***APPENDIX A***

***INSTRUCTIONS AND GUIDELINES***

***Please note that the Instructions and Guidelines do not need to be submitted with your completed application.***

**SECTION A – GENERAL BUSINESS INFORMATION**

***Item A-1***

Applicant Corporation Name – *Enter the name of the parent corporation of the facility.*

Applicant Facility Name – *If the facility does business under a name different than the Corporation Name, enter it here.*

Address of Facility Discharging Wastewater – *Enter the full street address of the applicant building or site and the main phone number for the site. If the site is new and does not yet have an address, describe its location and indicate that the phone number has not been obtained yet. You are required to provide the address and phone number(s) to Metro once they are established.*

Business mailing address – *Enter the full mailing address for the company, if different from actual facility site.*

***Item A-2***

Company Owner/President/CEO Information – *Enter all specified contact information for the company’s President or CEO. This person may have a corporate address separate from the local facility contact.*

***Item A-3***

Authorized Representative Information - *Enter all specified contact information for the local facility contact in charge of day-to-day business operations at the facility (eg. Plant Manager).*

Other Facility Contact – *Enter other authorized personnel as necessary; if this contact is the primary pretreatment contact, please indicate.*

***Item A-4***

Pertinent Identification Numbers and Permit Information–

*The Standard Industrial Classification (SIC) is the code number that is listed on your business license and tax documentation.*

*The Water Supply/Sewer Agency Name & Account Numbers that appear on your water and sewer bills must be listed.*

*For Other Environmental Control Permits – Check the box next to appropriate permit type (Air, NPDES, etc.) and list the corresponding issuing agency and your permit number on the line next to each. The types and corresponding permit numbers must be listed for all environmental permits that have been issued to you for the applicant site/facility.*

***Hazardous Waste Information*** *– If you generate and/or dispose of any type of hazardous wastes at your site, you must address each question in this section. If you are unsure whether you generate or dispose of hazardous substances at your facility, contact the Colorado Department of Public Health and Environment Hazardous Materials and Waste Management Division at 303-692-3415 or 303-692-3386. Additionally, industrial users that discharge hazardous wastes to Publicly Owned Treatment Works (POTWs) are required to provide written notification to the EPA Regional Waste Management Division Director and the State hazardous waste authorities in accordance with the policy found below:*

### Hazardous Waste Notification – 40CFR 403.12(p)(1-4)

### Within 180 calendar days of a discharge to the POTW of a substance, which, if otherwise disposed of, would be a hazardous waste under 40CFR part 261, the Industrial User shall notify the Industrial Pretreatment Division, the EPA Regional Waste Management Division, and the State Hazardous Waste Management Division in writing of all discharges of listed hazardous wastes and characteristic hazardous wastes discharged above 15 kg (~33.1 lb)in any calendar month. Such notification must include the name of the hazardous waste as set forth in 40CFR 261, the EPA hazardous waste number, and the type of discharge.

If the Industrial User discharges more than 100 kg (~220.5 lb) of hazardous waste per calendar month to the sewer, the notification shall also contain the following:

An identification of the hazardous constituents contained in the waste.

An estimation of the mass and concentration of such constituents in the waste stream discharged during the previous calendar month.

An estimation of the mass of constituents in the waste stream expected to be discharged during the following twelve (12) months.

Any notification under this section needs to be submitted only once for each hazardous waste discharged. Subsequent months in which the Industrial User discharges more than such quantities of any hazardous waste do not require additional notification. In the case of any new regulations under Section 3001 of the Resource Conservation and Recovery Act (RCRA) identifying additional characteristics of hazardous waste or listing any additional substance as hazardous waste, the Industrial User must notify the agencies listed above of the discharge of such substance within 90 calendar days of the effective date of the new regulations. Any notification made pursuant to this section shall also contain certification that a program is in place to reduce the volume and toxicity of the generated hazardous wastes to the degree it has determined to be economically practical.

**Agencies to notify are as follows:**

REGION VIII

Director, Hazardous Waste Management Division,

Environmental Protection Agency

One Denver Place

999 18th Street, Suite 500

Denver, CO 80202-2405

STATE POTW

Director, Waste Management Division Metro Water Recovery

Colorado Department of Health 6450 York Street

4300 Cherry Creek Drive South Denver, CO 80229

Denver, CO 80222-1530

**SECTION B – GENERAL BUSINESS OPERATIONS INFORMATION**

***Item B-1***

Primary Manufacturing Operation or Business Activities at Facility

*Provide a detailed narrative description of all manufacturing and/or service activities that are performed at your facility. Activities include but are not limited to manufacturing operations, processing, commercial (retail, medical, repair, etc.), warehousing, receiving, sales, treatment of off-site wastes, remediation, etc*.

***Item B-2***

Principal Products/Services

*Indicate the average and maximum quantities produced/handled/processed/services performed each day, month, or year. If you are estimating these numbers, explain the basis used for each estimate.*

*Some examples include: For a hospital or other medical facility, list the daily (or yearly) average and daily (or yearly) maximum number of patients treated at your facility. For a metal finishing facility, list the number of finished parts (average and maximum) that leave the facility on a daily or yearly basis. For various manufacturers, list the number of each type of product sold (average and maximum) on a daily or yearly basis.*

***Item B-3***

Hours/Days of Normal Operation

Number of Operating Days Per Year - *Based on a review of your business/production records, enter the average and maximum number of days that your facility operates (or plans to operate if a new facility – specify basis for this type of answer) each year.*

*Example)*

*If your business has been operating for 5 years and the number of operating days each year were 100, 220, 300, 275, and 250 for years 1-5, respectively, then the average is 229 and the maximum is 300.*

Normal Days of Operation – *Specify the days of the week that your facility normally operates by checking the appropriate box(es).*

Normal Hours of Operation *– Specify the normal hours of operation that your facility normally operates each day of the week on each shift, as well as the average number of employees on each shift. If hours of operation and hours of wastewater discharge are not the same, please specify both sets of hours for each shift.*

Number of Employees- *Specify the total number of people employed at your facility.*

Discharge Information *– Answer all questions regarding the frequency and type(s) of wastewater discharged at your facility each day. Industrial/Commercial wastewater for purposes of this application is* ***any*** *non-domestic (toilets, sinks, showers, etc.) wastewater discharge to the sanitary sewer. This may include utility system water (boiler blowdown, air compressor condensate, etc.), wash waters, rinse waters, etc. Industrial/commercial wastewater* ***includes but is not limited to*** *categorical process wastewater. If you have any questions on what constitutes industrial/commercial wastewater, contact the Metro Rep listed on page 1 of the application.*

**SECTION C – FACILITY INFORMATION**

***Item C-1***

Facility Information -- Some information may require that **you** contact the appropriate City Utilities or Public Works Department.

*Sanitary Sewer Outfalls- Sanitary sewer outfalls are the location where your facility’s sanitary sewer piping ties into Metro sewer system. For each outfall that your facility has, fill out the information in 1.0.*

*Floor Drains- For all floor drains and trenches that are located in your facility, complete all of the information requested in 2.0.*

*Floor Drain Number – Assign a number (1,2,3,4, etc.) to each floor drain. This is the number that identifies each floor drain for the remainder of this application and in your Permit.*

*To Which Sanitary Sewer Outfall Does This Floor Drain Discharge?* ***If you do not possess accurate drawings or plans of your facility’s sewer piping, you may need to perform dye testing of the lines in order to determine which sanitary sewer outfall that each drain discharges to.*** *If a drain does not discharge to the sanitary sewer, specify where the drain discharges to (i.e., waste treatment tank 1, etc.)*

Sinks- *For all sinks and floor sinks that are located in your facility, complete all of the information requested in 3.0.*

*Sink Number – Assign a number (1,2,3,4, etc.) to each sink. This is the number that identifies each sink for the remainder of this application and in your Permit.*

***If you discharge any industrial or commercial wastes to any sink, you will be required to specify which sanitary sewer outfall that the affected sink(s) discharge to. If you do not possess accurate drawings or plans of your facility’s sewer piping, you may need to perform dye testing of the lines in order to determine which sanitary sewer outfall that the sink(s) discharge to.*** *If a sink does not discharge to the sanitary sewer, specify where the drain discharges to (i.e., waste treatment tank 1, etc.)*

*General Facility Information – This section includes general questions regarding building configuration and floor drain locations.*

***Item C-2*– SITE AND FACILITY LAYOUT**

The *Site Layout* is a simple drawing of the outside aerial view of the entire property that shows the property lines, nearest main roads, and all buildings comprising the facility premises. If an outside monitoring point, storm drains, and sewer manholes are on site, include those as well.

The *Facility Layout* is a floor plan of the interior of each building comprising the facility (it may be necessary to submit more than one Facility Layout or include it on multiple pages, especially for large or complex facilities). The Facility Layout supplements the information presented in the Process Flow Diagram (Section I) by locating each process or activity in a geographical setting. **SUBMISSION OF THE SITE LAYOUT IS A REQUIREMENT FOR ALL FACILITIES.** If drawn to scale (**not required**), specify the scale used (i.e. 1 in. = 10 ft., etc.)

**SECTION D – PROCESS INFORMATION (SUPPLY)**

***Raw Materials and Chemicals Used at the Facility/Site***

*All raw materials and chemicals used at your facility must be identified and all information specified for each material or chemical must be provided. If your facility maintains raw material/chemical information via database, spreadsheet, or some other legible means, this can be submitted in lieu of the table as long as all of the specified information is included.*

*The* ***Raw Material Number*** *shown in Column 1 will be used to identify the corresponding raw material (that you list in the boxes in Column 2) throughout this application and in your Permit. A simple way to assign the raw material numbers is to go in numerical order down Column 1 and assign each raw material a number (i.e., RM-1, RM-2, RM-3, etc.).*

*Raw materials include all substances, materials, and chemicals that are utilized in any manner at your facility. Some examples of raw materials include, but are not limited to the following:*

*-pH adjustment chemicals (caustic or other bases, acids)*

*-water/wastewater treatment chemicals (flocculants/settling aids, acids and bases, filtration aids)*

*-raw metal stock – including steel, iron, aluminum sheets and tubing, etc. utilized for metal forming and finishing operations.*

*-raw plastic stock – including plastic pellets or powders utilized for plastic forming and related processes.*

*-liquid and powdered paints*

*-lacquer thinner, mineral spirits*

*-boiler and cooling tower water treatment/maintenance chemicals*

*-phosphate, chromate, or anodizing coating chemicals; or any other type of plating or etching chemicals*

*-equipment and facility disinfectant/sanitizing chemicals*

*-cutting and grinding fluids*

*-hydraulic and motor oils and any other type of equipment lubrication fluids*

*-x-ray processing, photo developing, or printing solutions*

*-aqueous or other type of parts-washer/degreaser fluid*

*-granular or powdered activated carbon*

*-stock syrup or other concentrates (i.e. For beverage bottlers, or similar.)*

*-medical lab chemicals (i.e. Xylenes, formalin solutions, glutaraldehydes, etc.)*

*-floor stripping/cleaning chemicals*

*-any chemicals used in a manufacturing process, including bulk intermediates*

*-metal surface preparation/finishing aids (i.e. Vibratory finishing soaps, etc.)*

*-water*

Are Any Components Listed on Enclosed TTO List -

*For each raw material that you identify in Section D, you are required to review the MSDS information for each material to determine if any of the constituents in your materials are listed in the TTO list. (Refer to Page 21 of the Application for TTO list). If the MSDS information does not provide detailed compositional information, you must contact the manufacturer to obtain the compositional information****. If you are unable to obtain the compositional information from the manufacturer, you may be required to perform TTO analyses for all raw materials for which you lack the information.***

Specific Purpose or Use at Facility-

*Provide a brief description of how each raw material is used at your facility.*

Daily Quantity Used-

*For each raw material, the daily average and daily maximum amounts used must be listed. Liquid quantities must be reported in gallons (gal); solid quantities in pounds (lbs). If any of the amounts that you list are estimated, indicate this by including an ‘E’ next to your quantity; for those that are measured, indicate this by including an ‘M’ next to your listed quantity.*

What Size Container is the Material Stored In-

*The working volume refers to the raw material that is in use, or ready-for-use at your facility. Examples include one gallon jugs, 5-gallon buckets, 300-gallon totes or drums, 5,000-gallon tanks, 10,000-gallon silos, etc.*

List All Areas Where This Material is Used/Stored at the Facility-

*Provide a brief listing of all areas where each raw material is used and/or stored at your facility.*

**SECTION E – PROCESS INFORMATION (ACTIVITY DESCRIPTIONS)**

***Item E-1 Process and Operational Activity Descriptions –***

*For each Operation/Activity/Product/Service listed in Item B-2, you must provide a detailed, written narative description. At a minimum, the description must include the following:*

*A specific explanation of the process/activity;*

* + *Identify how all raw materials and bulk chemicals are received at the facility and how they are stored*
  + *How are raw materials transported to the process/activity area?* 
    - *Specify whether each material is transported in drums via forklift, or manually in drums via drum mover, or in boxes on a pallet via pallet jack, etc.*
  + *How are raw materials added/used in the process?*
    - *Specify the exact means for adding/using each material. (i.e. automatically injected via peristaltic pump from a drum directly into Tank A; or injected via manual drum pump from a drum directly into Tank A; or manually poured into the tank using a funnel, etc.)*
  + *Identify all* ***major*** *pieces of equipment that are used;* 
    - *Major equipment is typically considered to be all tanks, vessels, pumps, compressors, boilers, cooling towers, chillers, filtration equipment, paint booths, automated conveyance systems, process units (i.e. Phosphate coating system; powder coating booth, etc.), etc.*
  + *How often the process/activity is operated/performed (# days/week and # hrs/day)?*
  + *Whether the process/activity is performed as a batch or continuous operation?*
    - *Specify whether each process/activity is performed as individual finite events (batch), or as a continuous operation (operates continuously, without interruption for the duration of your entire business day).*
  + *The purpose of the process/activity within the facility – identify the products or results of performing the process/activity;*
    - *Provide an explanation of why the process/activity is performed at your facility – what is the end product or result from the process/activity?*

**SECTION F – PROCESS INFORMATION (WASTES & PRODUCTS)**

***Item F-1- Liquid and Solid Industrial/Commercial Wastes Generated at the Facility/Site***

*All liquid and solid wastes, except domestic wastes, that are generated at your facility must be identified and all information specified in F-1a and F-1b for each waste must be provided. If your facility maintains waste information via database, spreadsheet, or some other legible means, this can be submitted in lieu of the table in F-1 as long as all of the specified information is included.*

*The* ***Waste Identification Number*** *shown in Column 1 will be used to identify the corresponding wastes (that you list in the boxes in Column 2) throughout this application and in your Permit. A simple way to assign the waste identification numbers is to go in numerical order down Column 1 and assign each waste a number (i.e., W-1, W-2, W-3, etc.).*

*Wastes include, but are not limited to the following:*

*-x-ray, photo developing, or printing wastes*

*-boiler, cooling tower, or scrubber blow down*

*-compressor condensate*

*-wastes from any water or wastewater treatment processes (including sludges or grit collected)*

*-spent filtration media (activated carbon, ion exchange columns, reverse osmosis or other type of membranes, filter cartridges or bags, etc.)*

*-filter backwash wastewaters*

*-spent cutting and grinding fluids*

*-waste hydraulic, motor, or other lubricating oils*

*-waste parts washing/degreasing solvents*

*-contact and non-contact cooling water*

*-evaporator or distillation column concentrate*

*-wastewaters generated as a result of maintenance activities (ie. Cleaning of air stripper media or oil/water separator coalescing plates; cleaning of boiler tubes, etc.)*

*-red bag wastes (human and/or animal tissues, blood, etc.)*

*-waste paints and lacquer thinners*

*-expired chemicals or other substances*

*-off-spec products*

*-floor washdown and facility washdown wastewaters*

*-tank/vessel or other equipment clean-out residuals and wastewaters*

*-wastewater from vehicle engine steam cleaning*

*-wastes from radiator repair work*

*-wastes generated as a result of fleet (vehicle) maintenance*

*-solvent-soaked rags or sponges*

*-spent testing water*

*For each waste, the daily average and daily maximum amounts generated must be listed. Liquid quantities must be reported in gallons (gal); solid quantities in pounds (lbs). If any of the amounts that you list are estimated, indicate this by including an ‘E’ next to your quantity; for those that are measured, indicate this by including an ‘M’ next to your listed quantity.*

*For each waste, indicate the means for disposal/discharge, the name of the Hauler/Disposal Co. if it is transported off-site for disposal, and the frequency of disposal for each hauled waste.*

***Item F-2- Sanitary Sewer Discharge Information***

*For those wastes listed in Item F-1 that are indicated as being discharged to the sanitary sewer (SS), the information requested in F-2 must be provided. If your facility maintains raw this specific information via database, spreadsheet, or some other legible means, this can be submitted in lieu of the table in F-2 as long as all of the specified information is included.*

*For each waste, identify the process or activity that generated the waste (i.e., phosphating coating, boiler blow down, spent testing water, etc.).*

Type of Pretreatment Process, if Any

*For each waste stream, identify any pretreatment processes that are utilized (or plan to utilize for a new facility). Some examples include:*

*-evaporation or distillation*

*-equalization*

*-pH adjustment*

*-filtration (via passing through a bag filter, etc.)*

*-oil/water separation (coalescing or other type)*

*-DAF*

*-precipitation/flocculation*

*-sand, dolomite filtration*

Type and Frequency of Discharge

*For each waste stream, indicate whether the discharge is batch (B) or continuous (C) and whether it is discharged daily (d), weekly (w), bi-weekly (bw), monthly (m), bi-monthly (bm) or other (Y)\_\_\_\_\_\_\_\_.*

*For each waste, the daily average and daily maximum amounts generated must be listed. Liquid quantities must be reported in gallons (gal); solid quantities in pounds (lbs). If any of the amounts that you list are estimated, indicate this by including an ‘E’ next to your quantity; for those that are measured, indicate this by including an ‘M’ next to your listed quantity.*

**SECTION G – PROCESS INFORMATION (WASTE STORAGE, HANDLING, & DISPOSAL)**

***Item G-1– Waste Storage, Handling, & Disposal Descriptions***

*Provide a detailed description of the waste storage, handling, and disposal activities for your facility. The following must be specifically addressed in your descriptions:*

* + *How are wastes handled (transported within facility/stored/disposed of)?*

*For each waste stream listed in F-1a, F-1b (and H-3), specify how the waste is collected, where it is stored prior to disposal, and how it is transported from the process/activity area to the storage area, and how it is disposed of.*

**SECTION H *–* WATER BALANCE INFORMATION**

***Item H-1 - Supply***

*The water balance is necessary to demonstrate a direct correlation between the amount of water coming into your site each day and the amount that is discharged. The water balance covers your entire site, both inside and outside of buildings.* ***Item H-1 is specific to the supply side of the water balance – the amount of water coming into your site each day.***

Legible copies of your previous twelve (12) months of water bills must be included with this Application. If you are billed every other month, this would be your previous six (6) bills. The water consumption (usage) information from these water bills will be used in completing the table in H-1.

* For the **second column** of the table, ‘Date Range/Period of Bill’ – enter the specific date range that is applicable to each bill. This date range should be listed on each bill.
* For the **third column** of the table, ‘Volume/Flow reported on Bill’ – enter the water consumption (usage) specified on each bill. Ensure that the applicable volume/flow units are included in the table (i.e. gallons, liters, etc.)
* For the **fourth column** of the table, ‘Volume/Flow (gal/day)’ – using the water consumption values from the second column, determine your water consumption for each bill in gallons per day (gal/day). This is a simple unit conversion. An example calculation is provided below for reference.

Example: A water bill for the period of January 1, 2020 – March 31, 2020 indicates a consumption of 2,100,000 gallons for the entire period.

* 1. The period *January 1, 2020 – March 31, 2020* is entered in column 2 of the table.
  2. The specified consumption value, *2,100,000 gallons* is entered in column 3 of the table.
  3. Determine the number of **operating** days (not calendar days) in the billing period. For example, a facility operating Monday – Friday would have *65 operating days* in this billing period.
  4. Divide the consumption value by the number of days to obtain the gal/day: 2,100,000 gal/65 days = 32,308 gal/day. The *32,308 gal/day* is entered in column 4 of the table.

***Item H-2 – Discharge***

*Item H-2 is specific to the discharge (wastewater) side of the water balance – the amount of water discharged to the sanitary sewer from your site each day. All of the wastewater generated at your site should be included as a waste in Item F-1.*

**FOR THIS SECTION, YOU MUST USE THE FLOW INFORMATION FROM YOUR LAST (4) COMPLIANCE REPORTS (if you submit quarterly) or LAST (12) COMPLIANCE REPORTS (if you submit monthly), FOR A TOTAL OF ONE (1) YEAR’S WORTH OF FLOW DATA. *For each report, enter the dates of the report period (in the first column) and the total monthly and daily average flows that were reported for each month of the reporting period (in the second column).***

***Item H-3*** *–* ***Water Balance Summary***

***The purpose of this section is to summarize and compare the information that you have supplied for the Water Supply and Discharge tables to create a Water Balance. If all water coming in and all water going out is properly accounted for, the water will balance out. All incoming water needs to be accounted for – even if it is not discharged to the sanitary sewer.***

Water Consumption-

*Each process that uses or consumes water should be listed in a separate line of Column 1 in this section, along with total volumes and/or flow in gallons per day (gpd) in Column 2. Indicate if these volumes are measured with an ‘M’ or estimated with an ‘E’ in Column 3. These lines may be edited or customized for your specific business operations. Additional lines may be added as necessary so that each process is accounted for. When complete, the summation of the flow rates of each process should equal the yellow cell in H-1. If it does not, you are not properly accounting for all of the water your facility consumes in a given month or given day.*

Discharge to Sanitary Sewer-

*All processes, activities, equipment, etc. that generate wastewater which is eventually discharged to the sanitary sewer are to be listed in Column 4. Nearly every facility will have domestic discharge, unless there are no sinks or toilets at the facility.* ***Only*** *list water that is discharged to the sewer in Column 4; if wastewater is lost to evaporation, stored in drums and hauled off site, and/or consumed in production or ends up in the final manufactured product, this will be accounted for in a separate section of the table.*

*As with Water Consumption, list total volumes/flow rates of discharge for each process in gallons per day (gpd) in Column 5. Indicate if they are Measured with an ‘M’ or Estimated with an ‘E’ in Column 6. When complete, the summation of the flow rates of each process should equal the yellow cell in H-2. If it does not, you are not properly accounting for all of the water your facility discharges in a given month or given day.*

*For* ***domestic water usage/discharge****, utilize the Uniform Plumbing Code estimates listed below for developing estimates of domestic wastewater discharge for your facility:*

*\*****Field Service Employees: ~5 gallons per employee per day***

***\*Office Employees: ~ 20 gallons per employee per day***

***\*Production Employees: ~25 gallons per employee per day***

***\*Production Employees with showers: ~35 gallons per employee per day***

Water Losses (green cells)-

*For many facilities, not all water coming into the facility is discharged to the sanitary sewer. This may be because water is used for irrigation and landscaping (especially in the summer months), water may end up in the final product (beverage manufacturing), water may be evaporated, and/or it may be hauled off-site by a waste hauling company. List all the sources of* ***Water Loss*** *at your facility in the rows on the far right side of the table (green cells), underneath “****Total to Sewer.”*** *These lines may be edited or customized for your specific business operations. Additional lines may be added as necessary.*

Water Balance (blue cell)-

*If all water is properly accounted for, the summation of all water discharged to the sanitary sewer and all water losses should equal the volume stated in “****Total Water Used”*** *(yellow cell in H-1) and noted in the blue cell in Column 5. If for some reason they are not equal, a written explanation of the discrepancy must be submitted with the application.*

**SECTION I – PROCESS FLOW DIAGRAM**

The *Process Flow Diagram* is a simple line drawing, or schematic, that illustrates the nature and flow of your facility’s operations/activities. For the purposes of this Permit Application, special emphasis is placed on the processes that generate wastewater and any associated treatment systems. **SUBMISSION OF A PROCESS FLOW DIAGRAM IS A REQUIREMENT FOR ALL FACILITIES.** Multiple diagrams be submitted if the nature of the operations at your facility is better suited to multiple process flows – this may be the case for complex facilities with several process lines.

The Diagram(s) must be legible and must be on paper that is no smaller than 8 x 11 inches and no larger than 11 x 17 inches. At a minimum, Diagram(s) must include the following:

* Each manufacturing process or activity at your facility, including all raw materials; all liquid wastes; all solid wastes; and all processes represented and described in Items D-1, E-1, F-1a, F-1b, G-1, and water from H-3 must be shown on the diagram. If the raw materials and waste streams were assigned numbers in Items D-1 and F-1, the must be clearly labeled on the Process Flow Diagram.
* Processes should be sequential and flow from beginning to end, beginning with raw materials receiving and concluding with final product shipping.
* A sub-schematic of each pretreatment process, showing all treatment tanks, pumps, piping, and control features.
* Discharge points for each waste listed in Item F-1a, F-1b, and G-1, including water from H-3.
* Input/feed points for each raw material listed in Item D-1, including water from H-3.
* Monitoring Point(s)/Sampling Location – indicate the location(s) of all existing monitoring points and your proposed monitoring point/sampling location(s) for any new processes that you plan to operate within the next 1 year.

Diagrams for large or complex facilities may require more than one page.

**SECTION J - ANALYTICAL DATA (WASTEWATER CHARACTERISTICS)**

All instructions necessary for completing this portion of the Application are included in Section J; therefore, no additional instructions are provided. If additional guidance is required, please contact the Pretreatment contact at the phone number or email listed on the cover page of the Application.

**SECTION K – OTHER REQUIRED INFORMATION**

If other information about your facility is needed to supplement the Application, it will be listed in this section. Examples include but are not limited to a copy of your current Spill Prevention and Control Plan, Best Management Practices (BMPs), and/or the status of any enforcement actions. ***Please review these documents/plans prior to submittal -*** if any of the documents requested are no longer accurate, you will need to provide updated copies with your Permit Application for approval by Metro.

**SECTION L – SIGNATORY REQUIREMENTS**

All instructions necessary for completing this portion of the Application are included in Section L; therefore, no additional instructions are provided. If additional guidance is required, please contact the Pretreatment contact at the phone number or email listed on the cover page of the Application.