

Middlesex County Utilities Authority

Application for a Non-Domestic Wastewater Discharge

General Instruction and Information

1. The Application form must be completed and returned within 60 days.
2. The Middlesex County Utilities Authority (MCUA) has the authority to require the submission of information pursuant to the following statutes and regulations:
 - 2.1 “Pretreatment Standards for Sewerage”, N.J.S.A. 58:11-49 et seq.
 - 2.2 “Spill Compensation and Control Act”, N.J.S.A 58:1-23.11 et seq.
 - 2.3 “Solid Waste Management Act”, N.J.S.A. 13-1E-1 et seq.
 - 2.4 “Sewerage Authorities Act”, N.J.S.A. 40-14A-1 et seq.
 - 2.5 “Municipal Utilities Act”, N.J.S.A 40-14B-1 et seq.
 - 2.6 “Regulations Concerning the New Jersey Pollutant Discharge Elimination System”, N.J.A.C 7:14A-1.1 et seq.
 - 2.7 New Jersey “Water Pollution Control Act”, N.J.S.A. 58:10A-1 et seq.
3. If you do not know the formulation of trade name chemicals used in your plant operations, make reasonable inquiries of your supplier or the manufacturer to ascertain whether the material contains any toxic or hazardous substances. For example, Tri-Clene, a solvent, is a trade name for Trichloroethylene, which is a priority pollutant.
4. Please give your answer in terms of the units specified in the forms (i.e., tons per year, gallons per day, etc.). If sections do not pertain, mark “N/A”- Not Applicable.
5. If information needed to complete a section is not readily available, provide a written explanation Describing the nature of the operations involved and the reasons for not supplying data and a schedule for supplying the information.
6. Sampling **is** required for this application.
7. **CONFIDENTIAL BUSINESS INFORMATION**

If any questions on the non-domestic discharge preliminary survey require information, which is (or would lead a knowledgeable reader to deduce from it) a trade secret, proprietary business information or information related to national security, you may make a “confidentiality claim”.

Information for which a confidentiality claim has been asserted will be treated by the Middlesex County Utilities Authority as entitled to confidential treatment as provided in Section 11.5 of the New Jersey Pollutant Discharge Elimination System (NJDES) Regulations, N.J.A.C. 7:14A-1.1 et seq.

The MCUA, however, believes that is unlikely that any of the information contained in the Survey is confidential, particularly since information relative to discharges to surface waters and public sewer systems, to underground injection, and to residual waste disposal (i.e., effluent data) will not be interpreted as confidential information. All procedures pertaining to the handling, access to, and/or disclosure of confidential information shall be in accordance with Subchapter 11 of the NJDES Regulations, N.J.A.C. 7:14A-1.1 et seq.

MIDDLESEX COUNTY UTILITIES AUTHORITY

**APPLICATION FOR
NON-DOMESTIC WASTEWATER DISCHARGE PERMIT**

FACILITY NAME: _____

MIDDLESEX COUNTY UTILITIES AUTHORITY
SAYREVILLE, NEW JERSEY

APPLICATION FOR NON-DOMESTIC WASTEWATER DISCHARGE PERMIT

The following information must be reported. Incomplete applications will be returned. Please print or type. If asserting a confidentiality claim covering any of the information required by this application, go to Section 8.1 of the Middlesex County Rules and Regulations for the procedure to apply for confidentiality.

Requested Permit Action: ___ **New** ___ **Renew** ___ **Modification**

A. GENERAL INFORMATION

Facility Name: _____

Location: _____

_____ Zip Code _____

Mailing Address: _____

_____ Zip Code _____

Parent Company: _____

Mailing Address: _____

_____ Zip Code _____

Primary SIC Code: ___ ___ ___ Description: _____

Secondary SIC Codes: ___ ___ ___ Description: _____

_____ Description: _____

Facility DUNS No.: _ _ _ _ _

Authorized Representative: (See Appendix A)

Name: _____

Title: _____

Address: _____

Telephone: ___ ___ ___ - ___ ___ ___ - ___ ___ ___ Extension: ___ ___ ___

Contact Official:

Name: _____

Title: _____

Address: _____

Telephone: ___ ___ ___ - ___ ___ ___ - ___ ___ ___ Extension: ___ ___ ___

Facsimile: ___ ___ ___ - ___ ___ ___ - ___ ___ ___

B. FACILITY OPERATIONAL CHARACTERISTICS

Discharge Status: _____ Proposed
_____ Existing
_____ Modified

If proposed, date user desires to commence operation: _____ / _____ / _____

If existing or modified, date user commenced operation: _____ / _____ / _____

Brief Description of Product(s) Manufactured or Services Provided

Number of Employees- Full Time: _____ Part Time: _____

C. WATER DATA

1. Raw Water Source(s):	Is it metered?		Yearly amount (gallons)
	Yes	No	
Public Supply	_____	_____	_____
Private Well	_____	_____	_____
Surface Water	_____	_____	_____
Other: _____	_____	_____	_____

If water source is not metered, indicated below the method of determining the volume(s).

2. Water Distribution: Year 20_____ (report volume in gallons/year)

MCUA/ Municipal	
Sanitary Sewer	A: _____
Storm sewer, river or other point	B: _____
Discharge (identity): _____	
Contained in product	C: _____
Evaporation	D: _____
Waster Haulers	E: _____
Other: _____	F: _____
Total:	_____

How were the above volumes determined? _____

D. WASTEWATER DISCHARGE

1. Type of Discharge: Continuous
 Batch

If Continuous:

Average Daily Discharge: _____ gallons per day

Maximum Daily Discharge: _____ gallons per day

If Batch:

Average Number of Batches/24 hours: _____

Average Volume of Batch: _____ gallons

Total Volume per Day : _____ gallons per day

2. Is there a scheduled shutdown? Yes
 No

When? _____

3. The Permit Application shall include:

a. **Facility Diagram** (on an 8 1/2 x 11 inch sheet of paper indicating location of discharge point(s) and compass orientation)

b. **Site Plan / Water Balance** (on an 8 1/2 x 11 inch sheet of paper indicating sanitary lines with flow into each discharge point)

4. Describe seasonal variations, if any, giving dates, volumes, rates, hours, etc. Include variations in product lines that affect waste characteristics:

5. Describe any pretreatment process in use: _____

E. EFFLUENT STANDARDS

1. Does a pretreatment standard promulgated under Section 307 of the Federal Act apply to any discharge this application is made for?

Yes (complete Item E) No (go to Item F)

2. If the pretreatment standard allow for a Toxic Organic Management Plan or any other type of certification statements, submit the aforementioned paperwork with this application.

3. Are the limitations in applicable pretreatment standards expressed in terms of production (or other measures of operation)?

Yes (complete E4) No (go to Item F)

4. If there is an applicable production based pretreatment standard, list production for the preceding three years for each discharge location point. For new sources or if production is likely to vary, estimate production for the next three years of operation.

Year	Quantity Per Day	Units of Measures	Operation, Product, Material, Etc. (Specify)	Associated Wastewater Flow (gpd)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

F. ANALYSIS OF WASTEWATER DISCHARGE

Sampling. The collection of samples for laboratory analyses should be supervised by a person experienced in performing sampling of industrial wastewater. Any specific requirement contained in the applicable analytic methods should be followed for sample containers, sample preservation, holding times, the collection of duplicate samples, etc. The time of sampling should be representative of normal operation, to the extent feasible, with all processes which contribute wastewater in normal operation. Samples should be collected from the center of the flow channel, where turbulence is at a maximum, or any site adequate for the collection of a representative sample.

Grab and composite samples are defined as follows:

Grab Sample. An individual sample of at least 100 milliliters collected at a randomly-selected time over a period not exceeding 15 minutes. Grab samples shall be taken during the operating hours of the facility.

Composite Sample. A combination of at least 8 sample aliquots of at least 100 milliliters, collected at periodic intervals during the operating hours of a facility over a 24 hour period. Where feasible, samples must be obtained through flow proportional composite sample technique; either the time interval between each aliquot or the volume of each aliquot must be proportional to either the stream flow at the time of sampling or the total stream flow since the collection of the previous aliquot. Aliquots may be collected manually or automatically.

Analysis. Sample analysis shall be performed by a laboratory certified in the State of New Jersey. Test methods promulgated in 40 CFR Part 136 must be used. If none has been promulgated for a particular pollutant, an Authority approved method for measuring the level of the pollutant may be used provided that a description of the method or a reference to a published method is submitted. Description should include the sample holding times, preservation techniques, and the quality control measures which were used.

Determination that a pollutant is present in or absent from the wastestream shall be based on knowledge of the raw materials, maintenance chemicals, intermediate and final products and by-products, and previous analyses, if any, of the wastestream.

All wastestreams are required to be analyzed for the parameters listed below in Table 1. Composite samples shall be used for all analyses except oil and grease, petroleum hydrocarbons and pH, which shall use grab samples.

1. Table 1.

PARAMETERS (give quantity in ppm or mg/l)	Discharge Point (Name or No)			
Biochemical Oxygen Demand				
Chemical Oxygen Demand				
Total Organic Carbon				
Total Suspended Solids				
Total Dissolved Solids				
Ammonia (as N)				
pH (In standard units)				
Oil & Greases				
Petroleum Hydrocarbons				

2. Table 2

Table 2 must be completed for each discharge point. For each pollutant listed you must **mark an X** in the appropriate column of Table 2 as to whether you believe or do not believe the pollutant to be present at the discharge point. If you believe a pollutant to be present, you must provide the results of at least one (1) analysis for that pollutant. Use composite samples for all analyzed pollutants in this part.

Discharge Point (Name or Number) _____

TABLE 2

Pollutant and CAS No (if available)	MARK		EFFLUENT CONCENTRATION	UNITS	NO. OF ANALYSES
	Believed Present	"X" Believed Absent			
Bromide (24959-67-9)					
Chlorine, Total Residual					
Color					
Fecal Coliform					
Fluoride (16984-48-8)					
Nitrate-Nitrite (as N)					
Oil and Grease					
Phosphorous (as P), Total (7723-14-0)					
Radioactivity					
(1) Alpha, Total					
(2) Beta, Total					
(3) Gamma, Total					
(4) Radium, Total					
(5) Radium 226, Total					
Sulfate (as SO4) (14808-79-8)					
Sulfide (as S)					
Sulfite (as SO3)(14265-45-3)					
Surfactants					
Aluminum, Total (7429-90-5)					
Barium, Total (7440-39-3)					
Boron, Total (7440-42-8)					
Cobalt, Total (7440-48-4)					
Iron, Total (7439-89-6)					
Magnesium, Total (7439-95-4)					
Molybdenum, Total (7439-98-7)					
Manganese, Total (7439-96-5)					
Tin, (Total) (7440-32-6)					
Titanium, Total (7440-32-6)					
Nitrogen, Total Organic (as N)					

3. Table 3

Priority Pollutants. The MCUA will perform Sampling and analyses for the priority pollutants listed in Table 3. For each pollutant you must mark an X in the appropriate column of Table 3 as to whether you believe or do not believe the pollutant to be present at the discharge point. Complete one table for each discharge point. An independent laboratory licensed in the State of New Jersey and contracted by the MCUA shall perform analyses for pollutants listed in Table 3.

If the applicant has previous data, please fill in the table, where applicable.

POLLUTANT (CAS No. if available)	Mark X			Effluent Concentration (ug/l or ppb)	Detection Limit (ug/l or ppb)	# of Samples
	Testing Required	Believed Present	Believed Absent			
METALS, CYANIDES AND TOTAL PHENOLS						
1M. Antimony, Total (7440-36-0)						
2M. Arsenic, Total (7440-38-2)						
3M. Beryllium, Total (7440-41-7)						
4M. Cadmium, Total (7440-43-9)						
5M. Chromium, Total (7440-47-3)						
6M. Copper, Total (7550-50-8)						
7M. Lead, Total (7439-92-1)						
8M. Mercury, Total (7439-97-6)						
9M. Nickel, Total (7440-02-0)						
10M. Selenium, Total (7782-49-2)						
11M. Silver, Total (7440-22-4)						
12M. Thallium, Total (7440-28-0)						
13M. Zinc, Total (7440-66-6)						
14M. Cyanide, Total (57-12-5)						
15M. Cyanide, Amenable to Chlorination						
16M. Phenols, Total						
GC/MS FRACTION - VOLATILE COMPOUNDS						
1V. Acrolein (107-02-8)						
2V. Acrylonitrile (107-13-1)						
3V. Benzene (71-43-2)						
5V. Bromoform (75-25-2)						
6V. Carbon Tetrachloride (56-23-5)						
7V. Chlorobenzene (108-90-7)						
8V. Chlorodibromomethane (124-48-1)						
9V. Chloroethane (75-00-3)						
10V. 2-Chloro-ethyl-vinyl Ether (110-75-8)						
11V. Chloroform (67-66-3)						
12V. Dichlorobromomethane (75-27-4)						
14V. 1,1-Dichloroethane (75-34-3)						
15V. 1,2-Dichloroethane (107-06-2)						
16V. 1,1-Dichloroethylene (75-35-4)						
17V. 1,2-Dichloropropane (78-67-5)						
18V. 1,3-Dichloropropylene (542-75-6)						
19V. Ethylbenzene (100-41-4)						
20V. Methyl Bromide (74-83-9)						
21V. Methyl Chloride (74-87-4)						
22V. Methylene Chloride (75-09-2)						
23V. 1,1,2,2-Tetrachloroethane (79-34-5)						
24V. Tetrachloroethylene (127-18-4)						
25V. Toluene (108-88-3)						
26V. 1,2-TransDichloroethylene (156-60-5)						
27V. 1,1,1-Trichloroethane (71-55-6)						
28V. 1,1,2-Trichloroethane (79-00-5)						
29V. Trichloroethylene (79-01-6)						
31V. Vinyl Chloride (75-01-4)						

POLLUTANT (CAS No. if available)	Mark X			Effluent Concentration (ug/l or ppb)	Detection Limit (ug/l or ppb)	# of Samples
	Testing Required	Believed Present	Believed Absent			
GC/MS FRACTION - ACID COMPOUNDS						
1A. 2-Chlorophenol (95-57-8)						
2A. 2,4-Dichlorophenol (120-83-2)						
3A. 2,4-Dimethylphenol (105-67-9)						
4A. 2,4-Dinitro-o-Cresol (534-52-1)						
5A. 2,4-Dinitrophenol (51-28-5)						
6A. 2-Nitrophenol (88-75-5)						
7A. 4-Nitrophenol (100-02-7)						
8A. P-Chloro-M-Cresol (59-50-7)						
9A. Pentachlorophenol (87-86-5)						
10A. Phenol (106-95-2)						
11A. 2,4,6-Trichlorophenol (88-06-2)						
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS						
1B. Acenaphthene (83-32-9)						
2B. Acenaphthylene (208-96-8)						
3B. Anthracene (120-12-7)						
4B. Benzidine (92-87-5)						
5B. Benzo (a) Anthracene (56-55-3)						
6B. Benzo (a) Pyrene (50-32-8)						
7B. 3,4-Benzofluoranthene (205-99-2)						
8B. Benzo (ghi) Perylene (191-24-2)						
9B. Benzo (k) Fluoranthene (207-08-9)						
10B. Bis (2-Chloroethoxy) Methane (111-91-1)						
11B. Bis (2-Chloroethyl) Ether (111-44-4)						
12B. Bis (2-Chloroisopropyl) Ether (39638-32-9)						
13B. Bis (2-Ethylhexyl) Phthalate (117-81-7)						
14B. 4-Bromophenyl Phenyl Ether (101-55-3)						
15B. Butyl Benzyl Phthalate (85-68-7)						
16B. 2-Chloronaphthalene (91-58-7)						
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)						
18B. Chrysene (218-01-9)						
19B. Dibenzo (a,h) Anthracene (53-70-3)						
20B. 1,2-Dichlorobenzene (95-50-1)						
21B. 1,3-Dichlorobenzene (541-73-1)						
22B. 1,4-Dichlorobenzene (106-46-7)						
23B. 3,3-Dichlorobenzidine (91-94-1)						
24B. Diethyl Phthalate (84-66-2)						
25B. Dimethyl Phthalate (131-11-3)						
26B. Di-N-Butyl Phthalate (84-74-2)						
27B. 2,4-Dinitrotoluene (121-14-2)						
28B. 2,6-Dinitrotoluene (606-20-2)						
29B. Di-N-Octyl Phthalate (117-84-0)						
30B. 1,2-Diphenylhydrazine (122-66-7)						
31B. Fluoranthene (206-44-0)						
32B. Fluorene (86-73-7)						
33B. Hexachlorobenzene (118-74-1)						

POLLUTANT (CAS No. if available)	Mark X			Effluent Concentration (ug/l or ppb)	Detection Limit (ug/l or ppb)	# of Samples
	Testing Required	Believed Present	Believed Absent			
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS Continued						
34B. Hexachlorobutadiene (87-68-3)						
35B. Hexachlorocyclopentadiene (77-47-4)						
36B. Hexachloroethane (67-72-1)						
37B. Indeno (1,2,3-cd) Pyrene (193-39-5)						
38B. Isophorone (78-59-1)						
39B. Naphthalene (91-20-3)						
40B. Nitrobenzene (98-95-3)						
41B. N-Nitrosodimethylamine (62-75-9)						
42B. N-Nitrosodi-n-Propylamine (621-64-7)						
43B. N-Nitrosodiphenylamine (86-30-6)						
44B. Phenanthrene (85-01-8)						
45B. Pyrene (129-00-0)						
46B. 1,2,4-Trichlorobenzene (120-82-1)						
GC/MS FRACTION - PESTICIDES/PCB COMPOUNDS						
1P. Aldrin (309-00-2)						
2P. Alpha-BHC (319-84-6)						
3P. Beta-BHC (319-85-7)						
4P. Gamma-BHC (58-89-9)						
5P. Delta-BHC (319-86-8)						
6P. Chlordane (57-74-9)						
7P. 4,4'-DDT (50-29-3)						
8P. 4,4'-DDE (72-55-9)						
9P. 4,4'-DDD (72-54-8)						
10P. Dieldrin (60-57-1)						
11P. Alpha-Endosulfan (959-98-8)						
12P. Beta-Endosulfan (33213-65-9)						
13P. Endosulfan Sulfate (1031-07-8)						
14P. Endrin (72-20-8)						
15P. Endrin Aldehyde (7421-93-4)						
16P. Heptachlor (76-44-8)						
17P. Heptachlor Epoxide (1024-57-3)						
18P. PCB-1242 (53469-21-9)						
19P. PCB-1254 (11097-69-1)						
20P. PCB-1221 (11104-28-2)						
21P. PCB-1232 (11141-16-5)						
22P. PCB-1248 (12672-29-6)						
23P. PCB-1260 (11096-82-5)						
24P. PCB-1016 (12674-11-2)						
25P. Toxaphene (8001-35-2)						
DIOXIN						
2,3,7,8- Tetrachlorodibenzo-P-Dioxin (1764-01-6)						

G. TOXIC POLLUTANTS

List each toxic pollutant, and its source (listed in F3-Table 3), you are currently using or plan to use over the next five years, which is (or will be) utilized by itself or as a component of another substance. Include pollutants manufactured as intermediates, final products or byproducts. If none used, mark "N/A" – Not Applicable

POLLUTANT	SOURCE
_____	_____
_____	_____
_____	_____
_____	_____

H. INCREASED LEVELS

List any pollutant which you know or have reason to believe will exceed two times the value reported in Item F, for a period of five years commencing with the date of application. If no increased levels planned, mark "N/A" – Not Applicable

POLLUTANT	REASON
_____	_____
_____	_____
_____	_____
_____	_____

I. CERTIFIED LABORATORY

Complete for all analyses reported in this application.

Name of Certified Laboratory	NJ Certification Number	Pollutant(s)/Categories Analyzed
_____	_____	_____
_____	_____	_____
_____	_____	_____

J. CERTIFICATION BY THE APPLICANT’S AUTHORIZED REPRESENTATIVE

For _____
NAME OF APPLICANT / OPERATING ENTITY (Type or Print)

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 information submitted. Based upon 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 purposely, knowingly, recklessly, or negligently submitting false information.

NAME (Type or Print): _____

TITLE: _____

SIGNATURE: _____

DATE: _____

APPENDIX A

40 CFR 403.12 (I). SIGNATORY REQUIREMENTS FOR INDUSTRIAL USER REPORTS.

The reports required by paragraphs (b), (d), and (e) of this section shall include the certification statement as set forth in 403.6(a)(2)(ii), and shall be signed as follows:

(1). By a responsible corporate officer, if the Industrial User submitting the reports required by paragraphs (b), (d) and (e) of this section 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 principle 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.

(2). By a general partner or proprietor if the Industrial User submitting the reports required by paragraphs (b), (d) and (e) of this section is a partnership or sole proprietorship respectively.

(3). By a duly authorized representative of the individual designated in paragraph (I)(1) or (I)(2) of this section if:

(i). The authorization is made in writing by the individual described in paragraph (I)(1) or (I)(2);

(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 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 Control Authority.

(4). If an authorization under paragraph (I)(3) 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 environmental matters for the company, a new authorization satisfying the requirements of paragraph (I)(3) of this section must be submitted to the Control Authority prior to or together with any reports to be signed by an authorized representative.