

# BUDD INLET TREATMENT PLANT APPLICATION FOR DISCHARGE OF COMMERCIAL WASTEWATER



The application form must be filled out completely and signed by the owner(s) of the company. If the business address is a P.O. Box, then a street address is required (i.e. where the vehicles are parked).

## Business Information

Business Name \_\_\_\_\_

Business Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street Address (if different from mailing address) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Owner(s) \_\_\_\_\_

Owner(s) Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Owner's Phone \_\_\_\_\_

Email Address \_\_\_\_\_

## Type of Hauled Wastewater

Grey Water Tank Containing: \_\_\_\_\_

Other: \_\_\_\_\_

Portable Toilet

Description of wastewater generating process:

If process generates any suspended or settleable solids in the wastewater, how do you remove the solids prior to discharging?

If process generates wastes that may be dangerous or hazardous, how are they disposed?

List the products or chemicals used that may be present in the discharge (attach SDS with application):

**Vehicle Information**

Each vehicle that discharges at LOTT must have a designated Proximity Card. Please list the vehicles you would like issued a Proximity Card.

Year	Make	License No.	Capacity (gals)	LOTT Access Card No. <i>(for office use only)</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Certification Statement**

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 gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering 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 fines and imprisonment for willful violations.

\_\_\_\_\_  
Name of Owner (Please Type or Print)                      Signature of Owner                      Date

\_\_\_\_\_  
Name of Owner (Please Type or Print)                      Signature of Owner                      Date