



ENVIRONMENTAL SERVICES  
CITY OF PORTLAND  
working for clean rivers

# Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report

In Accordance with the Federal Clean Water Act and ORS 468B, the City of Portland operates a mandated program for the regulation of discharges of industrial wastewater to the City's sewer collection system. This program is implemented through a National Pollutant Discharge Elimination System (NPDES) permit and City Code Chapter 17.34.

The Bureau of Environmental Services, through its Environmental Compliance Division, is responsible for the protection of the sewer collection system and public health and safety. The Division administers wastewater discharge permits as outlined in City Code Chapter 17.34. These permits describe the manner of discharge, applicable pollutant limitations, and other terms and conditions of wastewater discharges. By completing the *Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report*, you are helping the City of Portland meet its requirements.

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## **Confidential Information**

As outlined in 40 CFR 403.14 (a)-(c) and ORS 192.430, any information submitted to the City under the Pretreatment Program requirements may be claimed as confidential by the submitter. Any such claim must be asserted at the time of submission in the manner prescribed on the application form or instructions, or, in the case of other submissions, by stamping the words "confidential business information" on each page containing such information. If no claim is made at the time of submission, the City may make the information available to the public without further notice. If a claim is asserted, the information will be treated in accordance with the procedures in 40 CFR part 2 (Public Information) and ORS 192.440(2).

Information and data provided to the City under these requirements that is effluent data shall be available to the public without restriction.

All other information that is submitted to the State or POTW shall be available to the public at least to the extent provided by 40 CFR 2.302 and ORS 192.440(2).

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## **Instructions**

Instructions to assist you with completing this application can be found on the preceding facing page. If there is insufficient space to complete an answer, continue your response on a separate piece of paper. Indicate the section and question number next to your response.

If, at any time, you require additional assistance, please contact our office at:

Water Pollution Control Laboratory  
Environmental Compliance Division  
6543 N Burlington Avenue  
Portland, OR 97203

(503) 823-5320

## INSTRUCTIONS

### Section A: General Facility Information

- Enter the name of the company – i.e., the name of the company legally responsible for this facility.
- Enter the name of the facility, such as the name used on letterhead, correspondence or advertising brochures.
- Enter the street address where the facility is located.
- Enter the *mailing* address of the facility, if different from the facility street address above.
- Enter the name, title, telephone number, and fax number of the person who is most familiar with the facts reported on this form and who can be contacted by City staff.
- Enter the approximate month and year that operations began, or are proposed to begin, otherwise use best estimate.
- Enter the name, title, telephone number, and fax number of the person who is responsible for responding or organizing a response to emergencies at this facility, and who can be contacted by City staff. These emergencies may include spills and chemical releases, fires, floods, or earthquakes.
- Check the appropriate box and make the necessary changes or corrections to the enclosed document, if needed.

### Section B: Facility Operations & Water Use

1. Check the appropriate box(es). If the manufacturing or service activities of your facility are not included in the table, mark other and indicate the activity (or activities) in the space provided. The heading "CFR" is an acronym for the Code of Federal Regulations, the codification of the general and permanent rules published in the *Federal Register* by the Executive departments and agencies of the Federal Government. The numbers below this heading indicate the part within Title 40 (Protection of the Environment) covering this activity. **An asterisk (\*) indicates that EPA has proposed regulations concerning those activities.**



# Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report

## SECTION A. GENERAL FACILITY INFORMATION

Company Name: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_ City: \_\_\_\_\_, OR Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State: \_\_\_\_\_, Zip: \_\_\_\_\_

### Questionnaire Resource

### Contact's Affiliation

Contact Person: \_\_\_\_\_  Company Representative  Consultant (see below)

Contact's Title: \_\_\_\_\_ Name of Firm: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Email: \_\_\_\_\_

### Emergency Contact/Coordinator

Contact Person: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Contact's Title: \_\_\_\_\_ Email: \_\_\_\_\_

Is all information previously submitted in your facility's *Environmental Survey* still current and correct?  Yes  No

**NOTE: A copy of your facility's Environmental Survey is included for your reference. If you checked No above, make the needed changes to the enclosed Environmental Survey, initial and date all changes, and send in the corrected copy of the Survey with the completed Permit Application.**

## SECTION B. FACILITY OPERATIONS & WATER USE

1. Check all applicable manufacturing or service activities performed at this facility:

Manufacturing or Service Activities	CFR	Manufacturing or Service Activities	CFR
<input type="checkbox"/> Aluminum Forming	467	<input type="checkbox"/> Leather Tanning and Finishing	425
<input type="checkbox"/> Asbestos Manufacturing	427	<input type="checkbox"/> Meat Products	432
<input type="checkbox"/> Battery Manufacturing	461	<input type="checkbox"/> Metal Molding and Casting (Foundries)	464
<input type="checkbox"/> Builders' Paper and Board Mills	431	<input type="checkbox"/> Metal Products and Machinery	438
<input type="checkbox"/> Carbon Black Manufacturing	458	<input type="checkbox"/> Metal Finishing	433
<input type="checkbox"/> Cement Manufacturing	411	<input type="checkbox"/> Mineral Mining and Processing	436
<input type="checkbox"/> Centralized Waste Treatment	437	<input type="checkbox"/> Nonferrous Metals Forming/Metal Powders	471
<input type="checkbox"/> Coal Mining	434	<input type="checkbox"/> Nonferrous Metals Manufacturing	421
<input type="checkbox"/> Coil Coating (including Can making)	465	<input type="checkbox"/> Oil and Gas Extraction	435
<input type="checkbox"/> Copper Forming	468	<input type="checkbox"/> Ore Mining and Dressing	440

Continued on next page

## INSTRUCTIONS

### Section B: Facility Operations & Water Use

1. Check the appropriate box(es). If the manufacturing or service activities of your facility are not included in the table, mark other and indicate the activity (or activities) in the space provided. The heading "CFR" is an acronym for the Code of Federal Regulations, the codification of the general and permanent rules published in the *Federal Register* by the Executive departments and agencies of the Federal Government. The numbers below this heading indicate the part within Title 40 (Protection of the Environment) covering this activity. **An asterisk (\*) indicates that EPA has proposed regulations concerning those activities.**
2. Indicate the *shift start time* for each work shift at your facility. Consider each shift on the basis of normal starting time with shifts possible in a 24-hour period. Only periods of production or process operation, including cleanup procedures, are to be considered as shift work. Enter the average *number of employees* that work each shift. The number of employees per shift should include office workers, executives, watch persons, etc., whose hours coincide with the times of production shifts. Add the number of employees per shift and then add all shifts to obtain total employment.
3. Indicate, by checking the appropriate box, if the production at your facility is seasonal – e.g., a food processing facility performing canning operations during harvest time.
  - a. If seasonal, indicate the maximum/minimum production periods.
4. Specify the number of days that your facility conducted business during the last calendar year.
5. Check the appropriate box. If scheduled shutdowns occur at your facility – e.g., seasonal production or shutting down a production line over a holiday for scheduled maintenance and cleaning – complete as requested.



**SECTION B. FACILITY OPERATIONS & WATER USE (continued)**

1. Check all applicable manufacturing or service activities performed at this facility:

Manufacturing or Service Activities	CFR	Manufacturing or Service Activities	CFR
<input type="checkbox"/> Dairy Products Processing	405	<input type="checkbox"/> Organic Chemicals, Plastics, & Synthetic Fibers	414
<input type="checkbox"/> Electrical and Electronic Components	469	<input type="checkbox"/> Paint Formulating	446
<input type="checkbox"/> Electroplating	413	<input type="checkbox"/> Paving and Roofing Materials (Tars and Asphalt)	443
<input type="checkbox"/> Explosives Manufacturing	457	<input type="checkbox"/> Pesticide Chemicals (Formulating & Packaging)	455
<input type="checkbox"/> Feedlots	412	<input type="checkbox"/> Petroleum Refining	419
<input type="checkbox"/> Ferroalloy Manufacturing	424	<input type="checkbox"/> Pharmaceutical Manufacturing	439
<input type="checkbox"/> Fertilizer Manufacturing	418	<input type="checkbox"/> Phosphate Manufacturing	422
<input type="checkbox"/> Fruits and Vegetables Processing	407	<input type="checkbox"/> Photographic Processing	459
<input type="checkbox"/> Glass Manufacturing	426	<input type="checkbox"/> Plastics Molding and Forming	463
<input type="checkbox"/> Grain Mills	406	<input type="checkbox"/> Porcelain Enameling	466
<input type="checkbox"/> Gum and Wood Chemicals	454	<input type="checkbox"/> Pulp, Paper and Paperboard	430
<input type="checkbox"/> Hospitals	460	<input type="checkbox"/> Rubber Processing	428
<input type="checkbox"/> Incinerators	444	<input type="checkbox"/> Seafood Processing	408
<input type="checkbox"/> Ink Formulating	447	<input type="checkbox"/> Soap and Detergent Manufacturing	417
<input type="checkbox"/> Inorganic Chemicals Manufacturing	415	<input type="checkbox"/> Steam Electric Power Generating	423
<input type="checkbox"/> Iron and Steel Manufacturing	420	<input type="checkbox"/> Sugar Processing	409
<input type="checkbox"/> Landfills and Landfills Leachate	445	<input type="checkbox"/> Textile Mills	410
<input type="checkbox"/> Laundry, Industrial	--	<input type="checkbox"/> Timber Products Processing	429
<input type="checkbox"/> Laundry, Linen	--	<input type="checkbox"/> Transportation Equipment Cleaning	442

2. Provide the following shift information:

Shift	Shift Start Time	# Employees
1		
2		
3		
<b>Total # Employees:</b>		

Office Use Only
Domestic Use @ 15 gallons/employee

3. Is the business or proposed activity continuous throughout the year?

- Yes     No     Seasonal

a. Indicate periods of maximum and minimum production:

Maximum	Minimum

4. List the total days of operation or production for the last calendar year:

\_\_\_\_\_ days

5. Do scheduled shut-downs occur?

- Yes     No

a. If yes, list the time period(s):

From	To

## INSTRUCTIONS

### Section B: Facility Operations & Water Use (continued)

6. Complete as indicated.
- Water Service : List the supplier and your account number(s). List all account numbers related to the water sources.  
Example: - Anywhere Water District, #M20111234.
  - Surface Water: Includes any and all water from rivers, streams, ponds, lakes, etc.
  - Well Water: No explanation required.
  - Other sources: Specify if water is obtained from other sources not listed above, such as water that is trucked in.

City of Portland water bills are in units of a hundred cubic feet (ccf) where one ccf (hundred cubic feet) = 748 gallons. Use the following equation for calculating the average gallons per day (GPD) for water supply information:

$$\text{Average GPD} = \frac{\text{Total water usage in the last 12 months (in ccf)} \times 748}{\text{Total number of operating days in 12-month period}}$$

7. This table tracks the use of water throughout your facility and the ultimate fate of the water. Enter the total water usage calculated in item 6, above. Complete the table listing the amount of incoming water for each item and the amount that is discharged for each listed item.
- Indicate what volume of water for each item is discharged to the sanitary sewer, storm sewer, combined sewer, or to other, such as on-site or off-site disposal.
  - Check the appropriate Raw Water Treatment column. This is to identify if the incoming water is chemically treated prior to use. Some manufacturing processes require treatment of raw (or incoming) water before the water can be used in the process. These include dechlorination, ion exchange, etc.
  - If the exact amount of water is not known for each item, then estimate the amount as best as possible and note how the estimation is determined.
- Enter "NA" (or "Not Applicable") for each item of water use information that does not apply to your facility.

Domestic Use: Any wastewater generated from dwellings, office buildings or institutions including, but not limited to, wastes from bathrooms, residential laundries, showers, and normal sink usage. It is not water used in any commercial or manufacturing capacity.

Contained in Product: Any water that is a component of the product(s) manufactured at your facility.

Process Water Discharged: Any water used in an industrial or commercial process that, as a result of process usage, contains pollutants. These pollutants may be liquid, solid, or gaseous substances or combinations. Pollutants can result from any process of industrial manufacturing, commercial food processing, commercial food preparation (restaurants), business, mobile washers, agriculture, trade or research.

Air Compressor: may include the discharge of single pass cooling water from the compressor head and compressor condensate drain water.

Air Pollution Control Unit: Any device used to control air emissions. For example, a wet scrubber using a water spray to remove solid, liquid, or gaseous contaminants from a gas stream. The water spray performs this removal by dissolving, trapping or chemically reacting with the contaminant.

Backwash Water: Water used to clean filters or ion exchange units by passing a strong flow of water counter to the direction of normal flow. This action removes solids and other small particulate contaminants.



**SECTION B. FACILITY OPERATIONS & WATER USE (continued)**

6. Provide the applicable water supply information requested below:

List Water Supply Source(s)	Account Number	Usage (GPD)
Water Service, (#1):		
Water Service, (#2):		
Water Service, (#3):		
Surface Water:		
Well Water:		
Other (specify):		
	<b>Total Daily Use:</b>	

7. Check all that are applicable to your facility and provide the appropriate flow information.

Water Use	Flow (GPD)	Raw Water Treatment		Discharged				
		Yes	No	Sanitary Sewer	Storm Sewer	Combined Sewer	On-Site	Off-Site
Domestic Use								
Contained in Product								
Process Water Discharged								
Air Compressor								
Air Pollution Control Unit								
Backwash Water								
Boiler Feed/Blowdown								
Cooling Water, Contact								
Cooling Water, Non-contact								
Cooling Tower/Bleed-off								
Equipment Washing								
Irrigation								
Plant Cleanup/Washing								
Contaminated Stormwater								
Other (specify):								
<b>Total (GPD):</b>								

## INSTRUCTIONS

### Section B: Facility Operations & Water Use (continued)

Boiler Feed: The clean feed water to a boiler unit.

Boiler Blowdown: The water used to remove used boiler water containing concentrated solids or treatment chemicals. Feed water replaces that water sent to the drain.

Contact Cooling Water: The water used to cool a process item, such as cutting water, quench tanks, rinse tanks. It is water that comes into contact with a process or a product and may be contaminated so that it cannot be reused or recycled without treatment.

Non-Contact Cooling Water: Water that does not come in direct contact with any portion of the process or product. Mainly used in process heat exchangers.

Cooling Tower Water: Clean water fed to a cooling tower. [See also boiler feed water.]

Cooling Tower Bleed-off: The water used to remove cooling water containing concentrated solids or treatment chemicals. Feed water replaces that water sent to the drain. [See also boiler blowdown.]

Equipment Washing: Water used in the maintenance and cleaning of production equipment at the facility.

Irrigation: Water used for landscape maintenance.

Plant Cleanup/Washing: Water that is used in the maintenance and cleaning of the facility, such as vehicle cleaning, facility washdown (inside and outside), etc.

Other: accounts for water uses not listed above.

#### NOTE:

- a. If "Yes" has been checked for raw water treatment, list the process(es) in use or proposed and the chemicals to be added during treatment in the space provided or on a separate sheet of paper.
  - b. If checked for on-site discharge or disposal, detail what is discharged or disposed on-site, listing the process and the waste or regenerant involved.
  - c. If checked for off-site discharge or disposal, detail what is discharged or disposed off-site, listing the process and the waste or regenerant involved, the transporter, and the destination.
8. Check the appropriate box and complete as requested.
  9. Complete as requested.

### Section C: Materials Storage Information

1. Complete as requested. Attach additional sheets as necessary.





**SECTION B. FACILITY OPERATIONS & WATER USE (continued)**

NOTE(S):

a. If raw water treatment is used, list the process(es) employed and how the treatment residuals or regenerants are disposed or discharged:

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b. Describe how this water is handled on-site. For example: flows to an evaporator, a drain field, etc.:

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c. Describe how this water is handled off-site. For example: it is reclaimed, recycled, etc.:

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8. Check the type of meter(s) in use at your facility and indicate the number in use.

Meter Type	Yes	No	#
Credit Meter(s):	<input type="checkbox"/>	<input type="checkbox"/>	
Discharge Meter(s):	<input type="checkbox"/>	<input type="checkbox"/>	

9. If a discharge meter is employed, list the manufacturer and describe the method of its operation, if known:

Manufacturer: \_\_\_\_\_  
Description: \_\_\_\_\_

**SECTION C. MATERIALS STORAGE INFORMATION**

1. List the raw materials utilized or stored on site. Indicate quantity using appropriate units:

Raw Materials	Storage		Daily Average (units)
	Inside	Outside	
Example: 3/4" steel tubing		✓	1,500 pounds

## INSTRUCTIONS

### Section C: Materials Storage Information

2. Complete as requested. Attach additional sheets as necessary.
3. Briefly describe any previous spills of raw materials, products, or process wastes that were or may have been discharged to the sewer collection system. Also list all corrective actions that were taken to clean up the spills and procedures that were put in place to prevent a re-occurrence.

### Section D: Production & Process Information

1. Enter the approximate month and year that operations began, or are proposed to begin.
2. Complete as requested. Please describe the various production or manufacturing processes performed at your facility. List the applicable Standard Industrial Classification (SIC) or North American Industry Classification System (NAICS) code, and federal category (required by 40 CFR 403.12(b)(5)(i)) and production rate (e.g., 1000 lbs/day) as applicable for each process. Attach additional sheets as necessary.
3. Complete as described. Illustrate the workflow of water and material used in the manufacturing/production process(es). For each major activity where wastewater is generated, diagram the flow of materials and water from the start of each process to the finished product or activity. Include all unit processes generating wastewater, the general process steps, and the wastes generated by each step. ). Identify all process steps in the diagram, and number each unit process having wastewater discharges to sewer. Use these numbers when illustrating the unit process in the *Building Layout* schematic (Attachment B). Indicate the process flow rates in gallons per day (GPD) with numbered steps keyed to building locations. To determine your average daily volume and maximum daily volume of wastewater flow, you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measurable.



# Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report

## SECTION C. MATERIALS STORAGE INFORMATION (continued)

2. Complete the table below for all chemicals greater than 25 gallons stored and used on-site. If you are required to provide a report to the Portland Fire Bureau or the State Fire Marshall's Office, per the Superfund Amendments and Re-authorization Act of 1986 (SARA Title III) requirements, you may submit a copy of this report in lieu of completing this table. Attach additional sheets as needed.

Chemical Name	Amount Stored	Storage		SARA Title III?	
		Inside	Outside	Yes	No
Example: Trichloroethene	30 gallons	✓		✓	

3. Please describe below, or on a separate sheet of paper, any previous spills or slug discharges from the facility. Also list the clean-up actions taken as well as the remedial measures put in place to prevent a reoccurrence.

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## SECTION D. PRODUCTION & PROCESS INFORMATION

1. Enter date operations began or will begin at this facility: \_\_\_\_\_ (Month/Day/Year)
2. Please describe in detail the process operation(s) or service(s) performed onsite.

Process/Service	Production Rate	SIC/NAICS No.	Federal Category

3. Attach a *Process Flow Diagram* (process flow schematic) as Attachment A to this application.

## INSTRUCTIONS

### Section D: Production & Process Information

4. Complete the table as requested using the given example as a guide. Include all by-products and materials used in or generated from any and all facility processes (attach additional sheets as necessary).
  - a. Complete as requested. Include additional information for more than one user or hauler on a separate sheet of paper.

### Section E: Facility Process Wastewater Information

1. Check all wastewater characteristics that apply.

*High strength* waste is any waste that contains organic or inorganic, dissolved or suspended particulate matter in excess of that which would be found in domestic wastewater, such as food processing waste, restaurant waste, brewery waste, etc. Some of these waste streams may contain a high biochemical oxygen demand (BOD), chemical oxygen demand (COD), and/or high suspended solids (TSS).



# Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report

## SECTION D. PRODUCTION & PROCESS INFORMATION (continued)

4. List each by-product/waste, identify process source of by-product/waste, indicate the appropriate production units generated, and check whether the material is reused, sent offsite for disposal, or recycled:

By-product/Waste	Process	Daily Average	Reused	Recycled	Disposal
<i>Example: Used cutting oil</i>	<i>Cutting &amp; sizing</i>	<i>1 pint</i>		✓	

- a. For each by-product/waste hauled offsite, provide the following information:

Hauler Name: \_\_\_\_\_ DEQ Permit No.: \_\_\_\_\_  
Mailing/Street Address: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

## SECTION E. FACILITY PROCESS WASTEWATER INFORMATION

1. For each product/process listed in Section D, indicate general characteristics of the wastewater generated during the manufacturing process:

Wastewater Types	Wastewater Types, <i>Organic wastes</i>
<input type="checkbox"/> Acids and Acidic Wastes	<input type="checkbox"/> Alcohols
<input type="checkbox"/> Alkali and Caustic Wastes	<input type="checkbox"/> Aldehydes, Ketones
<input type="checkbox"/> Dyes, Coloring Agents	<input type="checkbox"/> Benzene and Benzene Derivatives
<input type="checkbox"/> Electroplating Wastes	<input type="checkbox"/> Ethers
<input type="checkbox"/> Fats, Grease (animal/vegetable)	<input type="checkbox"/> Flammable or explosive wastes
<input type="checkbox"/> Glues	<input type="checkbox"/> Halogenated Organic Compounds
<input type="checkbox"/> Hot Wastes (> 140° F)	<input type="checkbox"/> High Strength Waste: BOD <sub>5</sub> , COD, TSS
<input type="checkbox"/> Inks, Printing Wastes	<input type="checkbox"/> Organic Acids
<input type="checkbox"/> Metal Cleaning and Preparation Wastes	<input type="checkbox"/> Pesticides, Herbicides, Rodenticides
<input type="checkbox"/> Metal Finishing Wastes	<input type="checkbox"/> Phenol-containing Wastes
<input type="checkbox"/> Paint, Pigment Wastes (Latex)	<input type="checkbox"/> Resins, Monomers
<input type="checkbox"/> Paint, Pigment Wastes (Solvent-based)	<input type="checkbox"/> Solvents, Thinners
<input type="checkbox"/> Petroleum-based Oily Wastes	<input type="checkbox"/> Toxics: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
<input type="checkbox"/> pH level: _____ Unknown? <input type="checkbox"/>	<input type="checkbox"/> Other Organic Chemicals: _____
<input type="checkbox"/> Photographic Wastes	_____
<input type="checkbox"/> Pickling Wastes	_____
<input type="checkbox"/> Radioactive Wastes	
<input type="checkbox"/> Soaps, Surfactants, Detergents	
<input type="checkbox"/> Solid or viscous material <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Wastes: _____
<input type="checkbox"/> Soluble Oils, Lubricants	_____
<input type="checkbox"/> Waxes	

## INSTRUCTIONS

### Section E: Facility Process Wastewater Information (continued)

2. Check the appropriate box.
  - a. Indicate the treatment system type(s) used to pretreat your waste stream and indicate the design capacity for all pretreatment systems.
3. Check all boxes that are appropriate.
4. Check the appropriate box.
5. Complete as requested. A Batch Discharge is the controlled discharge of a discrete volume of wastewater for a limited duration.
6. Provide the daily average flows discharged in gallons per day (GPD) for the last 12 months. For estimating sanitary flow, use 15 gallons per employee per day. Be as specific as possible. If the exact amount of water is not known for an item, estimate the amount as best as possible and note how the estimation was determined.



# Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report

## SECTION E. FACILITY PROCESS WASTEWATER INFORMATION (continued)

2. Do you pretreat your facility's wastewater?  Yes  No

a. If yes, check all that apply:

<input type="checkbox"/> Air Flotation	<input type="checkbox"/> Reverse Osmosis
<input type="checkbox"/> Carbon Absorption	<input type="checkbox"/> Screening/Grinder
<input type="checkbox"/> Chemical Precipitation	<input type="checkbox"/> Sedimentation
<input type="checkbox"/> Chlorination	<input type="checkbox"/> Solvent Separation
<input type="checkbox"/> Evaporation	<input type="checkbox"/> Biological Treatment, type: _____
<input type="checkbox"/> Filtration	_____
<input type="checkbox"/> Flow Equalization	<input type="checkbox"/> Other Chemical Treatment, type: _____
<input type="checkbox"/> Grease Trap	_____
<input type="checkbox"/> Grit Removal	<input type="checkbox"/> Other, type: _____
<input type="checkbox"/> Ion Exchange	Design Capacity: _____ GPD
<input type="checkbox"/> Neutralization, pH Control	
<input type="checkbox"/> Oil/Water Separation	
<input type="checkbox"/> Rainwater Diversion or Storage	

3. Check the months of the year when process wastewater discharge occurs or is planned to occur:

Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

4. What is the nature of the discharge?  Continuous  Batch

5. If batch discharges occur or will occur, indicate the following:

% discharged as batch:	_____	%
% discharged as continuous:	_____	%
# batch discharges:	_____	/week
Duration of discharge:	_____	hrs/batch
Volume per batch:	_____	Gal

6. Provide flow information for each of your manufacturing processes or other processes that may generate process wastewater.

Process Description	Average Flow	Maximum Flow	Batch	Continuous
<b>TOTAL PLANT FLOW (GPD):</b>				

## INSTRUCTIONS

### Section E: Facility Process Wastewater Information (continued)

7. Provide the information requested. If *Not Applicable*, state that in the space provided.
8. Check the appropriate box.
  - a. Check the appropriate box.
  - b. Check the appropriate box. Provide and illustrate the necessary information in the *Process Flow Diagram* (process flow schematic).
9. Check the appropriate box.
  - a. Automatic sampling equipment is the mechanical collection of flow-proportioned or time-proportioned samples for pollutant analysis. Wastewater flow metering equipment is measurement of the volume/flow of wastewater by in-line or open channel meters. If either of these devices are used at your facility, describe in the space provided.
10. This section details the collection of the necessary quantitative wastewater information required to establish applicable pretreatment limits and monitoring requirements for each industrial user. Contact the Environmental Compliance Division if there are any questions on applicable limits, parameters to sample, sampling requirements, and from where to take the samples. Samples should be taken of the final effluent prior to discharge to the City's sewer collection system. If there is more than one process wastewater discharge to the City's sewer lines, photocopy this page and supply the analytical results for all process wastewater discharges.

As per 40 CFR 403.12, each Categorical Industrial User (CIU) must submit a Baseline Monitoring Report (BMR) for federally regulated processes. This one-time submittal must identify the nature and concentrations of all regulated pollutants that might be in the facility's discharge, and may be submitted in lieu of the aforementioned monitoring. A BMR reporting form is included with this application. **If a BMR has already been submitted to the City, then another BMR is not required.**

Existing Facility: (report results in concentration (mg/L) or mass (lbs) units)

- a. Each facility will sample, have analyzed, and report on all pollutants as specified by the City in Table 1 or the BMR (CIUs only). If mass limits apply, the facility must report results on a mass basis (concentration x regulated process flow). Attach all calculations.
- b. Samples collected must be representative and taken during peak production.
- c. An existing facility can use existing historical data on file with the City to fulfill this requirement.

New Facility: (report results in concentration (mg/L) or mass (lbs) units)

- a. This includes a new business moving into an existing facility or a new business proposing to construct a new building. A new facility should be in compliance with applicable pretreatment standards upon commencement of discharge and is required to sample and submit the final compliance report within 30 days of commencement of discharge. Because no discharge of process wastewater has occurred, provide your best estimate of the discharge. This estimate shall be confirmed through monitoring of the facility's effluent.
- b. CIUs must submit the BMR 90 days prior to the start of discharge. Estimates may be used, but they shall be confirmed through final compliance monitoring of the facility's effluent.





# Industrial Wastewater Discharge Permit Application & Baseline Monitoring Report

## SECTION E. FACILITY PROCESS WASTEWATER INFORMATION (continued)

7. List all Environmental Control Permits held or issued to this facility:

Permit Type	Permit Number	Date Issued	Expiry Date
Air Discharge Permit			
NPDES Permit(s)			
RCRA/EPA Permit			
Other:			

8. Is an inspection or sampling manhole structure available on site?  Yes  No
- a. If No, is one planned?  Yes  No
- b. If Yes, describe the location below and illustrate it's location as part of the process flow schematic: \_\_\_\_\_

9. Do you use or plan to use automatic sampling or wastewater flow metering equipment?  Yes  No
- Auto-Sampling:  Current  Planned
- Flow Metering:  Current  Planned

a. If Yes, describe equipment below and indicate its present or future location on the process flow schematic. \_\_\_\_\_

10. *Table 1: APPLICABLE LOCAL LIMITS & REQUIRED MONITORING*

Metals	Local Limit	Sample Type	40 CFR 136 Method*	Non-Metals	Local Limit	Sample Type	
<input type="checkbox"/> Arsenic	0.2 mg/L	Composite	200. <input type="checkbox"/>	<input type="checkbox"/> Acrylonitrile	1.0 mg/L	Grab	
<input type="checkbox"/> Cadmium	0.7 mg/L	Composite	200. <input checked="" type="checkbox"/>	<input type="checkbox"/> BOD <sub>5</sub>	N/A	Composite	
<input type="checkbox"/> Chromium	mg/L	Composite	200. <input type="checkbox"/> 6	<input type="checkbox"/> Chlordane	0.03 mg/L	Composite	
<input type="checkbox"/> Copper	mg/L	Composite	200. <input type="checkbox"/> 624	<input type="checkbox"/> Chlorobenzene	0.2 mg/L	Grab	
<input type="checkbox"/> Lead	0.7 mg/L	Composite	200. <input type="checkbox"/> 624	<input type="checkbox"/> Chloroform	0.2 mg/L	Grab	
<input type="checkbox"/> Mercury	0.010 mg/L	Composite	<input type="checkbox"/> D93-80	<input type="checkbox"/> Closed Cup Flash Point	>140 °F <input type="checkbox"/>	Grab	
<input type="checkbox"/> Molybdenum	1.4 mg/L	Composite	200. <input type="checkbox"/> 335.	<input type="checkbox"/> Cyanide	1.2 mg/L <input type="checkbox"/>	Grab	
<input type="checkbox"/> Nickel	2.8 mg/L	Composite	200. <input type="checkbox"/> 624	<input type="checkbox"/> 1,2 Dichloroethane	0.5 mg/L <input type="checkbox"/>	Grab	
<input type="checkbox"/> Selenium	0.6 mg/L	Composite	200. <input type="checkbox"/> 625	<input type="checkbox"/> 2,4-Dinitrotoluene	0.13 mg/L <input type="checkbox"/>	Composite	
<input type="checkbox"/> Silver	0.4 mg/L	Composite	200. <input type="checkbox"/> 625	<input type="checkbox"/> Nitrobenzene	2.0 mg/L	Composite	
<input type="checkbox"/> Zinc	3.7 mg/L	Composite	200. <input type="checkbox"/> 1664	<input type="checkbox"/> Nonpolar Oil & Grease <input type="checkbox"/>	1 mg/L	Grab	
<i>*Suggested 40 CFR 136 Method. Consult 40 CFR 136 for additional approved wastewater analytical methods. Local limits last evaluated and adopted in 2016.</i>				<input type="checkbox"/> 625	<input type="checkbox"/> Pentachlorophenol	0.04 mg/L	Composite
				<input type="checkbox"/> 150.	<input type="checkbox"/> pH	5.0-11.5 S.U.	Grab
				<input type="checkbox"/>	<input type="checkbox"/> Total Suspended Solids	N/A	Composite
				<input type="checkbox"/> 624	<input type="checkbox"/> Trichloroethylene	0.2 mg/L	Grab

## INSTRUCTIONS

### Section E: Facility Process Wastewater Information (continued)

11. Compare the process wastewater data to the discharge limits that are listed in Table 1 and to the federal discharge standards listed in the appropriate subpart of 40 CFR for each regulated process, if applicable. Check the appropriate box and complete as requested. Describe any additional O & M or installation of pretreatment equipment required to meet the listed discharge limits and attach a proposed compliance schedule. Specify the major events needed to achieve compliance as well as the dates for completion of the events. After approval by the city, a Compliance Schedule will be put in place. Failure to comply with the approved schedule will subject the facility to enforcement action.

NOTE: The limits listed in Table 1 are applicable Local Limits for all permitted industrial users. Federally regulated CIUs may have additional pretreatment discharge limits that apply.

12. Complete as requested on a separate sheet of paper, and attach the schedule to this application.

13. Total Toxic Organics (TTO): Facilities that use toxic organics as listed by EPA in its published categorical pretreatment standards, are required to meet the TTO pretreatment standard. Each facility must initially sample its discharge for TTO to determine if the facility's discharge is in compliance with applicable limits. After a facility is found to be in compliance with the applicable TTO discharge limit, the Industrial User may adopt either a certification statement or a solvent management plan in lieu of periodically sampling for TTO if these options are allowed under the facility's category. If you do not use toxic organics in your manufacturing process, you may not be required to sample for TTO. Contact the City's Environmental Compliance Division for guidance.

### Section F: Certifications & Signatures

The Qualified Professional Certification pertains to the actual preparer of this form if different than the Responsible Corporate Official. Said person could be a consultant or professional engineer hired to gather and prepare the required information for this application.

This form shall be signed by a Responsible Corporate Official, as defined in 40 CFR 403.12(l). Said person may be either a general partner, a corporate officer, or by a duly authorized representative who has responsibility for the overall operation of the facility that discharges process wastewater to the City's sewer.

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**Photocopy the completed survey form for your records.**

**Return the original survey to:**

Environmental Compliance Division  
City of Portland Environmental Services  
Water Pollution Control Laboratory  
6543 N. Burlington Avenue  
Portland, OR 97203-5452



**SECTION E. FACILITY PROCESS WASTEWATER INFORMATION (continued)**

11. Compliance Certification: Compare your facility's sample results against listed Local Limits in Table 1 and the applicable 40 CFR subcategory?
- a. Is the facility meeting applicable pretreatment standards on a consistent basis?  Yes  No  Don't Know
  - b. If *Don't Know*, compliance must be evaluated after baseline monitoring is completed.
  - c. If *No*, do you require:
    - i. Additional operation & maintenance (O&M) to achieve compliance?  Yes  No
    - ii. New or additional pretreatment facilities to achieve compliance?  Yes  No
  - d. I have a compliance schedule  Yes  No
12. If *Yes* to 11c-d, attach a description of what is required and a proposed schedule for each task involved for completion of the work. The proposed compliance schedule is subject to prior approval by the City.
13. Are toxic organics presently in use or planned for use at your facility?  Yes  No
- a. Does your facility have a Solvent Management Plan?  Yes  No
    - i. If *Yes*, submit a copy of the Solvent Management Plan with this application as an attachment.
    - ii. If *No*, attach a proposed schedule to develop and implement a Solvent Management Plan with due dates for each task involved. The proposed schedule is subject to prior approval by the City.
  - b. Is a proposed schedule attached?  Yes  No

**SECTION F. CERTIFICATIONS & SIGNATURES**

**Qualified Professional Certification**

I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the General Pretreatment Regulations and amendments thereto and the City's sewer use ordinance. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name (print)	Title
Signature	Date

**Authorized Representative Statement** (40 CFR 403.6(a)(2)(ii))

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 true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name (print)	Title
Signature	Date

## BASELINE MONITORING REPORTING FORM

City of Portland  
Industrial Wastewater Discharge  
Baseline Monitoring Report

COMPANY NAME: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_  
 FACILITY ADDRESS: \_\_\_\_\_  
 PROCESS DESCRIPTION: \_\_\_\_\_  
 SAMPLING LOCATION: \_\_\_\_\_  
 SIC CODE(S): \_\_\_\_\_ ESTIMATED FLOW (GPD): \_\_\_\_\_

Analyze for all pollutants indicated under *required sampling*. The sampling and analysis must be representative of normal work cycles and expected pollutant discharges.

Required Sampling	Pollutant Name	40 CFR 136 Method	Sample Type	Sample Date	Result / Estimate (mg/L or lbs)
<input type="checkbox"/>	pH		Grab		
<input type="checkbox"/>	Arsenic		Composite		
<input type="checkbox"/>	Cadmium		Composite		
<input type="checkbox"/>	Chromium		Composite		
<input type="checkbox"/>	Copper		Composite		
<input type="checkbox"/>	Lead		Composite		
<input type="checkbox"/>	Mercury		Composite		
<input type="checkbox"/>	Molybdenum		Composite		
<input type="checkbox"/>	Nickel		Composite		
<input type="checkbox"/>	Selenium		Composite		
<input type="checkbox"/>	Silver		Composite		
<input type="checkbox"/>	Zinc		Composite		
<input type="checkbox"/>	Oil & Grease (non-polar)	EPA 1664	Grab		
<input type="checkbox"/>	Cyanide A		Grab		
<input type="checkbox"/>	Cyanide T		Grab		
<input type="checkbox"/>	Volatiles		Grab		
<input type="checkbox"/>	Semi-volatiles		Grab		
<input type="checkbox"/>	BETX		Grab		
<input type="checkbox"/>	BOD <sub>5</sub>		Composite		
<input type="checkbox"/>	TSS		Composite		
<input type="checkbox"/>	Sulfide		Grab		

NOTE: A minimum of four grab samples for pH, cyanide, total phenols, oil & grease, sulfide, and volatile organics must be taken if applicable to the facility's categorically regulated process(es).

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 ensure 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.

PRINTED NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## **PROCESS FLOW DIAGRAM**

Use the example below as a guide. A separate drawing should be completed for each major business activity either in the space below or on separate sheets of standard letter-sized paper. Refer to item 3 in *SECTION D., PRODUCTION & PROCESS INFORMATION*, for instructions.

## **BUILDING LAYOUT**

Draw the location of each building on the premises. Show the location of all current or planned water meters, storm drains, numbered unit processes (from Attachment A, Process Flow Diagram), community sewers and lateral sewer connected to the community sewers, automatic sampling equipment (current or planned), location of pretreatment processes, treated flows and untreated flows, name and location of pertinent streets. Use flow schematic to indicate process and process discharge in gallons per day (GPD). Number each side sewer and show possible sampling locations (sampling manhole).

An attached blueprint or drawing of the facilities showing the above items may be substituted for a drawing on this sheet. Use the example on the back side of this sheet as a guide.

## HAZARDOUS WASTE REPORTING REQUIREMENT

The Oregon Department of Environmental Quality (DEQ) and federal regulations (cf., 40 CFR 403.8(f)(2)(iii)), require that The City of Portland ("City") notify industries who discharge wastewater to the public sewer system of Resource Conservation and Recovery Act (RCRA) hazardous waste reporting requirements. A summary of the notification requirement follows:

### Who Must Notify:

All non-domestic users whose wastewater is treated at the City's treatment facilities and that discharge listed or characteristic RCRA hazardous waste to the Publicly Owned Treatment Works (POTW) (except as described below) must notify the City and other regulatory agencies. RCRA listed and characteristic wastes are described in 40 CFR Part 261.

### Wastes Covered by the Notification:

- Any discharge to the POTW of more than 15 kilograms (kg) (33 lb.) per calendar month of a RCRA hazardous waste, or a discharge of **any** quantity of an acutely hazardous waste identified in 40 CFR 261.30(d) and 261.33(e), must be reported as a **one-time** notification.
- A discharge to the POTW of 15 kg (33 lb.) or less per calendar month of a RCRA hazardous waste need **not** be reported, **except** for acutely hazardous waste identified in 40 CFR 261.30(d) and 261.33(e).
- A subsequent discharge of more than 15 kg (33 lb.) per calendar month, or of any quantity of an acutely hazardous waste, must be reported as a **one-time** notification.

Pollutants already reported under reporting requirements for categorical industrial users in baseline monitoring, final and periodic compliance reports are not subject to this notification requirement.

### When the Notification Must be Submitted:

- No later than 180 days after the discharge of the listed or characteristic hazardous waste
- In the case of any new regulations under Section 3001 of RCRA identifying additional characteristics of hazardous waste or listing any additional substance as a hazardous waste, you must notify the City of Portland, State of Oregon, and the EPA of the discharge of such substance within 90 days of the effective date of such regulations
- The notification need be submitted only once for each hazardous waste discharged, except when there will be a substantial change in the volume or character of the hazardous waste discharged (generally because of a planned change in your facility operations). In this case, you must notify the City in advance of the discharge.

### How to Count the Volume of Hazardous Waste Discharged:

If a hazardous waste is mixed with a non-hazardous process or non-process waste stream and the entire mixture is then discharged to the sewer, the volume of the entire waste stream containing hazardous waste is considered hazardous according to the RCRA "mixture rule" in 40 CFR 261.3(a)(2)(iii). The effect of this rule is summarized as follows:

- **Characteristic Wastes:** These wastes are classified as hazardous because they exhibit one of the hazardous characteristics identified in 40 CFR 261.20 – 40 CFR 261.24 (i.e., they are ignitable, corrosive, reactive, or toxic). If these wastes are mixed with non-hazardous materials and the mixture is then discharged to the sewer, the notification must be submitted only if the **entire mixture actually discharged**

is more than 15 kg (33 lb.) per calendar month and if the entire mixture discharged still exhibits the characteristic(s).

- **Listed Wastes:** These are wastes that are classified as hazardous pursuant to being listed in 40 CFR 261.30 – 40 CFR 261.33. If these listed wastes are mixed with non-hazardous materials and then discharged to the sewer, the entire waste stream is considered hazardous and a notification must be submitted. Thus, only if the entire waste stream containing the hazardous waste amounted to 15 kg (33 lb.) or less per calendar month, would the above exemption apply.
- **Questionable Wastes:** If you have any doubt about whether a mixture discharged to the sewer is hazardous, or if you do not wish to perform any calculations which may be necessary under the mixture rule (cf., 40 CFR 261.3(a)(2)(iii)) you should submit the one-time notification.

**Notification Must be Sent to:**

- The City of Portland;
- Oregon DEQ Hazardous Waste Program, **and**;
- The EPA Regional Waste Management Division Director.



### HAZARDOUS WASTE REPORTING FORM

Complete and submit the following form to comply with the RCRA hazardous waste notification requirement.

**GENERATOR INFORMATION:**

<b>Name:</b>		<b>Phone:</b>	
<b>Company:</b>		<b>Email:</b>	
<b>Address:</b>		<b>City, State Zip:</b>	

**HAZARDOUS WASTE INFORMATION:**

Waste Name	EPA Hazardous Waste #	Type of Discharge (Pick one)

If more than **100 kilograms** (220 lbs) of any hazardous waste per calendar month is discharged to the sewer, please include the following items of information for each hazardous waste, to the extent such information is known and readily available:

Waste Name	Hazardous Constituent	Mass in Wastestream (this month, lbs)	Concentration in Wastestream (this month, mg/L)
<b>Initial if N/A:</b>			

*I certify that I have a program in place to reduce the volume and toxicity of hazardous wastes generated to the degree I have determined to be economically practical.*

<b>Printed Name:</b>		<b>Signature:</b>		<b>Date:</b>	
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**MAIL TO:**

The notification must be submitted in writing for any discharge into the City's POTW of any substance, which, if otherwise disposed of, would be a hazardous waste under 40 CFR Part 261.

City of Portland	OR DEQ	US EPA
Industrial Permitting Section Water Pollution Control Lab 6543 N Burlington Ave Portland, OR 97203	Oregon DEQ Manager Haz. Waste Policy & Program Development Department of Environmental Quality 700 NW Multnomah St. Suite # 600 Portland, OR 97232	USEPA Region 10 Director Office of Air, Waste & Toxics USEPA Region 10 AWT-127 1200 6th Avenue Seattle, WA 98102