



EI DORADO IRRIGATION DISTRICT
2890 Mosquito Road
Placerville, CA 95667

APPLICATION CHECKLIST FOR WASTEWATER DISCHARGE PERMIT (WWDP)

This checklist must be submitted with all General Wastewater Discharge Permit Applications. Failure to submit a complete application may result in your application being returned for correction of deficiencies, which may delay Permit issuance.

Does your facility discharge to El Dorado Irrigation's (EID) sanitary sewer system?

- My business **is not** connected to EID's sanitary sewer. All waste is treated by a private sewage disposal (septic) system. You are exempt from discharge permitting. Please sign this form and return to EID.
- My business **is** connected to EID's sanitary sewer. You may or may not be exempt from discharge permitting. Please continue completing, signing, and return this form along with the Permit Application for review.

REASON FOR SUBMITTAL (Please check appropriate box)

- RENEWAL PERMIT APPLICATION - Facility has an existing Wastewater Discharge Permit and has been notified by EID the permit is due for renewal.
- NEW BUSINESS PERMIT APPLICATION - New construction*
- NEW BUSINESS PERMIT APPLICATION - New business taking over existing building—**Includes remodel with or without business name/ ownership change***
- NEW OWNER PERMIT APPLICATION - New owner taking over existing business who was issued a WWDP- **Business name/ ownership change only with no remodel or business practice change**

TYPE OF DISCHARGER (Please check appropriate box)

- You store, utilize, or generate chemicals, hazardous waste, or other products with the ability to harm the Wastewater Treatment Plant (WWTP) or sewer collection system which **may have potential to discharge to the sewer as a product of conducting your business** if not managed properly via pretreatment or other means. Examples include, but are not limited to car wash sludge, petroleum oils, lubricants, solvents, paints, and greases.
- You **do not** store, utilize, or generate chemicals, hazardous waste, or other products with the ability to harm the WWTP or collection system.

ADDITIONAL REQUIRED DOCUMENTATION (If applicable)

* Unless specifically instructed, a plot/plumbing plan is **only required for New Business Permit Applications.**

- PLOT/PLUMBING PLAN

CURRENT PERMIT CLASSIFICATION FEE

DO NOT submit any form of payment with the application packet. Upon issuance of a Wastewater Discharge Permit, the District will assess a bimonthly fee on the Customer of Record's water/sewer bill in accordance with the District's Fee Schedule (AR 11010-Attachment A). Fees are subject to change.

Name of Business (Print)

Applicant Signature

Date

Applicant Name (Print)

Submit the required documents, application and this checklist by mail or email:

El Dorado Irrigation District ipp@eid.org
Attn: IPP Department
2890 Mosquito Road
Placerville, CA 95667



EI DORADO IRRIGATION DISTRICT
APPLICATION FOR WASTEWATER DISCHARGE PERMIT
(COMMERCIAL AND INDUSTRIAL FACILITY)

SECTION A – GENERAL INFORMATION

1. Business Name, Location Address, and Telephone Number:

 Zip Code _____ Telephone No. () _____

2. EID Account Number (From water/sewer bill –may be obtained from property owner/manager if they pay the water/sewer bill): _____

3. Mailing Address. (If same as #1, check []) _____

 Zip Code _____

4. Is this facility leased? Yes No
 If “yes”, Name, Address and Telephone Number of Lessor:

 Zip Code _____ Telephone No. () _____

5. Name Title and Telephone Number of person authorized to represent this firm in official dealings with Regulatory Agencies (this should be an owner, executive officer, general manager, or equivalent):

Name: _____ Title _____ Telephone No. _____

6. Alternate person to contact concerning information provided herein:

Name: _____ Title _____ Telephone No. _____

7. Standard Industrial Classification Number(s) (SIC Code) for your facility

8. Identify the type of business(es) conducted and/or activities performed at the facility (auto repair, machine shop, electroplating, food preparation, manufacturing, analytical/chemistry lab, research and development (R&D), warehousing, painting, printing, x-ray/photo processing, food processing, medical, etc.).

9. Provide a brief narrative description of the manufacturing, production, or service activities your firm conducts:

10. This facility generates the following types of wastes (check all that apply):

| | Disposal Method | | | Average gallons/ pounds/day |
|--|--------------------------------|--------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Acids and Alkalies | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Air Pollution Control Unit | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Boiler/Tower Blowdown | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Cooling Water, Non-Contact | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Cooling Water, Contact | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Domestic Waste (restrooms, employee showers, etc.) | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Equipment/Facility Washdown | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Fat, Oil, Grease (food) | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Heavy Metal Sludge | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Imaging/Photo Processing | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Medical Waste (describe): | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <hr/> | | | | |
| <input type="checkbox"/> Motor/Machine Oil | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Paint/Ink/Dye | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Pesticide | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Plating Waste | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Pretreatment Sludge | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Process | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Product or Parts Cleaning | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Storm Water Runoff to Sewer | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Solvent/Thinner | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <input type="checkbox"/> Other Hazardous Waste (describe): | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <hr/> | | | | |
| <input type="checkbox"/> Other (describe): | <input type="checkbox"/> sewer | <input type="checkbox"/> trash | <input type="checkbox"/> off-site* | <input type="checkbox"/> _____ ** |
| <hr/> | | | | |

* Provide name and address of waste hauler(s), if used.

11. Types of fixtures connected to the sanitary sewer (check all that apply):

| | | | | | |
|--------------------------|-------------------------|--------------------------|----------------------|--------------------------|--------|
| <input type="checkbox"/> | Restrooms | <input type="checkbox"/> | Parts washer | <input type="checkbox"/> | Other: |
| <input type="checkbox"/> | Break room/kitchen sink | <input type="checkbox"/> | Sinks (process area) | <input type="checkbox"/> | Other: |
| <input type="checkbox"/> | Dishwasher | <input type="checkbox"/> | Storm water drains | <input type="checkbox"/> | Other: |
| <input type="checkbox"/> | Floor drains | <input type="checkbox"/> | Laundry machine | <input type="checkbox"/> | Other: |

12. Is a "Spill Prevention Control and Countermeasure Plan" prepared for the facility?
 Yes No

13. Does this facility have a hazardous material business plan on file with El Dorado County?
 If yes, please attach.
 Yes No

14. Does this facility have an EPA ID number?
 Yes No

SECTION B – FACILITY OPERATION CHARACTERISTICS

1. Number of shifts worked per 24-hour day is _____.
 Average number of employees per shift is _____.

2. Starting times of each shift: 1st _____ a.m. 2nd _____ a.m. 3rd _____ a.m.
 p.m. p.m. p.m.

3. List all product/manufacturing lines:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Note: The following information in this section must be completed for each product line (attach separate sheet as necessary).

4. Product produced: _____

5. Raw materials and process additives used:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

6. Production process is:

[] Batch [] Continuous [] Both _____ % batch _____ % continuous
 Average number of batches per 24-hour day _____

7. Hours of operation: _____ a.m. to _____ p.m. [] continuous

8. Is production subject to seasonal variation? Yes No

If yes, briefly describe seasonal production cycle.

9. Are any process changes or expansions planned during the next three years?
 Yes No

If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

SECTION C – WASTEWATER INFORMATION

1. If your facility employs processes in any of the 34 industrial categories or business activities listed and any of these processes generates wastewater or waste sludge, place a check beside the category or business activity (check all that apply).

A. Industrial Categories

- | | |
|--|--|
| 1. <input type="checkbox"/> Adhesives | 18. <input type="checkbox"/> Ore Mining |
| 2. <input type="checkbox"/> Aluminum Forming | 19. <input type="checkbox"/> Organic Chemicals |
| 3. <input type="checkbox"/> Auto & Other Laundries | 20. <input type="checkbox"/> Paint & Ink |
| 4. <input type="checkbox"/> Battery Manufacturing | 21. <input type="checkbox"/> Pesticides |
| 5. <input type="checkbox"/> Coal Mining | 22. <input type="checkbox"/> Petroleum Refining |
| 6. <input type="checkbox"/> Coil Coating | 23. <input type="checkbox"/> Pharmaceuticals |
| 7. <input type="checkbox"/> Copper Forming | 24. <input type="checkbox"/> Photographic Supplies |
| 8. <input type="checkbox"/> Electric & Elect. Components | 25. <input type="checkbox"/> Plastic & Synthetic Materials |
| 9. <input type="checkbox"/> Electroplating | 26. <input type="checkbox"/> Plastics Processing |
| 10. <input type="checkbox"/> Explosives Manufacturing | 27. <input type="checkbox"/> Porcelain Enamel |
| 11. <input type="checkbox"/> Foundries | 28. <input type="checkbox"/> Printing & Publishing |
| 12. <input type="checkbox"/> Gum & Wood Chemicals | 29. <input type="checkbox"/> Pulp & Paper |
| 13. <input type="checkbox"/> Inorganic Material | 30. <input type="checkbox"/> Rubber |
| 14. <input type="checkbox"/> Iron & Steel | 31. <input type="checkbox"/> Soaps & Detergents |
| 15. <input type="checkbox"/> Leather Tanning & Finishing | 32. <input type="checkbox"/> Steam Electric |
| 16. <input type="checkbox"/> Mechanical Products | 33. <input type="checkbox"/> Textile Mills |
| 17. <input type="checkbox"/> Nonferrous Metals | 34. <input type="checkbox"/> Timber |

2. Pretreatment devices or processes used for treating wastewater or sludge (check as many as appropriate):

- Air flotation
- Centrifuge
- Chemical Precipitation
- Chlorination
- Cyclone
- Filtration
- Flow Equalization
- Oil/water separator, type _____ size _____
- Grease interceptor, type _____ size _____
- Grease trap(s), number(s) _____ type _____ size(s) _____
- Grit Removal
- Ion Exchange
- Neutralization, pH correction
- Ozonation
- Reverse Osmosis
- Screen
- Sedimentation
- Septic tank
- Solvent separation
- Spill protection
- Sump or clarifier
- Biological treatment, type _____
- Rainwater diversion or storage _____
- Other chemical treatment, type _____
- Other physical treatment, type _____
- Other, type _____
- No pretreatment provided

3. If any wastewater analyses have been performed on the wastewater discharge(s) from your facility, attach a copy of the most recent data to this questionnaire. Be sure to include the date of the analysis, name of laboratory performing the analysis, and location(s) from which sample(s) were taken (attach sketches, plans, etc., as necessary).

4. Priority Pollutant Information: On pages 7-9 of this application, indicate by placing an “x” in the appropriate box by each listed chemical whether it is “Suspected to be Absent”, “Known to be Absent”, “Suspected to be Present”, or “Known to be Present” in your manufacturing or service activity or generated as a by-product. If you are unable to identify the chemical constituents of products you use that discharge in your wastewater, attach copies of the materials safety data sheets for such products.

SECTION D – PLOT/PLUMBING PLAN

Provide a copy of a plot/plumbing plan in the format described in Attachment A. If no professional drawing exists, a hand drawn copy is acceptable. A blueprint of the facility showing the required information may also be attached. This is NOT required for renewal applications unless specifically requested by the District.

SECTION E – SIGNATORY

NOTE TO SIGNING OFFICIAL: In accordance with Title 40 of the Code of Federal Regulations Part 403, Section 403.14, information and data provided in this questionnaire, which identifies the nature and frequency of DISCHARGE, shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed by procedures specified in 40 CFR, Part 2. Should a discharge permit be required for your facility, the information from on-site inspection(s) and in this questionnaire will be used to issue the permit.

This is to be signed by an authorized official of your firm after adequate completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

I acknowledge upon issuance of a Wastewater Discharge Permit the District will assess a bimonthly fee on the customer of record's water/sewer bill in accordance with the District's Fee Schedule (AR 11010-Attachment A). Fees are subject to change.

Date

Signature of Owner or Official

PRIORITY POLLUTANT INFORMATION

Mark all the chemicals that are "known or suspected to be present" or "known or suspected to be absent" in your manufacturing or service activity or generated as a by-product

| Chemical Compound | Known Present | Suspect Present | Known Absent | Suspect Absent | Known/Suspected Concentration/Day |
|--------------------------|----------------------|------------------------|---------------------|-----------------------|--|
|--------------------------|----------------------|------------------------|---------------------|-----------------------|--|

METALS AND INORGANICS

| | | | | | |
|--------------|--|--|--|--|--|
| 1. Antimony | | | | | |
| 2. Arsenic | | | | | |
| 3. Asbestos | | | | | |
| 4. Beryllium | | | | | |
| 5. Cadmium | | | | | |
| 6. Chromium | | | | | |
| 7. Copper | | | | | |
| 8. Cyanide | | | | | |
| 9. Lead | | | | | |
| 10. Mercury | | | | | |
| 11. Nickel | | | | | |
| 12. Selenium | | | | | |
| 13. Silver | | | | | |
| 14. Thallium | | | | | |
| 15. Zinc | | | | | |

PHENOLS AND CRESOLS

| | | | | | |
|-----------------------------|--|--|--|--|--|
| 16. Phenol (s) | | | | | |
| 17. Phenol, 2-chloro | | | | | |
| 18. Phenol, 2,4-dichloro | | | | | |
| 19. Phenol, 2,4,6-trichloro | | | | | |
| 20. Phenol, pentachloro | | | | | |
| 21. Phenol, 2-nitro | | | | | |
| 22. Phenol, 4-nitro | | | | | |
| 23. Phenol, 2,4-dinitro | | | | | |
| 24. Phenol, 2,4-dimethyl | | | | | |
| 25. m-Cresol, p-chloro | | | | | |
| 26. o-cresol, 4,6-dinitro | | | | | |

MONOCYCLIC AROMATICS (EXCLUDING PHENOLS, CRESOLS, PHTHALATES)

| | | | | | |
|------------------------------|--|--|--|--|--|
| 27. Benzene | | | | | |
| 28. Benzene, chloro | | | | | |
| 29. Benzene, 1,2-dichloro | | | | | |
| 30. Benzene, 1,3-dichloro | | | | | |
| 31. Benzene, 1,4-dichloro | | | | | |
| 32. Benzene, 1,2,4-trichloro | | | | | |
| 33. Benzene, hexachloro | | | | | |
| 34. Benzene, ethyl | | | | | |
| 35. Benzene, nitro | | | | | |
| 36. Toluene | | | | | |
| 37. Toluene, 2,4-dinitro | | | | | |
| 38. Toluene, 2,6-dinitro | | | | | |

| Chemical Compound | Known Present | Suspect Present | Known Absent | Suspect Absent | Known/Suspected Concentration/Day |
|-------------------|---------------|-----------------|--------------|----------------|-----------------------------------|
|-------------------|---------------|-----------------|--------------|----------------|-----------------------------------|

PCBs & RELATED COMPOUNDS

| | | | | | |
|----------------------------------|--|--|--|--|--|
| 39. PCB - 1016 | | | | | |
| 40. PCB-1221 | | | | | |
| 41. PCB-1232 | | | | | |
| 42. PCB-1242 | | | | | |
| 43. PCB-1248 | | | | | |
| 44. PCB-1254 | | | | | |
| 45. PCB-1260 | | | | | |
| 46. 2-chloronaphthalene | | | | | |
| 47. Ether, bis(chloromethyl) | | | | | |
| 48. Ether, bis(2-chloroethyl) | | | | | |
| 49. Ether, bis(2-chlorisopropyl) | | | | | |
| 50. Ether, 2-chloroethyl vinyl | | | | | |
| 51. Ether, 4-bromophenyl phenyl | | | | | |
| 52. Ether, 4-chlorophenyl phenyl | | | | | |
| 53. Bis(2-chloroethoxy)methane | | | | | |

NITROSAMINES & OTHER NITROGEN-CONTAINING COMPOUNDS

| | | | | | |
|------------------------------|--|--|--|--|--|
| 54. Nitrosamine, dimethyl | | | | | |
| 55. Nitrosamine, diphenyl | | | | | |
| 56. Nitrosamine, di-n-phenyl | | | | | |
| 57. Benzidine | | | | | |
| 58. Benzidine, 3,3'-dichloro | | | | | |
| 59. Hydrazine, 1,2-diphenyl | | | | | |
| 60. Acrylonitrile | | | | | |

HALOGENATED ALIPHATICS

| | | | | | |
|---------------------------------|--|--|--|--|--|
| 61. Methane, bromo | | | | | |
| 62. Methane, chloro | | | | | |
| 63. Methane, dichloro | | | | | |
| 64. Methane, chlorodibromo | | | | | |
| 65. Methane, dichlorobromo | | | | | |
| 66. Methane, tribromo | | | | | |
| 67. Methane, trichloro | | | | | |
| 68. Methane, tetrachloro | | | | | |
| 69. Methane, trichlorofluoro | | | | | |
| 70. Methane, dichlorodifluoro | | | | | |
| 71. Ethane, 1,1-dichloro | | | | | |
| 72. Ethane, 1,2-dichloro | | | | | |
| 73. Ethane, 1,1,1-trichloro | | | | | |
| 74. Ethane, 1,1,2-trichloro | | | | | |
| 75. Ethane, 1,1,2,2-tetrachloro | | | | | |
| 76. Ethane, hexachloro | | | | | |
| 77. Ethene, chloro | | | | | |
| 78. Ethene, 1,1-dichloro | | | | | |
| 79. Ethene, trans-dichloro | | | | | |
| 80. Ethene, trichloro | | | | | |
| 81. Ethene, tetrachloro | | | | | |
| 82. Propane, 1,2-dichloro | | | | | |
| 83. Ethene, 2,4-dichloro | | | | | |
| 84. Butadiene, hexachloro | | | | | |

| Chemical Compound | Known Present | Suspect Present | Known Absent | Suspect Absent | Known/Suspected Concentration/Day |
|-------------------|---------------|-----------------|--------------|----------------|-----------------------------------|
|-------------------|---------------|-----------------|--------------|----------------|-----------------------------------|

PHTHALATES

| | | | | | |
|----------------------------------|--|--|--|--|--|
| 86. Phthalate, di-n-methyl | | | | | |
| 87. Phthalate, di-n-ethyl | | | | | |
| 88. Phthalate, di-n-butyl | | | | | |
| 89. Phthalate, di-n-octyl | | | | | |
| 90. Phthalate, bis(2-ethylhexyl) | | | | | |
| 91. Phthalate, butyl benzyl | | | | | |

POLYCYCLIC AROMATIC HYDROCARBONS

| | | | | | |
|-------------------------------|--|--|--|--|--|
| 92. Acenaphthene | | | | | |
| 93. Acenaphthylene | | | | | |
| 94. Anthracene | | | | | |
| 95. Benzo (a) anthracene | | | | | |
| 96. Benzo (b) fluoranthene | | | | | |
| 97. Benzo (k) fluoranthene | | | | | |
| 98. Chrysene | | | | | |
| 99. Dibenzo (a,h) anthracene | | | | | |
| 100. Fluoranthene | | | | | |
| 101. Fluorene | | | | | |
| 102. Indeno (1,2,3-cd) pyrene | | | | | |
| 103. Naphthalene | | | | | |
| 104. Phenanthrene | | | | | |
| 105. Pyrene | | | | | |

PESTICIDES

| | | | | | |
|-----------------------------|--|--|--|--|--|
| 106. Acrolein | | | | | |
| 107. Aldrin | | | | | |
| 108. BHC (alpha) | | | | | |
| 109. BHC (beta) | | | | | |
| 110. BHC (gamma) or Lindane | | | | | |
| 111. BHC (delta) | | | | | |
| 112. Chlordane | | | | | |
| 113. DDD | | | | | |
| 114. DDE | | | | | |
| 115. DDT | | | | | |
| 116. Dieldrin | | | | | |
| 117. Endosulfan (alpha) | | | | | |
| 118. Endosulfan (beta) | | | | | |
| 119. Endosulfan sulfate | | | | | |
| 120. Endrin | | | | | |
| 121. Endrin aldehyde | | | | | |
| 122. Heptachlor | | | | | |
| 123. Heptachlor epoxide | | | | | |
| 124. Isophrone | | | | | |
| 125. TCDD or Dioxin | | | | | |
| 126. Toxaphene | | | | | |

AR 6021 Industrial Pretreatment Program

Approved: December 12, 2006
Revised: February 25, 2009
Revised: October 7, 2016
Revised: January 16, 2019

In accordance with BP 6010, the District has established and maintains an Industrial Pretreatment Program that complies with applicable state and federal wastewater discharge requirements and regulations.

A copy of the Industrial Pretreatment and Pollution Prevention Program is available upon request from the Environmental Division.