bottler                                | G Paving and roofing Manufacturing*          |
| G Can Making*                                     | G Pesticide Manufacturing*                   |
| G Carbon Black*                                   | G Petroleum Refining*                        |
| G Coal Mining*                                    | G Pharmaceutical*                            |
| G Coil Coating*                                   | G Photographic*                              |
| G Copper Forming*                                 | G Plastic & Synthetic                        |
| G Dairy Products*                                 | G Materials Manufacturing*                   |
| G Electric & Electronic Components Manufacturing* | G Plastics Processing Manufacturing*         |
| G Electroplating*                                 | G Porcelain Enamel*                          |
| G Feedlots*                                       | G Printing and Publishing                    |
| G Fertilizer Manufacturing*                       | G Pulp, Paper and Fiberboard Manufacturing*  |
| G Food/Edible Products Processor*                 | G Rubber*                                    |
| G Foundries (Metal Molding and Casting)*          | G Seafood Processor*                         |
| G Glass Manufacturing*                            | G Slaughter/meat Packing/Rendering*          |
| G Grain Mills*                                    | G Soap and Detergent Manufacturing*          |
| G Hospital*                                       | G Steam Electric*                            |
| G Inorganic Chemicals*                            | G Sugar Processing*                          |
| G Iron and Steel*                                 | G Textile Mills*                             |
| G Leather Tanning and Finishing*                  | G Timber Products*                           |
| G Mechanical Products                             | G Waste Treatment/Processing                 |
| G Other, Type _____                               |  |

\* A facility with processes inclusive in these business areas may be covered by the Environmental Protection Agency's (EPA) categorical pretreatment standards. These facilities are called "categorical users".

2. Give a brief description of all operations at this facility including primary products or services (attach additional sheets if necessary):

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3. Indicate applicable Standard Industrial Classification (SIC) for all processes (if more than one applies, list in descending order of importance.):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

**SECTION D - WATER SUPPLY**

1. Water Sources: (Check all that apply)

- G** Private Well
- G** Surface Water
- G** Municipal Utility (City): \_\_\_\_\_
- G** Other (Specify): \_\_\_\_\_
- Name on water bill: \_\_\_\_\_
- Street: \_\_\_\_\_
- City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- Account # \_\_\_\_\_

2. Water Usage:

<u>USE</u>	<u>AVERAGE (GPD)</u>
a. Contact cooling water	_____
b. Non-contact cooling water	_____
c. Boiler feed	_____
d. Process	_____
e. Sanitary	_____
f. Air pollution control	_____
g. Contained in product	(_____)
h. Plant & equipment washdown	_____
i. Irrigation & land watering	_____
j. Other _____	_____
k. Total, a - j	=====

**SECTION E - SEWER INFORMATION**

1. Is the building presently connected to the sanitary sewer system?

- G** Yes
- G** No

2. List size, descriptive location and flow of each facility sewer which connects to the County's sewer system.

<u>Sewer size</u>	<u>Descriptive Location</u>	<u>Avg. Flow</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Does (or will) this facility discharge any wastewater other than from restrooms to the County sewer or haul wastewater to the Broward County O.E.S. Septage Receiving Facility?

- G** Yes  
**G** No

4. Provide the following information on wastewater flow rate.

a. Hours/Day Discharged (e.g., 8 hours/day)

M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ R\_\_\_\_\_ F\_\_\_\_\_ S\_\_\_\_\_ S\_\_\_\_\_

b. Hours of discharge (e.g., 9 a.m. to 5 p.m.)

M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ R\_\_\_\_\_ F\_\_\_\_\_ S\_\_\_\_\_ S\_\_\_\_\_

c. Peak hourly flow rate \_\_\_\_\_(GALLONS PER DAY)

d. Annual daily average \_\_\_\_\_(GALLONS PER DAY)

5. If batch discharge occurs, indicate:

a. Number of batch discharges \_\_\_\_\_ Per \_\_\_\_\_

b. Average discharge/batch \_\_\_\_\_ Gallons

c. Flow rate \_\_\_\_\_ (GALLONS PER DAY)

**SECTION F - FACILITY OPERATIONAL CHARACTERISTICS**

1. Employee information:

a. Work Days:  Mon.  Tue.  Wed.  Thu.  Fri.  Sat.  Sun.

Empl's 1st. \_\_\_\_\_  
per 2nd. \_\_\_\_\_  
shift 3rd. \_\_\_\_\_

b. Indicate whether the business activity is

- Continuous through the year, or
- Seasonal

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c. Does operation shut down for vacation, maintenance, or other reason?

Yes, Indicate the reason and the period shutdown occurs\_\_  
\_\_\_\_\_  
\_\_\_\_\_

No

2. List types of chemicals used (use separate sheet if necessary)

<u>Chemical</u>	<u>Quantity</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Authorized Representative Statement:**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. 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.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone