

**City of Bethlehem
Wastewater Treatment Plant
Municipal Industrial Pretreatment Program**

Industrial Wastewater Discharge Permit Application

Section A – General Information

1. Company name, mailing address, telephone number, fax number, and municipality.

Telephone Number _____

Fax Number _____

Municipality _____

2. Address of production or manufacturing facility. If same as above, check here

Municipality _____

3. Person authorized to represent this facility in official dealings with the City of Bethlehem, designated to receive and send all reports, communications, etc., and who will be the Authorized Representative as described in Article 923 on page 9 of this application.

Name _____

Title _____

Address _____

Telephone Number _____

Fax Number _____

Email Address _____

4. Is this a proposed or existing facility? Proposed Existing

5. List Standard Industrial Classification (SIC) Codes and North American Industry Classification System (NAICS) Codes for each process at this facility

<u>Process</u>	<u>SIC Code</u>	<u>NAICS Code</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Identify and briefly describe each process that produces waste. Include the year in which discharge of each process began. Attach additional sheets if necessary.

7. If this facility employs processes in any of the industrial categories listed below, place a check beside the category. Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Airport Deicing | <input type="checkbox"/> Leather Tanning and Finishing |
| <input type="checkbox"/> Aluminum Forming | <input type="checkbox"/> Meat and Poultry Products |
| <input type="checkbox"/> Asbestos Manufacturing | <input type="checkbox"/> Metal Finishing |
| <input type="checkbox"/> Battery Manufacturing | <input type="checkbox"/> Metal Products and Machinery |
| <input type="checkbox"/> Canned and Preserved Fruits and Vegetables Processing | <input type="checkbox"/> Metals Molding and Casting |
| <input type="checkbox"/> Canned and Preserved Seafood Processing | <input type="checkbox"/> Mineral Mining and Processing |
| <input type="checkbox"/> Carbon Black Manufacturing | <input type="checkbox"/> Nonferrous Metals Forming and Metal Powders |
| <input type="checkbox"/> Cement Manufacturing | <input type="checkbox"/> Nonferrous Metals Manufacturing |
| <input type="checkbox"/> Centralized Waste Treatment | <input type="checkbox"/> Oil and Gas Extraction |
| <input type="checkbox"/> Coal Mining | <input type="checkbox"/> Ore Mining and Dressing |
| <input type="checkbox"/> Coil Coating | <input type="checkbox"/> Organic Chemicals, Plastics, and Synthetic Fibers |
| <input type="checkbox"/> Concentrated Animal Feeding Operations | <input type="checkbox"/> Paint Formulating |
| <input type="checkbox"/> Concentrated Aquatic Animal Production | <input type="checkbox"/> Paving and Roofing Materials |
| <input type="checkbox"/> Construction and Development | <input type="checkbox"/> Pesticide Chemicals |
| <input type="checkbox"/> Copper Forming | <input type="checkbox"/> Petroleum Refining |
| <input type="checkbox"/> Dairy Products Processing | <input type="checkbox"/> Pharmaceutical Manufacturing |
| <input type="checkbox"/> Electrical and Electric Components | <input type="checkbox"/> Phosphate Manufacturing |
| <input type="checkbox"/> Electroplating | <input type="checkbox"/> Photographic |
| <input type="checkbox"/> Explosives Manufacturing | <input type="checkbox"/> Plastics Molding and Forming |
| <input type="checkbox"/> Ferroalloy Manufacturing | <input type="checkbox"/> Porcelain Enameling |
| <input type="checkbox"/> Fertilizer Manufacturing | <input type="checkbox"/> Pulp, Paper, and Paperboard |
| <input type="checkbox"/> Glass Manufacturing | <input type="checkbox"/> Rubber Manufacturing |
| <input type="checkbox"/> Grain Mills | <input type="checkbox"/> Soap and Detergent Manufacturing |
| <input type="checkbox"/> Gum and Wood Chemicals Manufacturing | <input type="checkbox"/> Steam Electric Power Generating |
| <input type="checkbox"/> Hospitals | <input type="checkbox"/> Sugar Processing |
| <input type="checkbox"/> Ink Formulating | <input type="checkbox"/> Textile Mills |
| <input type="checkbox"/> Inorganic Chemicals Manufacturing | <input type="checkbox"/> Timber Products Processing |
| <input type="checkbox"/> Iron and Steel Manufacturing | <input type="checkbox"/> Transportation Equipment Cleaning |
| <input type="checkbox"/> Landfills | <input type="checkbox"/> Waste Combustors |

8. This facility generates the following types of wastewaters. Check all that apply.

- domestic (bathrooms, showers, etc.)
- process
- facility/equipment cleaning
- cooling water, noncontact
- cooling water, contact
- boiler/tower blowdown
- air pollution unit
- other (describe) _____

9. List the permit number for any environmental permits held by this facility.

- NPDES – General _____
- NPDES – Stormwater _____
- NPDES – Industrial _____
- Hazardous Waste _____
- Air _____
- Solid Waste Disposal _____
- Health/Medical _____
- Other (specify) _____

10. Provide employee shift information.

Facility hours of operation: _____

Starting times of each shift: 1st _____ 2nd _____ 3rd _____

Number of employees per shift: 1st _____ 2nd _____ 3rd _____

11. List all environmental emergency response plans (Spill Prevention Control and Countermeasures (SPCC) Plan, Preparedness, Prevention and Contingency (PPC) Plan, Spill Prevention Response (SPR) Plan, etc.) prepared for the facility and the date of the latest revisions.

In accordance with City of Bethlehem Ordinance Article 923 Section 923.02(h), if determined to be necessary, a Spill Prevention Plan shall be supplied to the City. A Spill Prevention Plan shall contain, at a minimum, the following elements:

- Description of discharge practices, including non-routine batch discharges;
- Description of stored chemicals;
- Procedure for immediately notifying the POTW of slug load/accidental discharges, including any discharges which would violate a prohibition under 40 CFR 403.5(b), with procedures for follow-up written notification within five days;
- If necessary, procedure to prevent adverse impact from accidental spills, including inspection and maintenance of storage areas, handling and transfer of materials, loading and unloading operations, control of plant site run-off, worker training, building of containment structures or equipment, measures for containing toxic organic pollutants (including solvents), and/or measures and equipment necessary for emergency responses.

12. Is this facility planning any process changes or expansions over the next three years? Yes No
If yes, discuss the anticipated changes in process and/or sanitary wastewater quantity or quality.

13. If applicable, describe any environmental improvement projects anticipated for implementation at the facility in the next three years.

Section B – Facility Operation Characteristics

Complete the following for each activity or process at this facility that produces wastewater. Attach additional copies as needed.

1. Process or product manufactured: _____

2. On a separate sheet, provide a flow chart of the process. Identify all manufacturing steps, water supply points, wastewater discharge points, wastewater sampling points, recycling routes, and pretreatment facilities.

3. Production process is:
 Continuous
 Batch Average number of batches per 24-hour day _____
 Both %Batch _____ %Continuous _____

4. On a separate sheet, list all raw materials, process additives, and any cleaning products used in this process. Attach safety data sheets (SDSs) and/or labels showing product components.

5. Is this process subject to seasonal variation? Yes No
If yes, briefly describe seasonal production cycle: _____

6. Does pretreatment occur on the wastewater of this process before discharge to the sanitary sewer?
 Yes No If yes, briefly describe the pretreatment process: _____

7. Does this process waste stream combine with any other process waste streams or with domestic waste prior to pretreatment or entering the sanitary sewer? Yes No
If yes, describe which waste streams combine and where: _____

8. This process generates the following types of wastes. Check all that apply and list amounts (gallons or pounds per month or year).

<input type="checkbox"/> acid, alkaline or corrosive materials	_____
<input type="checkbox"/> flammable or explosive materials	_____
<input type="checkbox"/> heavy metal sludges	_____
<input type="checkbox"/> inks or dyes	_____
<input type="checkbox"/> metal solutions	_____
<input type="checkbox"/> oil/grease	_____
<input type="checkbox"/> paints	_____
<input type="checkbox"/> pesticides	_____
<input type="checkbox"/> plating wastes	_____
<input type="checkbox"/> phenols and/or other toxic organic compounds	_____
<input type="checkbox"/> pretreatment sludges	_____
<input type="checkbox"/> radioactive materials	_____
<input type="checkbox"/> soaps or detergents in large amounts	_____
<input type="checkbox"/> other (describe)	_____

Section C – Water Supply and Usage

1. What are the facility's sources of water? Check all that apply and list the average gallons of water used per day.

- municipal supply _____
- private well(s) _____
- surface water intake _____
- trucked/hailed _____
- other (describe) _____

2. List the location, size, associated account number, usage in gallons per day, and process supplied for all water meters in the facility.

<u>Location</u>	<u>Size</u>	<u>Account No.</u>	<u>Usage (gpd)</u>	<u>Process Supplied</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

3. Describe any raw water treatment processes in use.

4. What are the uses of water at the facility? Check all that apply. List the average gallons of water used per day for each use.

- domestic wastes (bathrooms) _____
- cafeteria/food prep _____
- cooling water, contact _____
- cooling water, noncontact _____
- boiler/tower blowdown _____
- process water _____
- water included in product _____
- equipment/facility cleaning _____
- air pollution control _____
- other (describe) _____
- other (describe) _____

Section D – Wastewater Characteristics

1. How does wastewater discharge from the facility? Check all that apply. List the average gallons of wastewater per day for each discharge.

- sanitary sewer _____
- storm sewer _____
- recycled _____
- permitted discharge point _____ NPDES permit # _____
- evaporation _____
- hauled off site* _____
- other (describe) _____

* Provide name, address, and telephone number of any waste haulers.

2. List all facility connections to sanitary sewer mains. Attach a map or diagram for reference.

<u>Location</u>	<u>Size</u>	<u>Wastewater Source(s)</u>	<u>Gallons per Day</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Fully describe all available sampling points for this facility's wastewater discharge locations identified in D.2. above.

4. Are wastewater discharges to sanitary sewer intermittent or steady? If intermittent, describe schedule as fully as possible, including peak rates, times, and duration of discharges.

5. Provide the following information for all wastewater flow meters at this facility.

<u>Location</u>	<u>Size</u>	<u>Type</u>	<u>Gallons per Day</u>	<u>Measures Flow From</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

6. Describe any wastewater treatment or pretreatment equipment in use.

7. Describe any Federal Categorical Pretreatment Standards that apply to the facility. If production based discharge limits apply, include relevant production records with this application.

a. Does the facility meet applicable Federal Categorical Pretreatment Standards on a consistent basis? Yes No N/A

b. Are additional pretreatment facilities and/or operation and maintenance procedures required to meet Federal Categorical Pretreatment Standards? If so, describe and list the schedule by which they will be provided.

Section E – Solid Wastes

If the facility does not generate solid wastes other than business waste, skip to section F.

1. What types of solid waste does this facility generate? Check all that apply.

- municipal waste
- residual waste
- hazardous waste
- infectious waste
- chemotherapeutic waste
- other (describe) _____
- other (describe) _____

2. Describe solid waste disposal methods for the facility. Include name, address, and phone number of any haulers, and disposal amounts per month or year.

3. Does the facility generate pretreatment residuals? Yes No

If yes, identify the following characteristics of these pretreatment residuals.

Quantity: _____gallons per day or _____pounds per day (dry weight)
Moisture Content: _____percent solids
Disposal Method _____

4. Does the facility generate any other types of solid waste? Yes No

If yes, identify the following characteristics of the waste.

Description _____
Quantity: _____gallons per day or _____pounds per day (dry weight)
Moisture Content: _____percent solids
Disposal Method _____

Section F – Wastewater Monitoring

1. Are any of the priority pollutants in Table I listed at the end of the application used at this facility in manufacturing the product or generated as a byproduct? If so, please note on Table I.
2. List any other pollutants known or anticipated to be present in the facility or in the wastewater discharged to the sanitary sewer.

3. Provide laboratory analysis results for each of the following parameters. Perform sampling and laboratory analyses in accordance with EPA regulations listed in 40 CFR Part 136. Samples must be representative of the facility's typical wastewater discharge. Be sure to describe the sample collection location and attach the original laboratory report. Attach additional sheets for more than one sample location. Results from samples taken within the last six months may be used. For a proposed facility not yet discharging, results from a similar facility located elsewhere may be used.

Sample collection location: _____

<u>Category One</u>	<u>Result</u>	<u>Unit</u>
Ammonia (NH ₃ -N)	_____	_____
Biological oxygen demand (BOD ₅)	_____	_____
Chemical oxygen demand (COD)	_____	_____
Color	_____	_____
Oil and grease	_____	_____
pH	_____	_____
Temperature	_____	_____
Total suspended solids (TSS)	_____	_____
Total petroleum hydrocarbons (TPH)	_____	_____

<u>Category Two</u>	<u>Result</u>	<u>Unit</u>
Arsenic, total	_____	_____
Cadmium, total	_____	_____
Chromium, total	_____	_____
Copper, total	_____	_____
Lead, total	_____	_____
Mercury, total	_____	_____
Molybdenum, total	_____	_____
Nickel, total	_____	_____
Selenium, total	_____	_____
Silver, total	_____	_____
Zinc, total	_____	_____
Cyanide, total	_____	_____

Category Three – Any pollutants identified in F.1. and F.2. above.

<u>Pollutant</u>	<u>Result</u>	<u>Unit</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Category Four

Pretreatment standard pollutants of any industrial category identified in A.7. Contact the City for the complete list of applicable pollutants. Attach laboratory report with results.

Section G – Intent to Self Monitor

Please select one of the following options.

- This facility elects to conduct self monitoring in order to determine compliance with site specific numeric discharge limitations. Self monitoring will be completed in accordance with the applicable terms and conditions of the issued Industrial Wastewater Discharge Permit and Article 923 of the City’s Codified Ordinances.
- This facility authorizes the City of Bethlehem to complete monitoring on its behalf in order to determine compliance with site specific numeric discharge limitations. The facility will be responsible for all fees associated with sampling and analysis as defined in the issued Industrial Wastewater Discharge Permit. In the event that the facility may independently collect additional discharge monitoring data, the data will be reported to the City of Bethlehem in accordance with the applicable terms and conditions of the issued Industrial Wastewater Discharge Permit and Article 923 of the City of Bethlehem’s Codified Ordinances.

Section H – Certification Statement

An authorized official, as described below, should sign this application after adequate completion and review of the form.

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.

<i>Authorized Representative Signature</i>	Date
Printed Name _____	Phone _____
Title _____	Email _____

Codified Ordinances of the City of Bethlehem Article 923.01(e) Authorized Representative of a User: an authorized representative of a User may be:

- (1) 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.
- (2) A general partner or proprietor, if the User is a partnership or proprietorship, respectively.
- (3) A director or highest official appointed or designated to oversee operations and performance, if the User is a Federal, State or Local Governmental facility.
- (4) A duly authorized representative of the individual identified in (1) through (3) above, if such representative is responsible for the overall operation of the facilities from which the indirect discharge originates and a written request for designation of an alternate representative is approved by the City.

Please return completed applications to:

Mr. Kenneth Greiser, MIPP/QC Coordinator
City of Bethlehem Wastewater Treatment Plant
144 Shimersville Road
Bethlehem, PA 18015

NOTE: The processing fee for the City of Bethlehem’s Industrial Waste Discharge Permit Application is currently \$250.00. Please include a check or money order payable to the City of Bethlehem in the amount of \$250.00 with this application. The City of Bethlehem will not review applications without the processing fee and industrial wastewater discharges will be in violation of City of Bethlehem Codified Ordinance 923.

Table I - EPA Priority Pollutants

PCBs & Pesticides

- | | | |
|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> 4,4-DDD | <input type="checkbox"/> endosulfan I | <input type="checkbox"/> PCB-1221 |
| <input type="checkbox"/> 4,4-DDE | <input type="checkbox"/> endosulfan II | <input type="checkbox"/> PCB-1232 |
| <input type="checkbox"/> 4,4-DDT | <input type="checkbox"/> endosulfan sulfate | <input type="checkbox"/> PCB-1242 |
| <input type="checkbox"/> aldrin | <input type="checkbox"/> endrin | <input type="checkbox"/> PCB-1248 |
| <input type="checkbox"/> alpha-BHC | <input type="checkbox"/> endrin aldehyde | <input type="checkbox"/> PCB-1254 |
| <input type="checkbox"/> beta-BHC | <input type="checkbox"/> gamma-BHC | <input type="checkbox"/> PCB-1260 |
| <input type="checkbox"/> chlordane | <input type="checkbox"/> heptachlor | <input type="checkbox"/> toxaphene |
| <input type="checkbox"/> delta-BHC | <input type="checkbox"/> heptachlor epoxide | |
| <input type="checkbox"/> dieldrin | <input type="checkbox"/> PCB-1016 | |

Volatile Organic Compounds (VOCs)

- | | | |
|---|---|--|
| <input type="checkbox"/> 1,1,1-trichloroethane | <input type="checkbox"/> acrolein | <input type="checkbox"/> ethylbenzene |
| <input type="checkbox"/> 1,1,2,2-tetrachloroethane | <input type="checkbox"/> acrylonitrile | <input type="checkbox"/> methyl bromide |
| <input type="checkbox"/> 1,1,2-trichloroethane | <input type="checkbox"/> benzene | <input type="checkbox"/> methyl chloride |
| <input type="checkbox"/> 1,1-dichloroethane | <input type="checkbox"/> bromoform | <input type="checkbox"/> methylene chloride |
| <input type="checkbox"/> 1,1-dichloroethylene | <input type="checkbox"/> carbon tetrachloride | <input type="checkbox"/> tetrachloroethylene |
| <input type="checkbox"/> 1,2-dichloroethane | <input type="checkbox"/> chlorobenzene | <input type="checkbox"/> toluene |
| <input type="checkbox"/> 1,2-dichloropropane | <input type="checkbox"/> chlorodibromomethane | <input type="checkbox"/> trichloroethylene |
| <input type="checkbox"/> 1,2-trans-dichloroethylene | <input type="checkbox"/> chloroethane | <input type="checkbox"/> vinyl chloride |
| <input type="checkbox"/> 1,3-dichloropropylene | <input type="checkbox"/> chloroform | |
| <input type="checkbox"/> 2-chloroethyl vinyl ethers | <input type="checkbox"/> dichlorobromomethane | |

Semivolatile Organic Compounds (SVOCs)

- | | | |
|--|---|--|
| <input type="checkbox"/> 1,2,4-trichlorobenzene | <input type="checkbox"/> acenaphthene | <input type="checkbox"/> di-n-octyl phthalate |
| <input type="checkbox"/> 1,2-dichlorobenzene | <input type="checkbox"/> acenaphthylene | <input type="checkbox"/> fluoranthene |
| <input type="checkbox"/> 1,2-diphenylhydrazine | <input type="checkbox"/> anthracene | <input type="checkbox"/> fluorene |
| <input type="checkbox"/> 1,3-dichlorobenzene | <input type="checkbox"/> benzidine | <input type="checkbox"/> hexachlorobenzene |
| <input type="checkbox"/> 1,4-dichlorobenzene | <input type="checkbox"/> benzo(a) anthracene | <input type="checkbox"/> hexachlorobutadiene |
| <input type="checkbox"/> 2,4,6-trichlorophenol | <input type="checkbox"/> benzo(a) pyrene | <input type="checkbox"/> hexachlorocyclopentadiene |
| <input type="checkbox"/> 2,4-dichlorophenol | <input type="checkbox"/> benzo(b) fluoranthene | <input type="checkbox"/> hexachloroethane |
| <input type="checkbox"/> 2,4-dimethylphenol | <input type="checkbox"/> benzo(ghi) perylene | <input type="checkbox"/> indeno(1,2,3-cd) pyrene |
| <input type="checkbox"/> 2,4-dinitrophenol | <input type="checkbox"/> benzo(k) fluoranthene | <input type="checkbox"/> isophorone |
| <input type="checkbox"/> 2,4-dinitrotoluene | <input type="checkbox"/> bis(2-chloroethoxy) methane | <input type="checkbox"/> naphthalene |
| <input type="checkbox"/> 2,6-dinitrotoluene | <input type="checkbox"/> bis(2-chloroethyl) ether | <input type="checkbox"/> nitrobenzene |
| <input type="checkbox"/> 2-chloronaphthalene | <input type="checkbox"/> bis(2-chloroisopropyl) ether | <input type="checkbox"/> n-nitrosodimethylamine |
| <input type="checkbox"/> 2-chlorophenol | <input type="checkbox"/> bis(2-ethylhexyl) phthalate | <input type="checkbox"/> n-nitrosodi-n-propylamine |
| <input type="checkbox"/> 2-nitrophenol | <input type="checkbox"/> butyl benzyl phthalate | <input type="checkbox"/> n-nitrosodiphenylamine |
| <input type="checkbox"/> 3,3-dichlorobenzidine | <input type="checkbox"/> chrysene | <input type="checkbox"/> p-chloro-m-cresol |
| <input type="checkbox"/> 4,6-dinitro-o-cresol | <input type="checkbox"/> dibenzo(a,h) anthracene | <input type="checkbox"/> pentachlorophenol |
| <input type="checkbox"/> 4-bromophenyl phenyl ether | <input type="checkbox"/> diethyl phthalate | <input type="checkbox"/> phenanthrene |
| <input type="checkbox"/> 4-chlorophenyl phenyl ether | <input type="checkbox"/> dimethyl phthalate | <input type="checkbox"/> phenol |
| <input type="checkbox"/> 4-nitrophenol | <input type="checkbox"/> di-n-butyl phthalate | <input type="checkbox"/> pyrene |

Metals/Miscellaneous

- | | | |
|---------------------------------------|---|-----------------------------------|
| <input type="checkbox"/> 2,3,7,8-TCDD | <input type="checkbox"/> chromium | <input type="checkbox"/> selenium |
| <input type="checkbox"/> antimony | <input type="checkbox"/> copper | <input type="checkbox"/> silver |
| <input type="checkbox"/> arsenic | <input type="checkbox"/> cyanide, total | <input type="checkbox"/> thallium |
| <input type="checkbox"/> asbestos | <input type="checkbox"/> lead | <input type="checkbox"/> zinc |
| <input type="checkbox"/> beryllium | <input type="checkbox"/> mercury | |
| <input type="checkbox"/> cadmium | <input type="checkbox"/> nickel | |