



PERMIT APPLICATION FOR SIGNIFICANT INDUSTRIAL USER

This application/questionnaire <https://www.glwater.org/iwc/> (🔗 IWC Application Forms 🔗 Permit Application) is designed to enable the Great Lakes Water Authority (GLWA) to make a determination for issuance/reissuance of Industrial Wastewater Discharge Permits. Significant Industrial User who discharge process wastewater in addition to sanitary waste into the sewerage system tributary of the GLWA Water Resource Recovery Facility are required to file this application/reapplication.

- 1) This application must be filed ninety (90) days prior to commencement of discharge and signed by an Authorized Representative of the industrial user.
- 2) This application must include all information specified in Section II-703 of the GLWA Rule [IPP-Rules_2024.pdf](#) or at <https://www.glwater.org/iwc/> (🔗 2024 GLWA RULE - FINAL 🔗 IPP Rules 2024)) and (as applicable) include all information needed to satisfy the federal Baseline Monitoring Report (BMR) requirements of 40 CFR 403.12(b)(1-7).
- 3) A separate application is required for each separate facility.

Section A. General Information		<input type="checkbox"/> BMR	<input type="checkbox"/> New Application	<input type="checkbox"/> Reapplication: Permit No.
1	Company Name			
2	Facility Address			
3	Mailing Address <i>(if different from facility address)</i>			
4	Name of Authorized Representative			
	Title	Telephone Number		
	E-mail Address			
5	Facility Contact Person			
	Title	Telephone Number		
	E-mail Address			
6	Certification Statement			
	I certify under penalty of law that I have personally examined and I am familiar with the information in this application and all attachments and that based on my inquiry of those persons immediately responsible for obtaining the information contained in this application. I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.			
	Authorized Representative Signature			
	Date			

Section B. Business/Product/Service			
1	Do you perform any of the processes listed in Appendix A at the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	If yes, please list process(es) below		
2	Give a narrative description of all processing operations or service activities taking place at the facility address (Add additional sheets as necessary)		
3	Describe all facility operations that generate process wastewater onsite (Add additional sheets as necessary)		
4	Describe your principal product or service		
5	North American Industrial Classification (NAICS) Code https://www.census.gov/naics/		
6	Standard Industrial Classification (SIC) Code https://www.osha.gov/data/sic-manual		
7	Shift and Employee Information		
	Number of workdays per week	Operating hours	-
	Number of shifts per day	Number of Employees	
8	What month and year did your operations begin?		
9	What month and year did the facility's categorical operation(s) begin at the current location?		
10	What month and year did the facility begin discharging wastewater to the sewer?		
11	Do you discharge on holidays*? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	(If yes, please specify)		

* - Legal Holidays: New Year's Day, Martin Luther King Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day

Section C. Other Federal, State and Local Environmental Control Permits

List any Environmental Control Permits held by or for this facility




Regulatory Agency Name	Permit Number	Purpose of Permit

Section D. Water Consumption

1	Water Sources (Check below all that apply)		
	<input type="checkbox"/> Municipal water supply	<input type="checkbox"/> Groundwater (private well)	<input type="checkbox"/> Other (Describe ☞)
	<input type="checkbox"/> Surface water		
2	Water Usage Provide water usages for last twelve (12) months. For BMR or New Application, include supporting documentation (i.e. copies of water bills, meter readings, etc.).		
	From	1 st Quarter	2 nd Quarter
	To	3 rd Quarter	4 th Quarter
	Denote applicable unit used for water usages		
	<input type="checkbox"/> gallons	<input type="checkbox"/> ccf (100 cubic feet or ≈748 gallons)	<input type="checkbox"/> cubic feet

Section E. Wastewater / Solid – Liquid Wastes

1	Does your facility have a wastewater treatment system or operation designed to reduce pollutant levels prior to discharge to the sewer? If yes, describe your specific pretreatment system below (Add additional sheets as necessary).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	Please check all applicable methods of disposal for wastewater and any solid/liquid waste materials generated from your facility.		
	Method of Disposal (Check below all that apply) <input type="checkbox"/> Discharged to sewer <input type="checkbox"/> Hauled to Landfill <input type="checkbox"/> Treated On-site <input type="checkbox"/> Discharged to Pond or Lagoon <input type="checkbox"/> Hauled to off-site Treatment facility <input type="checkbox"/> Other (Describe ☞)		
3	For wastes hauled off-site, are waste manifests available? If yes, provide copies of all waste manifests for last 12 months	<input type="checkbox"/> Yes	<input type="checkbox"/> NA
4	Does your facility have secondary containment for spill control? (Dikes, trenches, storage controls)	<input type="checkbox"/> Yes	<input type="checkbox"/> NA
5	Does your facility have any floor drains in the chemical storage area?	<input type="checkbox"/> Yes	<input type="checkbox"/> NA
6	Does your facility submit Tier I or II information under the SARA Title III Program?	<input type="checkbox"/> Yes	<input type="checkbox"/> NA

7	Is your facility required to submit any of the following regulatory documents?		
	a) Spill Prevention Countermeasure Control (SPCC) Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	b) Pollution Incident Prevention Plan (PIPP)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	c) Contingency Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	d) Safety Data Sheet (SDS)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	e) R Form (Toxic chemical release reporting form)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	f) Treatment, Storage and Disposal Facility Operating License	<input type="checkbox"/> Yes <input type="checkbox"/> No	
g) Other submitted Regulatory Documents (Describe )	<input type="text"/>		
8	Notification of Hazardous Waste (Section II-503) Applies to all Industrial Users to report and submit the notification requirement, under 40 CFR 403.12(p) and GLWA Rules, Section II-503, of substances that would be discharged or released as hazardous waste set forth in 40 CFR 261. For guidance, see GLWA link 2023_01_HzW.pdf or at https://www.glwater.org/iwc/ ( Guidance Information).		
9	Flammable and Combustible Substances (Section II-302, a) Applies to certain Petroleum Refineries, gasoline storage and transfer facilities and chemical manufacturing plants and User discharges with LEL equal or greater than 15%.		
	a) Is your facility a Petroleum Refinery, gasoline transfer or storage facility or chemical manufacturing plant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	b) Does your facility discharge wastewater that contain flammable and combustible substances?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	A "Yes" in a) and/or b) above, the company is required to install a combustible gas monitoring (CGM) system and proceed to c) below. If "No" in a) and/or b), proceed to 9).		
	c) Does your facility install a CGM system to check the presence and level of flammable and combustible substances in the sewer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, provide the following:			
Manufacturer <input type="text"/>			
Model Number <input type="text"/>			
Current LEL Reading <input type="text"/>			
If No, the facility must submit with this application a Compliance Schedule on CGM installation and operation prior to issuance of a final wastewater discharge permit. (The Compliance Schedule consists of i) schedule of events, ii) commencement dates, iii) completion dates and iv) authorized signature.)		<input type="checkbox"/> Attached	
10	pH Monitoring Plan and Monitoring Requirements (Section II-302, b) For guidance, see GLWA link: 2023_02_pH-Plan.pdf or at https://www.glwater.org/iwc/ ( Guidance Information).		
	a) Does your facility perform on-site pH adjustment for operational purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	b) Does your facility process acidic and/or caustic wastes / wastewater for treatment purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	c) Is your facility classified as Centralized Waste Treatment facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	d) Does your facility discharge 25,000 gpd or more wastewater?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If "Yes" in any of the above, your facility needs to develop and submit with this application a pH Monitoring Plan for approval and install an appropriate pH monitoring/recording device. If already installed provide the following:		
	Manufacturer <input type="text"/>		
	Model Number <input type="text"/>		
	If "No" in a) to d) above, the facility will be subjected to appropriate pH monitoring frequency.		
	e) Did you submit with this application your facility's pH Monitoring Plan.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes proceed to Section F. If No, the facility must submit with this application a Compliance Schedule on pH Monitoring requirements. (The Compliance Schedule consists of i) schedule of events, ii) commencement dates, iii) completion dates and iv) authorized signature.)		<input type="checkbox"/> Attached	

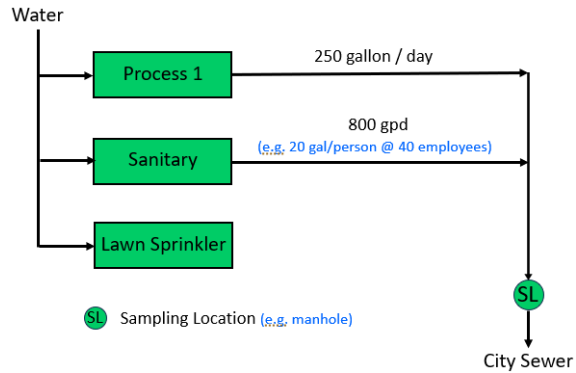
Section F. Process Descriptions/Wastestream Discharge Flows

Process Descriptions	Wastewater Flow (gallons/day)				Discharge Frequency		Days of Discharge (M,T,W,Th,F,Sa,Su)	Hours of Discharge (00:00 AM – 00:00 PM)	Type	
	Average	Maximum	Measured	Estimate	Batch, Intermittent, or Continuous	BIC Describe frequency as clearly as possible			i) Regulated *	ii) Non-regulated or Dilution
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>						
Boiler Makeup / Blowdown			<input type="checkbox"/>	<input type="checkbox"/>						
Air Pollution Control			<input type="checkbox"/>	<input type="checkbox"/>						
Non-Contact Cooling Water			<input type="checkbox"/>	<input type="checkbox"/>						
Sanitary			<input type="checkbox"/>	<input type="checkbox"/>						
Total Plant Flow										
<p>Batch – wastewater discharge occurs on a periodic or episodic basis as part of a volume (e.g. 1-3 times daily, 2 times weekly) Intermittent - wastewater discharge infrequently (e.g. discharge occurs at uneven intervals, sporadically, stops and starts) Continuous - wastewater discharge occurs on a regular basis (e.g. daily) * As defined by 40 CFR 403.6</p>										
Comment										

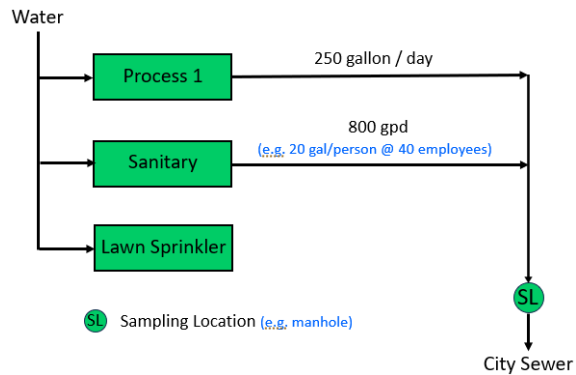
Section G. Wastewater Flow Schematic

Please draw a simplified schematic showing the wastewater flows from each process as they combine to discharge into the city sewer. Refer to the drawing example shown on the left below. (Must comply with Section II-605,b)

Example 1



Example 2



Section H. Wastewater Sampling Location Description (Describe location(s) of all sampling site(s) as referenced above and attach Facility Schematic/ Layout)

1

2

3

Section I. Sampling Plan and Sampling Methodology

1. Sampling Plan (Section II-603, a)

All wastewater sampling must be collected in a manner and form intended to represent the wastewater discharged. Following written notice from the Authority, a permittee shall provide an approvable Sampling Plan. The sampling plan shall describe the sampling protocols and methods of sampling that will be used at the facility during the term of this permit.

See GLWA link: [2023-03-Sampling-Plans.pdf](#) or at <https://www.glwater.org/iwc/> (🔗 Guidance Information) for guidance.

Does your company have a Sampling Plan describing the manner and form intended for representative wastewater self-monitoring? Yes No

If Yes, attach with this application a copy of your Sampling Plan.

If No, the facility must submit with this application the Compliance Schedule on Sampling Plan requirements. (The Compliance Schedule consists of i) schedule of events, ii) commencement dates, iii) completion dates and iv) authorized signature.)

At a minimum, the Sampling Plan shall include:

- a) A description of the sample collection method(s) based on grab, flow-proportional composite or time-proportional composite methods.
- b) Designate applicable requirements for batch and/or continuous discharges, including the release time.
- c) If applicable, the sampler settings, such as pulse, time, sample volume; and
- d) If applicable, description of the flow-measurement equipment and recording device(s).

2. Flow Meter (Section VI, Article VI-403)

At a minimum, the Sampling Plan shall describe the sampling methods to be used for each pollutant parameter identified in the permit. All composite samples shall be collected using flow-proportional sampling method unless the Authority authorizes time-proportional sampling.

Where flow-proportional sampling method is used, the Sampling Plan shall identify the flow measuring equipment available for performing such sampling, the most recent calibration records and the expected daily wastewater discharge volume, hours of discharge, sample volume and the sample aliquot volume.

Time-proportional sampling will only be authorized by the Authority where (i) the permittee can demonstrate with recorded flow data, statistical data, or through equivalent methods, that the wastewater has a constant discharge rate or (ii) the volume of discharge is no greater than 10,000 gallons and the period of discharge is 4 hours or less (provide documentation for GLWA approval).

For installation of flow measuring equipment, a Compliance Schedule must be submitted regarding construction / installation period. In the interim, time-proportional sampling shall be used to collect samples until the flow measuring equipment is installed, calibrated and operated. The time available for this schedule shall not exceed 180 days following permit issuance. (The Compliance Schedule consists of i) schedule of events, ii) commencement dates, iii) completion dates and iv) authorized signature to procure, install and operate the flow meter.

Sampling Location (SL)	Composite Sampling Method (Elect one only per SL)		
	Flow-Proportional Composite Sampling (Default EPA Requirement)	Time-Proportional Composite Sampling (Submit demonstration)	Flow Meter to be installed Submit a Compliance Schedule
SL 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SL 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SL 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If "Time-Proportional Composite Sampling" is/are marked above, attach your demonstration with this application for GLWA approval.

If "Flow Meter to be installed" is/are marked above, submit with this application your Compliance Schedule.

For **Flow Meter Information**, complete also Section L.

Section J: Wastewater Analytical Results and Analyses (For BMR and/or Permit Application)

1	Do you have any analytical results of your wastewater discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	If yes, please record your data below (in mg/l) and attach copies of the analytical results with this application. Where data is not available, you will be required to provide sampling results following notice of permit eligibility.				
	Arsenic	Cadmium	Chrome	Copper	Available Cyanide
	Mercury	Nickel	Silver	Zinc	Total PCB
pH <small>Acidity/Alkalinity</small>	BOD	FOG	P	TSS	Lead Total Phenolic Compounds PFOS (see 3 below)
2	Based on the analytical data provided, are pretreatment standards being met on a consistent basis? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	If No, what additional operational and maintenance plans are under consideration to attain compliance? Describe the schedule of events, commencement dates and completion dates.				

3 If you respond "Yes" to any items in Appendix B, the company is required to sample and analyze the following PFAS pollutants (Unit in parts per trillion or ng/l or nanogram/liter)					
1	11-Chloroeiosafluoro-3-oxaundecane-1-sulfonic acid	11	Perfluorobutanoic acid	21	Perfluorooctane sulfonamide
2	2-N-Ethyl perfluorooctane sulfonamido acetic acid <i>(N-ethyl perfluorooctanesulfonamidoacetic acid)</i>	12	Perfluorodecane Sulfonic acid	22	Perfluorooctane Sulfonic acid
3	2-N-Methyl perfluorooctane sulfonamido acetic acid <i>(N-methyl perfluorooctanesulfonamidoacetic acid)</i>	13	Perfluorodecanoic acid	23	Perfluorooctanoic acid
4	4,8-Dioxa-3H-perfluorononanoic acid	14	Perfluorododecanoic acid	24	Perfluoropentane Sulfonic acid
5	4:2 Fluorotelomer sulfonic acid	15	Perfluoroheptane Sulfonic acid	25	Perfluoropentanoic acid
6	6:2 Fluorotelomer sulfonic acid	16	Perfluoroheptanoic acid	26	Perfluorotetradecanoic acid
7	8:2 Fluorotelomer sulfonic acid	17	Perfluorohexane Sulfonic acid	27	Perfluorotridecanoic acid
8	9-Chlorohexadecafluoro-3-oxanone-1-sulfonic acid	18	Perfluorohexanoic acid	28	Perfluoroundecanoic acid
9	Hexafluoropropylene oxide dimer acid	19	Perfluorononane Sulfonic acid		
10	Perfluorobutane Sulfonic acid	20	Perfluorononanoic acid		
The above analytes shall be reported using US EPA Methods 537.1, 537.1 Rev 1.1, 8327 ASTM D7979 or other authorized Test Method.					
29	2H,2H,3H,3H-Perfluorohexanoic acid <i>(3-Perfluoropropyl propanoic)</i>	35	N-methyl perfluorooctanesulfnamidoethanol	41	Perfluorobutylsulfonamide
30	2H,2H,3H,3H-Perfluorooctanoic acid	36	Nonafluoro-3,6-dioxaheptanoic acid	42	Perfluorododecanesulfonic acid
31	2H,2H,3H,3H-Perfluorodecanoic acid <i>(3-Perfluoroheptyl propanoic acid)</i>	37	Perfluoro(2-ethoxyethane) sulfonic acid	43	Perfluorohexanesulfonamide
32	N-ethyl perfluorooctanesulfonamide	38	Perfluoro-3-methoxypropanoic acid	44	Perfluoropropanesulfonic acid
33	N-ethyl perfluorooctanesulfonamidoethanol	39	Perfluoro-4-(perfluoroethyl) cyclohexylsulfonic acid	45	Perfluoropropanoic acid
34	N-methyl perfluorooctanesulfonamide	40	Perfluoro-4-methoxybutanoic acid		
The above additional analytes shall be reported using US EPA Method 1633.					

Section K: Additional Requirements (For Permit Reapplication only)		
1	Indicate if you intend to monitor for the Individual Phenolic Compounds or Total Phenolic Compounds (Elect one only)	<input type="checkbox"/> Elect to monitor Individual Phenolic Compounds <input type="checkbox"/> Elect to monitor Total Phenolic Compounds
2	<p>For facilities subject to Electroplating (40 CFR 413) and/or Metal Finishing (40 CFR 433), indicate whether your facility intends to submit Total Toxic Organic (TTO) Analysis once a year or submit (Toxic Organic management Plan) TOMP Certification twice a year during Six Month Report submission (Elect one only)</p> <p>Note: During permit renewal, the Electroplating and Metal Finishing facilities, who utilize TOMP Certification, are required to update their TOMP and submit a current TTO analysis.</p>	<input type="checkbox"/> Elect to renew the TOMP with current and complete TTO analysis <input type="checkbox"/> Elect to submit TTO analysis every reporting period
3	For facilities subject to Mass or Production-Based Standards, complete the following:	
	Processing Time (last 12 month operations):	from <input type="text"/> to <input type="text"/>
	Materials Processed On-site	Amount Materials Processed / Month period*
		Process Water Usage**
		/
		/
		/
		/
	<p>* - specify the amount materials processed with processing time and denote unit weight (e.g. pound, kg, tons, etc.) / month</p> <p>** - specify the water usage corresponding with processing time and denote the unit (e.g. gallon, cubic feet)</p>	

Section L: Flow Meter and Water Meter Information

For each sewage flow meter installed at your facility, provide the following information
 (Add additional sheets as necessary)

Flow Meter Information	
Model	
Serial Number	
Units	
Totalizer	<input type="checkbox"/> Non-resettable <input type="checkbox"/> Resettable (Not Accepted by GLWA)
Pulse/Volume	
Gallons/Pulse	

Flow Meter Information	
Model	
Serial Number	
Units	
Totalizer	<input type="checkbox"/> Non-resettable <input type="checkbox"/> Resettable (Not Accepted by GLWA)
Pulse/Volume	
Gallons/Pulse	

For each Water Meter installed at your facility, provide the following information
 (Add additional sheets as necessary). Indicate if "Fire only", etc..

Water Meter Information	
Community	
Wholesale Provider	
Water Meter ID #	
Account #	
Units	
Size	
Comment	

Water Meter Information	
Community	
Wholesale Provider	
Water Meter ID #	
Account #	
Units	
Size	
Comment	

Appendix A INDUSTRIAL PROCESSES

No.	PROCESSES	40 CFR Part	No.	PROCESSES	40 CFR Part
<input type="checkbox"/>	1 Aluminum Forming	467	<input type="checkbox"/>	25 Meat and Poultry Products	432
<input type="checkbox"/>	2 Anodizing	413, 433	<input type="checkbox"/>	26 Metal Finishing	433
<input type="checkbox"/>	3 Battery Manufacturing	461	<input type="checkbox"/>	27 Metal Molding & Casting	421, 464, 467,471
<input type="checkbox"/>	4 Casting Operations	421, 464, 467, 471	<input type="checkbox"/>	28 Metal Products & Machinery	438
<input type="checkbox"/>	5 Centralized Waste Treatment	437	<input type="checkbox"/>	29 Milling	413, 433
<input type="checkbox"/>	6 Chemical Etching	413, 433	<input type="checkbox"/>	30 Nonferrous Metals Forming & Metal Powders	471
<input type="checkbox"/>	7 Coal Mining	434	<input type="checkbox"/>	31 Nonferrous Metals Manufacturing I and II	421
<input type="checkbox"/>	8 Coating	413, 433	<input type="checkbox"/>	32 Ore Mining & Dressing	440
<input type="checkbox"/>	9 Coil Coating	465	<input type="checkbox"/>	33 Organic Chemicals, Plastics, & Synthetic Fibers	446
<input type="checkbox"/>	10 Cold Rolling	420, 467, 468, 471	<input type="checkbox"/>	34 Paint Formulating	446
<input type="checkbox"/>	11 Copper Forming	468	<input type="checkbox"/>	35 Paving & Roofing Materials (Tars & Asphalt)	443
<input type="checkbox"/>	12 Drawing	420, 467, 468, 471	<input type="checkbox"/>	36 Pesticide Chemicals Manufacturing	455
<input type="checkbox"/>	13 Electrical & Electronic Components	469	<input type="checkbox"/>	37 Petroleum Refining	419
<input type="checkbox"/>	14 Electroless Plating	413, 433	<input type="checkbox"/>	38 Pharmaceutical Manufacturing	439
<input type="checkbox"/>	15 Electroplating	413, 433	<input type="checkbox"/>	39 Plastic Molding & Forming	463
<input type="checkbox"/>	16 Extruding	420, 467, 468, 471	<input type="checkbox"/>	40 Porcelain Enameling	466
<input type="checkbox"/>	17 Ferroalloy Manufacturing	424	<input type="checkbox"/>	41 Printed Circuit Board Manufacturing	413
<input type="checkbox"/>	18 Forging	420, 467, 468, 471	<input type="checkbox"/>	42 Pulp, Paper, & Paperboard Mills	430
<input type="checkbox"/>	19 Foundries	420, 421, 464	<input type="checkbox"/>	43 Refining	421
<input type="checkbox"/>	20 Hot Rolling	420, 467, 468, 471	<input type="checkbox"/>	44 Smelting	421
<input type="checkbox"/>	21 Inorganic Chemicals Manufacturing	415	<input type="checkbox"/>	45 Soap & Detergent Manufacturing	417
<input type="checkbox"/>	22 Iron & Steel Manufacturing	420	<input type="checkbox"/>	46 Steam Electric Power Generation	423
<input type="checkbox"/>	23 Landfills	445	<input type="checkbox"/>	47 Timber Products Manufacturing	429
<input type="checkbox"/>	24 Leather Tanning & Finishing	425	<input type="checkbox"/>	48 Transportation Equipment Cleaning	442

Appendix B SOURCES of PER- and POLY-FLOUROALKYL SUBSTANCES (PFAS)

In 2018, the State of Michigan, through the Michigan Department of Environment, Great Lakes and Energy (EGLE), required the GLWA to identify and determine the possible sources of Per- and Poly-Fluoroalkyl Substances (PFAS) within the GLWA service areas. Due to PFAS' impacts on human health and impairments on fisheries, the following are incorporated in this application. Please answer all items accordingly.

1	Does your company use/store PFAS in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, indicate approximately when the company uses PFAS in the past.	<input type="checkbox"/> 1-5 years <input type="checkbox"/> 6-10 years <input type="checkbox"/> > 10 years
2	Does your company currently use/store PFAS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Does your company plan to use PFAS in the future?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Does your company use AFFF firefighting foam?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Does your company perform coating operation (i.e. chrome plating)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Does your company use textile and/or fabric protection chemicals?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Does your company use fume and vapor suppressants, demisters or wetting agents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8	Does your company receive offsite waste for storage and transport?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	Is the company a Centralized Waste Treatment facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10	Is the company a landfill?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11	Is the company a tannery or uses leather treatment chemicals?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12	Does your company perform paint formulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13	Does your company manufacture chemicals?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14	Does your company produce packaging materials using paper and/or cardboard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15	Does your company perform petroleum processing or refining?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16	Does your company use PTFE coatings or Teflon?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you respond "Yes" to any items above, the company must sample and analyze the PFAS pollutants enumerated in Section J,3.

CHECKLIST: **Required Documentations to be included** with this application

				Attached?	
1	Section D,2	Copies of water bills for BMR or New Application		<input type="radio"/> Attached	
2	Section E,3	Waste Manifests		<input type="radio"/> Attached	
3	Section E,8	<input type="radio"/> Initial Notification <input type="radio"/> Amended Notification	Listing of Hazardous Wastes (Refer to 40 CFR 261)	<input type="radio"/> Attached	
4	Section E,9c	Compliance Schedule - Flammable & Combustible Substances		<input type="radio"/> Attached	
5	Section E,10e	pH Monitoring Plan		<input type="radio"/> Attached	
		Compliance Schedule - pH Monitoring Plan & Monitoring Requirements		<input type="radio"/> Attached	
6	Section G	Wastewater Flow Schematic		<input type="radio"/> Attached	
7	Section H	Facility Schematic/Drawing depicting the Sampling Location(s)		<input type="radio"/> Attached	
8	Section I,1	Sampling Plan		<input type="radio"/> Attached	
		Compliance Schedule - Sampling Plan		<input type="radio"/> Attached	
9	Section I,2	Sampling Location (SL)	SL#1	SL#2	SL#3
		Demonstration for utilizing Time-Proportional Composite Sampling method	<input type="radio"/> Attached	<input type="radio"/> Attached	<input type="radio"/> Attached
		Compliance Schedule for Flow Meter Installation	<input type="radio"/> Attached	<input type="radio"/> Attached	<input type="radio"/> Attached
10	Section J,1	Wastewater Analysis for BMR or New Application		<input type="radio"/> Attached	
11	Section J,3	PFAS Analysis (see Appendix B) for BMR or New Application	<input type="radio"/> Attached	<input type="radio"/> NA	
12	Section K,2	Renew Toxic Organic Management Plan (TOMP) with current TTO Analysis		<input type="radio"/> Attached	