

**Broward County
Water and Wastewater Services
Water and Wastewater Operations Division**

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 **\$100.00 filing fee** (made payable to "Broward County Board of Commissioners") to:

Manager, Enforcement Section
Water and Wastewater Services /Water and Wastewater Operations Division
2401 N. Powerline Road
Pompano Beach, FL 33069

The Broward County Permitting staff is available to assist you. For industrial user permitting questions, please contact the Permitting section at (954) 831-3049.

Note: Please read all attached instructions (Appendix A) prior to completing this application. Requests for confidential treatment of information provided on this form shall be governed by procedures specified in Section 403.111, Florida Statutes. In accordance with Rule 62-625.800, Florida Administrative Code, and The Broward County Sewer Use Ordinance Sec 34-148, information and data provided in this questionnaire which identifies the content, volume and frequency of discharge shall be available to the public without restriction.

SECTION A – GENERAL INFORMATION

A.1 Facility Name:

a. Operator Name:

b. Is the operator identified in 1.a., the owner of the facility? Yes 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.

A.2 Facility Address:

Street:

City:

State:

Zip:

A.3 Business Mailing Address:

Street or P.O. Box:

City:

State:

Zip:

A.4 Designated authorized signatory of the facility:

[Attach similar information for each authorized representative]

See page 20 for the definition of authorized signatory

Name:

Title:

Address:

City:

State:

Zip:

Phone #

e-mail address:

A.5 Designated facility contact:

Name:

Title:

Phone #

e-mail address:

SECTION B – BUSINESS ACTIVITY

B.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, or hazardous wastes), place a check beside the category of business activity (check all that apply).

Industrial Categories

- Aluminum Forming
- Asbestos Manufacturing
- Battery Manufacturing
- Can Making
- Canned and Preserved Fruit and Vegetable Processing
- Canned and Preserved Seafood
- Carbon Black Manufacturing
- Cement Manufacturing
- Centralized Waste Treatment
- Coal Mining
- Coil Coating
- Concentrated Animal Feeding Operation and Feedlots
- Concentration Aquatic Animal Production
- Copper Forming
- Dairy Product Processing or Manufacturing
- Electric and Electronic Components Manufacturing
- Electroplating
- Explosives Manufacturing
- Fertilizer Manufacturing
- Ferroalloy Manufacturing
- Foundries (Metal Molding and Casting)

- Glass Manufacturing
- Grain Mills
- Gum and Wood Chemicals Manufacturing
- Hospital
- Ink Formulation
- Inorganic Chemicals
- Iron and Steel
- Landfill
- Leather Tanning and Finishing
- Meat and Poultry Products
- Metal Finishing
- Metal Products and Machinery
- Mineral Mining and Processing
- Nonferrous Metals Forming
- Nonferrous Metals Manufacturing
- Oil and Gas Extraction
- Ore Mining
- Organic Chemicals Manufacturing
- Paint and Ink Formulating
- Paving and Roofing Manufacturing
- Pesticides Chemical Manufacturing, Formulating, and/or Packaging
- Petroleum Refining
- Pharmaceutical Manufacturing
- Phosphate Manufacturing
- Photographic Processing
- Plastic and Synthetic Materials Manufacturing
- Porcelain Enameling
- Printed Circuit Board Manufacturing
- Pulp, Paper, and Fiberboard Manufacturing
- Rubber Manufacturing
- Soap and Detergent Manufacturing
- Steam Electric Power Generating
- Sugar Processing
- Textile Mills
- Timber Products
- Transportation Equipment Cleaning
- Waste Combustors
- Other (Describe)

B.2 Give a detailed description of all manufacturing processes at this facility including primary products or services provided on the premises. (Attach additional sheets as necessary):

B.3 Indicate applicable North American Industry Classification System (NAICS) codes for all

processes:

- a.
- b.
- c.
- d.
- e.

B.4 Production Rate

Product	Past Calendar Year Amounts per Day (Daily Units)		Estimate This Calendar Year Amounts Per Day (Daily Units)	
	Average	Maximum	Average	Maximum

SECTION C – WATER SUPPLY

C.1 Water Sources: (Check as many as are applicable.)

- Private Well
- Surface Water
- Municipal Water Utility (Specify City):
- Other (Specify):

C.2 Name (as listed on the water bill)

Street:

City:

State:

Zip:

C.3 Water service account number:

C.4 List average water usage on premises: [new facilities may estimate]
Please attach copies of **1 years' worth of water bills.**

Type	Average Water Usage (GPD)	Indicate Estimated (E) or Measured (M)
a. Contact cooling water		
b. Non-contact cooling water		
c. Boiler feeding		
d. Process		
e. Sanitary		
f. Air pollution control		
g. Contained in product		
h. Plant and equipment wash down		
i. Irrigation and lawn watering		
j. Other		
k. Total of a through j		

C.5 List average volume of discharge or water loss:

- | | |
|-------------------------|-----|
| a. City Sewer System | GPD |
| b. Waste Hauler | GPD |
| c. Evaporation | GPD |
| d. Contained in Product | GPD |

SECTION D – SEWER INFORMATION

D.1a. For an existing business:

Is the building presently connected to the public sanitary sewer system?

Yes Sanitary sewer account number—
 No Have you applied for a sanitary sewer hookup? Yes No

D.1b. For a new business:

- (i) Will you be occupying an existing vacant building? Yes No
- (ii) Have you applied for a building permit if a new facility will be constructed? Yes No
- (iii) Will you be connected to the public sanitary sewer system? Yes No

D.2 List size, descriptive location, and flow of each discharge pipe or discharge point which connects to the sewer system. (If more than three, attach additional information on another sheet.)

Descriptive Location of Sewer Connection or Discharge Point	Average Flow (GPD)

SECTION E – WASTEWATER DISCHARGE INFORMATION

E.1 Does (or will) this facility discharge any wastewater other than from restrooms to the sanitary sewer?

Yes If the answer to this question is “yes,” complete the remainder of the application
 No If the answer to this question is “no,” skip to Section I.

E.2 Provide the following information on wastewater flow rate. [New facilities may estimate.]

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

M T W TH F SAT SUN

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

M T W TH F SAT SUN

- c. Peak hourly flow rate (GPD)
- d. Maximum daily flow rate (GPD)
- e. Annual daily average (GPD)

E.3 If batch discharge occurs or will occur, indicate: [New facilities may estimate.]

- a. Number of batch discharges (per day)
- b. Average discharge per batch (GPD)
- c. Time of batch discharges (days of week) (hours of day)
- d. Flow rate (gallons per day)

E.4 Schematic Flow Diagram – For each major activity in which wastewater is, or will be generated, draw a diagram of the **flow of materials, products, water, and wastewater** from the start of the activity to its completion, showing all unit processes, pretreatment systems and sampling locations. Indicate which processes use water and which generate waste streams. Include the average daily volume and maximum daily volume of each waste stream [new facilities may estimate]. If estimates are used for flow data this **must** be indicated.

Number each unit process having wastewater discharges to the sewer. Use these numbers when showing this unit process in the building layout in Section H. (*include as an attachment*)

E.5 List average wastewater discharge, maximum discharge, and type of discharge (batch, continuous, or both), for **each** plant process. Include the reference number from the **process** schematic that corresponds to each process. [New facilities should provide estimates for each discharge]

No.	Process Description	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch, continuous,

E.6 List the average wastewater discharge, maximum discharge, and type of discharge (batch, continuous, or both) for each of the **nonprocess** wastewater flows (i.e., cooling tower blowdown, boiler blowdown)

No.	Process Description	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch, continuous,

E.7 Do you have, or plan to have, continuous wastewater flow monitoring equipment at this facility?

Current Flow Metering Yes No
 Planned Flow Metering Yes No

If so, please indicate the present or future location of this equipment on the sewer schematic and describe the equipment below:

E.8 Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics? Consider production processes as well as air or water pollution treatment processes that may affect the discharge.

Yes No (skip to Question 10)

E.9 Briefly describe these changes and their effects on the wastewater volume and characteristics: (attach additional sheets if needed)

E.10 Are any recycling or reclamation systems in use or planned?

Yes No (skip to Question 12)

E.11 Briefly describe any recovery process, substance recovered, percent recovered, and the concentration in the spent solution. Submit a flow diagram for each process (attach additional sheets if needed):

SECTION F – CHARACTERISTICS OF DISCHARGE

See appendix A.

SECTION G – TREATMENT

- G.1 Is any form of wastewater treatment (see list below) practiced at this facility?
Yes No
- G.2 Is any form of wastewater treatment (or changes to an existing wastewater treatment) planned for this facility within the next three years?
No Yes, Describe:
- G.3 Treatment devices or processes used or proposed for treating wastewater or sludge (check as many as appropriate).
- Air flotation
 - Centrifuge
 - Chemical precipitation
 - Chlorination
 - Cyclone
 - Filtration
 - Flow equalization
 - Grease or oil separation, type:
 - Grease trap
 - Grinding filter
 - Grit removal
 - Ion exchange
 - Neutralization, pH correction
 - Ozonation
 - Reverse osmosis
 - Screen
 - Sedimentation
 - Septic tank
 - Solvent separation
 - Spill protection
 - Sump
 - Rainwater diversion or storage
 - Biological treatment, type:
 - Other chemical treatment, type:
 - Other physical treatment, type:
 - Other, type:
- G.4 Is process wastewater mixed with nonprocess wastewater prior to the sampling point?
No Yes If yes, describe

G.5 Describe the pollutant loadings, flow rates, design capacity, physical size, and operating procedures of each treatment facility checked in G.3.

G.6 Attach a process flow diagram for each existing treatment system. Include process equipment, by- products, by-product disposal method, waste and by-product volumes, and design and operating conditions,

G.7 Describe any changes in treatment or disposal methods planned or under construction for the wastewater discharge to the sanitary sewer. Please include estimated completion dates.

G.8 Do you have a treatment operator? Yes No

(If Yes, please provide the following information)

Name:

Title:

Phone:

e-mail address:

Full time (specify hours):

Part time (specify hours):

G.9 Do you have a manual on the correct operation of your treatment equipment? Yes No

G.10 Do you have written maintenance schedule for your treatment equipment? Yes No

SECTION H – FACILITY OPERATIONAL CHARACTERISTICS

H.1 Shift Information

Work Days		Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sun.
Shifts per work day								
Employees per shift	1st							
	2nd							
	3rd							
Shift: Start and End times	1st							
	2nd							
	3rd							

H.2 Indicate whether the **business activity** is:

- Continuous through the year, or
 Seasonal (circle the months of the year during which the business occurs):

J F M A M J J A S O N D

Comments:

H.3 Indicate whether the **facility discharge** is:

- Continuous through the year, or
 Seasonal (circle the months of the year during which the business occurs):

J F M A M J J A S O N D

Comments:

H.4 Does operation shut down for vacation, maintenance, or other reasons?

- No Yes, indicate reasons and period when shutdown occurs:

H.7 Building Layout – Draw to scale the location of each building on the premises. Show map orientation and location of all water meters, storm drains, numbered unit processes (from schematic flow diagram), public sewers, and each facility sewer line connected to the public sewers.

Number each sewer and show existing and proposed sampling locations.

A blueprint or drawing of the facilities showing the above items may be attached in lieu of submitting a drawing on this sheet.

SECTION I – SPILL PREVENTION

I.1 Do you have chemical storage containers, bins, or ponds at your facility?

No If yes, please give a description of their location, contents, size, type, and frequency and method of cleaning.

Also indicate in a diagram or comment on the proximity of these containers to a sewer or storm drain. Indicate if buried metal containers have any protection:

I.2 Do you have floor drains in your manufacturing or chemical storage area(s)?

No

Yes

If yes, are these floor drains sealed or unsealed?

If the floor drains are unsealed, where do they discharge to?

I.3 If you have chemical storage containers, bins, or ponds in manufacturing area, could an accidental spill lead to a discharge to (check all that apply):

an onsite disposal system

public sanitary sewer system (e.g., through a floor drain)

storm drain

the ground

other, specify:

not applicable, no possible discharge to any of the above routes

I.4 Do you have an accidental spill prevention plan (ASPP) to prevent spills of chemicals or slug discharges from entering the Control Authority's collection systems?

Yes – **[Please enclose a copy with the application.]**

No

N/A, since there are no floor drains and/or the facility discharge(s) only domestic wastes.

I.5 Please describe below any previous spill events and remedial measures taken to prevent their reoccurrence.

I.6 Please identify from the following List, the Type and Approximate Volume of Chemicals Stored at your facility.

CHEMICALS	VOLUME STORED AT YOUR FACILITY	CONTAINER SIZE
Acids		
Alcohol, Xylene		
Anti-Freeze		
Bases/Caustic Chemicals		
Batteries		
Benzene, Toluene		
Bio Hazardous Waste		
Carburetor Cleaners		
Crushed Filters		
Deoxidizers		
Herbicides		
Hydrogen Peroxide		
Ink Waste		
Mineral Spirits		
Oil/Lubricants		
Other		
Paint Thinners		
Paints		
Parts Cleaners/Degreasers		
Perchloroethylene		
Pesticides		
Silver Fixer		
Soak Cleaners		
Spent Anti-Freeze		
Spent Plating Waste		
Spent Solvents		
Used Oil		
Wash Waters		
Waste Paint Products		

SECTION J – BEST MANAGEMENT PRACTICES

- J.1 Describe the types of best management practices (BMPs) you employ to prevent pollutants from entering a facility's waste stream or from reaching a discharge point.

BMPs are management and operational procedures such as schedules of activities, prohibitions of practices, maintenance procedures, and other management practices to implement the general and specific prohibitions listed in 40 CFR 403.5(a)(1) and (b).

BMPs also include treatment requirements, operating procedures, and practices to control plant site runoff, spillage or leaks, sludge or waste disposal, or drainage from raw materials storage.

- J.2 Do you have the potential for a slug discharge to the sewer system? A slug discharge is any discharge of a non-routine episodic nature, including but not limited to an accidental spill or a non-customary batch discharge, which has a reasonable potential to cause interference or pass through, or in any other way violate the POTW's regulations, local limits or permit conditions [40 CFR 403.8(f)(2)(v).] Yes No

Please describe the type of the potential slug discharge, including quality and content.

Please describe current mechanisms for prevention of slug discharges.

Please describe where and how raw materials are stored.

SECTION K – NON-DISCHARGED WASTES

K.1 Are any waste liquids or sludges generated and not disposed of in the sanitary sewer system?

- Yes, please describe below
- No, skip the remainder of Section K

Waste Generated	Quantity (per year)	Disposal Method

K.2 Indicate which wastes identified above are disposed of at an off-site treatment facility and which are disposed of on-site.

K.3 If any of your wastes are sent to an off-site centralized waste treatment facility, identify the waste and the facility.

K.4 If an outside firm removes any of the above checked wastes, state the name(s) and address(es) of all waste haulers:

- a. _____ Permit # (if applicable)
- b. _____ Permit # (if applicable)

K.5 Have you been issued any Federal, State, or local environmental permits?

- Yes
- No

If yes, please list the permit(s):

K.6 Describe where and how waste liquids and sludge are stored.

Authorized Representative Statement

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.

_____	_____	
Name(s)	Title(s)	
_____	_____	_____
Signature(s)*	Date	Phone

* To be signed by an authorized representative, as defined in [34-138(c) (3)], after completion of this form.

Appendix A

INSTRUCTIONS TO FILL OUT WASTEWATER DISCHARGE PERMIT APPLICATION

The permit application must be completed through question E.1. If you answer “no” to question E.1., you may skip to Section I. Otherwise, if a question is not applicable, indicate so on the form. Instructions to some questions on the permit application are given below.

SECTION A – INSTRUCTIONS (GENERAL INFORMATION)

- A.1 Enter the facility’s official or legal name. Do not use a colloquial name.
- a. Operator Name: Give the name, as it is legally referred to, of the person, firm, public organization, or any other entity which operates the facility described in this application. This may or may not be the same name as the facility.
 - b. Indicate whether the entity which operates the facility also owns it by marking the appropriate box:
 - (i) If the response is “No,” clearly indicate the operator’s name and address and submit a copy of the contract and/or other documents indicating the operator’s scope of responsibility for the facility.
- A.2 Provide the physical location of the facility that is applying for a discharge permit.
- A.3 Provide the mailing address where correspondence from the Control Authority may be sent.
- A.4 Provide all the names of the authorized signatories for this facility for the purposes of signing all reports. All applications, reports, or information submitted to the BCWWS must contain an **original signature as required in sections a), b), c) or d) below**
- a. By a **responsible corporate officer**, if the Industrial User submitting the reports is a corporation. For the purpose of this paragraph, a responsible corporate officer means:
 - (i) A President, Secretary, Treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy - or decision-making functions for the corporation; or
 - (ii) The Manager of one or more manufacturing, production, or operation facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter, 1980 dollars), if authority to sign documents has been assigned or delegated to the Manager in accordance with corporate procedures.
 - b. By a **general partner or proprietor** if the Industrial User submitting the reports is a partnership or sole proprietorship, respectively.

- c. The **principal Executive Officer or Director** having responsibility for the overall operation of the discharging facility if the Industrial User submitting the reports is a Federal, State, or local governmental entity, or their agents.
- d. By a **duly authorized representative of the individual designated in paragraph A.4 a, b or c of this section if:**
 - (i) The authorization is made in writing by the individual described in paragraph (a), (b) or (c);
 - (ii) The authorization specifies either an individual or a position having responsibility for the overall operation of the facility from which the Industrial discharge originates, such as the position of Plant Manager, operator of a well, or a Well Field Superintendent, or a position of equivalent responsibility, or having overall responsibility for environmental matters for the company; and
 - (iii) The written authorization is submitted to the BCWWS.
- e. If an authorization under paragraph (d) of this Section is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, or overall responsibility for the environmental matters for the company, a new authorization satisfying the requirements of paragraph (d) of this section must be submitted to the BCWWS prior to or together with any reports to be signed by an authorized representative.

SECTION B – INSTRUCTIONS (BUSINESS OPERATIONS)

- B.1 Check off all operations that occur or will occur at your facility.
- B.2 Provide a brief narrative description of all operations at this facility.
- B.3 For all processes found on the premises, indicate the NAICS (North America Industry Classification System) code which replaces the Standard Industrial Classification (SIC) system. To determine the NAICS code for a facility see *North American Industry Classification System--United States, 2002* which includes definitions for each industry, tables showing correspondence between 2002 NAICS and 1997 NAICS for codes that changed, and a comprehensive index--features also available on this web site.
- B.4 List the types of products, giving the common or brand name and the proper or scientific name. Enter from your records the average and maximum amounts produced daily for each operation for the previous calendar year, and the estimated total daily production for this calendar year. Be sure to specify the daily units of production. Attach additional pages as necessary.

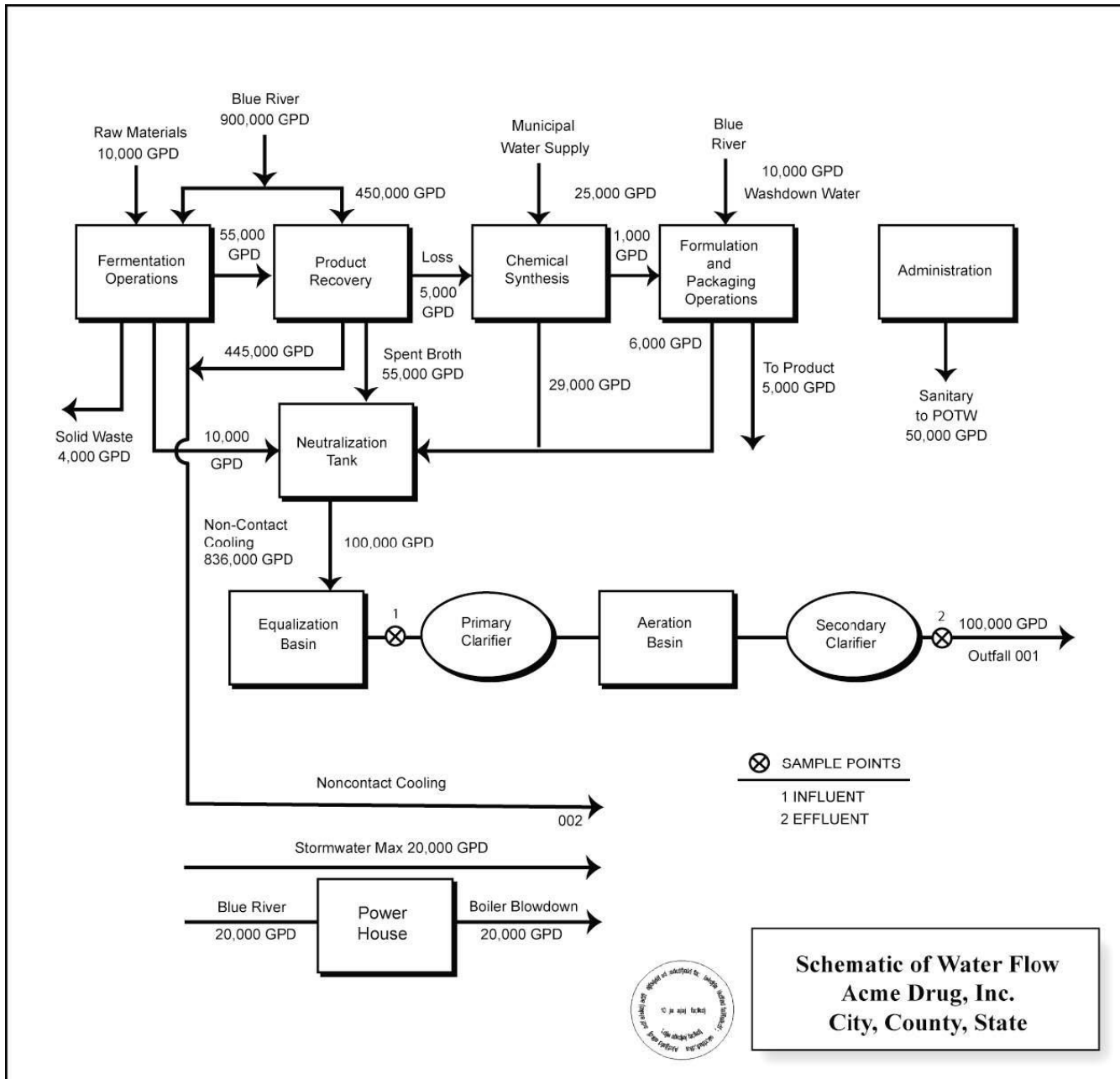
SECTION C – INSTRUCTION (WATER SUPPLY)

- C.1 Provide daily average water usage within the facility. Contact cooling water is cooling water that during the process comes into contact with process materials, thereby becoming contaminated. Non-contact cooling water does not come into contact with process materials. Sanitary water includes only water used in restrooms. Plant and equipment wash-down includes floor wash-down. If sanitary flow is not metered, provide an estimate based on 25 gallons per day (gpd) for each employee.

SECTION E – INSTRUCTION (WASTEWATER DISCHARGE INFORMATION)

- E.1 If you answer “no” to this question, skip to Section I, otherwise complete the remainder of the application.
- E.2 A schematic flow diagram is required to be completed and certified for accuracy by a State Registered Professional Engineer. Assign a sequential reference number to each process starting with No. 1. ***An example of a drawing is shown below in Figure 1. To determine your average daily volume and maximum daily volume of wastewater flow, you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measurable.***

Figure 1. Example of Schematic Flow Diagram



E.3 Users should report average daily and daily maximum wastewater flows from each process, operation, or activity present at the facility. Categorical users should report average daily and maximum daily wastewater flows from every regulated, unregulated, and dilution process. A regulated waste stream is defined as wastewater from an industrial process that is regulated for a particular pollutant by a categorical pretreatment standard. Unregulated waste streams are waste streams from an industrial process that are not regulated by a categorical pretreatment standard and are not defined as a dilution waste stream. Dilution waste streams include sanitary wastewater, boiler blowdown, noncontact cooling water or blowdown, storm water streams, demineralized backwash streams and process waste streams from certain industrial subcategories exempted by EPA from categorical pretreatment standards. [For further details see 40 CFR 403.6 (e).]

- E.4 Users should report the average daily and daily maximum wastewater flows for each nonprocess wastewater flows. Nonprocess wastewater flows include, but are not limited to, cooling tower blowdown and boiler blowdown.

SECTION F – INSTRUCTION (CHARACTERISTICS OF DISCHARGE)

The industrial user will be required to provide the results of sampling and analysis identifying the nature and concentration of regulated pollutants in the discharge from each regulated process. Both daily maximum and average concentration values must be reported. The sample must be representative of daily operations.

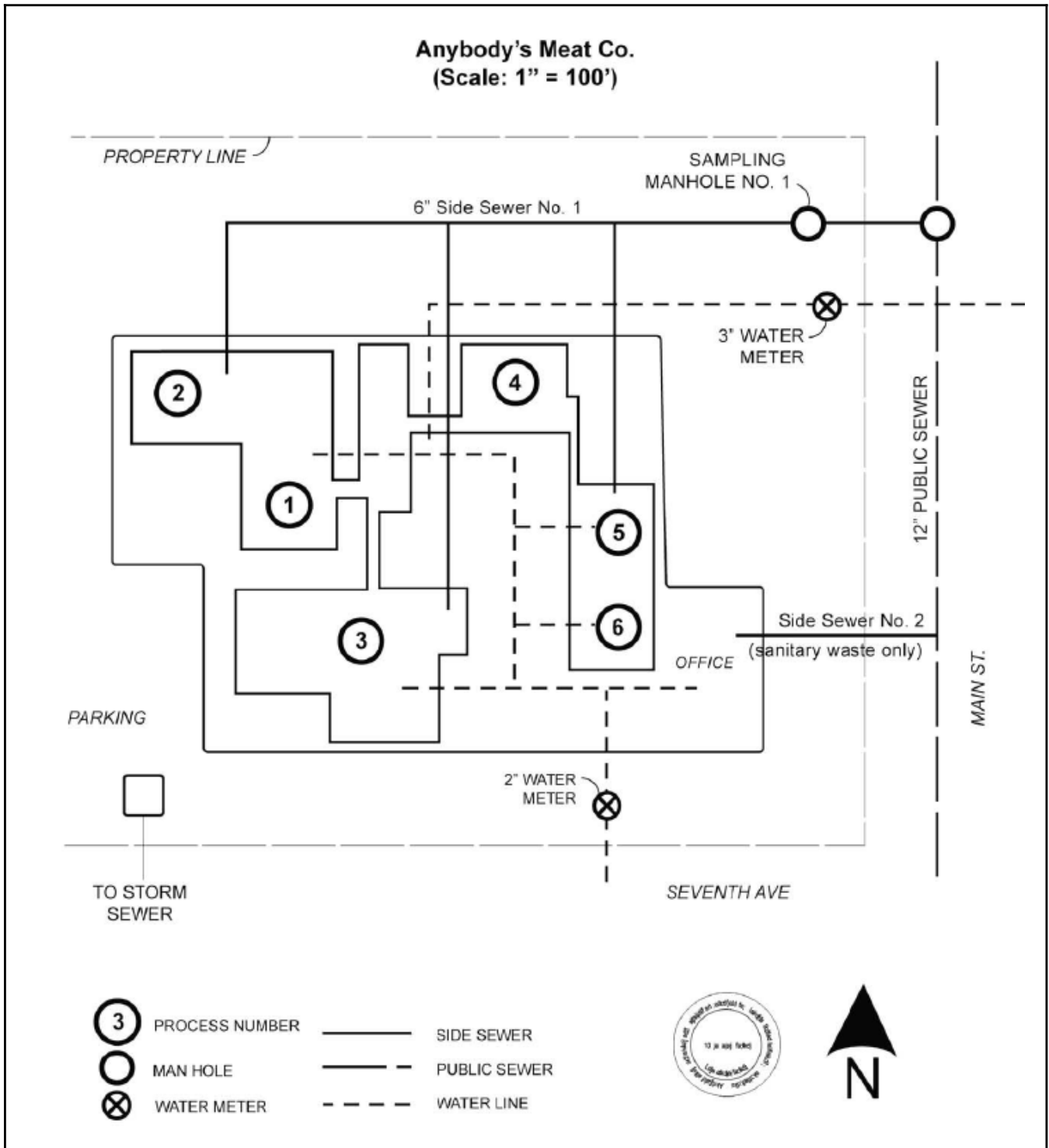
If the User is subject to categorical effluent limits, the user must take a minimum of one representative sample to compile the necessary data. Samples should be taken immediately downstream from pretreatment facilities if such exists or immediately downstream from the regulated process if no pretreatment exists. If other wastewaters are mixed with the regulated wastewater prior to pretreatment, the user should measure the flows and concentrations. Sampling and analysis must be performed in accordance with the techniques prescribed in 40 CFR part 136 and amendments thereto. Furthermore, the date and place, and the methods of analysis must be submitted with the application. Historical data may be used if the data provides sufficient information to determine the need for industrial pretreatment measures.

SECTION H – INSTRUCTION (FACILITY OPERATIONAL CHARACTERISTICS)

- H.1 Indicate whether the business activity is continuous throughout the year or if it is seasonal. If the activity is seasonal, circle the months of the year during which the discharge occurs. Make any comments you feel are required to describe the variation in operation of your business activity.
- H.2 Indicate any shut downs in operation which may occur during the year and indicate the reasons for shutdown.
- H.3 Provide a listing of all primary raw materials used (or planned) in the facility's operations. Indicate amount of raw material used in daily units.
- H.4 Provide a listing of all chemicals used (or planned) in the facility's operations. Indicate the amount use of planned in daily units. Avoid the use of trade names of chemicals. If trade names are used, also provide chemical compounds. Provide copies of all available material safety data sheets for all chemical identified.
- H.5 A building layout or plant site plan of the premises is required to be completed and certified for accuracy by a State registered professional engineer. Approved building plans may be submitted.

An arrow showing North as well as the map scale must be shown. The location of each existing and proposed sampling location and facility sewer line must be clearly identified as well as all sanitary and wastewater drainage plumbing. Number each unit process discharging wastewater to the public sewer. Use the same number system shown in Figure 2, the schematic flow diagram. An example of the drawing required is shown below.

Figure 2. Example of Building Layout



SECTION I – INSTRUCTION (SPILL PREVENTION)

- I.1 Describe how the spill occurred, what was spilled, when the spill happened, where it occurred, how much was spilled, and whether or not the spill reached the sewer. Also explain what measures have been taken to prevent a reoccurrence or what measures have been taken to limit damage if another spill occurs.

SECTION K – INSTRUCTIONS (NON-DISCHARGED WASTES)

- K.1 For wastes not discharged to the Control Authority's sewer, indicate types of waste generated, amount generated, the way in which the waste is disposed (e.g., incinerated, hauled, etc.), and the location of disposal.
- K.2 Onsite disposal system could be a septic system, lagoon, holding pond (evaporative-type), etc.
- K.3 Types of permits could be: air, hazardous waste, underground injection, solid waste, NPDES (for discharges to surface water), etc.

SECTION L – INSTRUCTIONS (AUTHORIZED SIGNATURES)

See instructions for question 4 in Section A, for a definition of an authorized representative.