

CITY OF TAMPA  
WASTEWATER DEPARTMENT  
**TRANSPORTED WASTE DISCHARGE PERMIT APPLICATION**

Industrial Pretreatment  
Howard F. Curren Advanced Wastewater Treatment Plant  
2700 Maritime Blvd.  
Tampa, Florida 33605  
Phone: (813) 247-3451 ext. 55264 or 55263

Instructions for Transported Waste Discharge Permit Application

General:

1. Attach additional sheets for any information you report that does not readily fit in the space provided on this form.
2. Answer questions completely and accurately. Contact Industrial Pretreatment at (813) 247-3451 ext. 55264 or 55263 during business hours for assistance with the application.
3. Indicate "None" or "NA" (not applicable) if necessary rather than leaving blanks to better help us understand the activities for which you are requesting a permit.
4. Clearly indicate any information as "planned," "estimated," "typically," "projected," etc., if that information does not represent current or actual activities at the time you sign and date this application.

Section B

1. For example: contract trucking of wastewaters, portable toilet servicing, trucking of wastewaters generated by other activities within your organization, etc.
2. Use Attachment A or the most current edition of the North American Industrial Classification System (NAICS) manual (available from the Government Printing Office) which may be found at a library. Provide NAICS Code Numbers for all processes and activities at your facility. Attachment A is a partial listing and may not include an appropriate NAICS Code for your facility.

Section C

3. Use Attachment A or the most current edition of the North American Industrial Classification System (NAICS) manual (available from the Government Printing Office) which may be found at a library. Provide NAICS Code Numbers for all processes and activities at the generating facility. Attachment A is a partial listing and may not include an appropriate NAICS Code for the facility.
4. Label these descriptions as "Facility 1," "Facility 2," etc., so they can be referenced to your answers in Section D - #1.

**Return the completed application to the address listed at the top of page 1.**

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Current Permit # \_\_\_\_\_

**SECTION A. GENERAL INFORMATION**

1. Company Name: \_\_\_\_\_

2. Facility Address: \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

4. Contact Person/Title: \_\_\_\_\_

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

5. Owner/Plant Manager: \_\_\_\_\_

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

**SECTION B. PERMITTEE SERVICE ACTIVITIES**

1. Type of Services:

\_\_\_\_\_

2. North American Industrial Classification System (NAICS) Codes. List NAICS codes for all activities at your company, in descending order of percentage of facility activity, include attachment if more than five NAICS codes. (See Attachment A.)

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_ d. \_\_\_\_\_ e. \_\_\_\_\_

3. Give a complete description of all services and activities offered by your organization including the trucking of wastewaters:

\_\_\_\_\_

\_\_\_\_\_

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**SECTION C. GENERATING FACILITY ACTIVITIES**

1. Will you be providing wastewater trucking services for more than one facility? \_\_\_\_\_ (y/n)

2. Types of facilities or events you will be providing wastewater trucking services for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. North American Industrial Classification System Codes. List NAICS codes for all activities at the generating facility, in descending order of percentage of facility activity. Attach list of NAICS codes for each generating facility. (See Attachment A)

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_ d. \_\_\_\_\_ e. \_\_\_\_\_

4. Give a complete description of manufacturing or service activities at each generating facility:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Are there seasonal variations of activities at the facility(ies) you will be servicing ? \_\_\_\_\_ (y/n)

6. Are there seasonal variations of your service activities? \_\_\_\_\_ (y/n)

a. If so, which months are typically considered :

On Season: \_\_\_\_\_ Off Season: \_\_\_\_\_

On season: days of operation: S M T W R F S Hours of operation: \_\_\_\_\_

# Drivers : \_\_\_\_\_ # Tank Trucks in operation : \_\_\_\_\_

Off season: days of operation: S M T W R F S Hours of operation: \_\_\_\_\_

# Drivers : \_\_\_\_\_ # Tank Trucks in operation : \_\_\_\_\_

**SECTION D. WATER PROFILE**

1. What is the original source of the water used at the facility(ies) generating the trucked wastewaters?

Water sources (indicate gpd or 100ft<sup>3</sup>) C = City/County SW = Surface Water W = Well O = Other

Facility 1: C \_\_\_\_\_ SW \_\_\_\_\_ W \_\_\_\_\_ O \_\_\_\_\_

Facility 2: C \_\_\_\_\_ SW \_\_\_\_\_ W \_\_\_\_\_ O \_\_\_\_\_

Facility 3: C \_\_\_\_\_ SW \_\_\_\_\_ W \_\_\_\_\_ O \_\_\_\_\_

Facility 4: C \_\_\_\_\_ SW \_\_\_\_\_ W \_\_\_\_\_ O \_\_\_\_\_

**SECTION E. TYPES OF WASTEWATER / QUANTITIES**

1. If you are an existing service, where are you currently disposing your wastewater?

\_\_\_\_\_ Sewer (utility name : \_\_\_\_\_ phone: \_\_\_\_\_)

\_\_\_\_\_ Ditch, creek, other surface water body

Permitting Authority

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Permit number \_\_\_\_\_

\_\_\_\_\_ Land application

Permitting Authority

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Permit number \_\_\_\_\_

\_\_\_\_\_ Other, explain \_\_\_\_\_

2. Indicate any equipment, processes, or chemical used to pretreat wastewater before it is discharged from your trucks:  
(indicate current – C, or planned - P)

- \_\_\_\_\_ Air flotation
- \_\_\_\_\_ Biological treatment, type: \_\_\_\_\_
- \_\_\_\_\_ Centrifuge
- \_\_\_\_\_ Chemical disinfection
- \_\_\_\_\_ Chemical precipitation
- \_\_\_\_\_ Chlorination
- \_\_\_\_\_ Filtration
- \_\_\_\_\_ Grease or oil separation, type: \_\_\_\_\_
- \_\_\_\_\_ Grease trap
- \_\_\_\_\_ Grinding filter
- \_\_\_\_\_ Grit removal
- \_\_\_\_\_ Neutralization, pH correction
- \_\_\_\_\_ Screening
- \_\_\_\_\_ Sedimentation
- \_\_\_\_\_ Septic tank
- \_\_\_\_\_ Sump
- \_\_\_\_\_ Other chemical treatment, type: \_\_\_\_\_
- \_\_\_\_\_ Other physical treatment, type: \_\_\_\_\_
- \_\_\_\_\_ Other, type: \_\_\_\_\_

3. Describe processes, equipment, or chemicals as indicated in question #2 (indicate current or planned):

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## SECTION F. CATEGORICAL FACILITIES

1. Please indicate if any of the pretreatment categories listed below are known to be applicable, or will be applicable, to any of the facilities you will be servicing. If none of these categories are applicable to the facility(ies), initial here: \_\_\_\_\_ .

- 40 CFR Part 467 - Aluminum Forming
- 40 CFR Part 427 - Asbestos Manufacturing
- 40 CFR Part 461 - Battery Manufacturing
- 40 CFR Part 431 - Builders Paper and Board Mills
- 40 CFR Part 407 - Canned and Preserved Fruits And Vegetables Processing
- 40 CFR Part 408 - Canned and Preserved Seafood Processing
- 40 CFR Part 458 - Carbon Black
- 40 CFR Part 411 - Cement Manufacturing
- 40 CFR Part 437 - Centralized Waste Treatment
- 40 CFR Part 434 - Coal Mining
- 40 CFR Part 465 - Coil Coating
- 40 CFR Part 468 - Copper Forming
- 40 CFR Part 405 - Dairy Products
- 40 CFR Part 469 - Electric or Electronic Component Manufacturing
- 40 CFR Part 413 - Electroplating
- 40 CFR Part 457 - Explosives Manufacturing
- 40 CFR Part 412 - Feedlots
- 40 CFR Part 424 - Ferroalloy Manufacturing
- 40 CFR Part 418 - Fertilizer Manufacturing
- 40 CFR Part 426 - Glass Manufacturing
- 40 CFR Part 406 - Grain Mills
- 40 CFR Part 454 - Gum and Wood Chemicals
- 40 CFR Part 460 - Hospitals
- 40 CFR Part 447 - Ink Formulating
- 40 CFR Part 415 - Inorganic Chemicals
- 40 CFR Part 420 - Iron and Steel
- 40 CFR Part 425 - Leather Tanning or Finishing
- 40 CFR Part 432 - Meat Products
- 40 CFR Part 464 - Metal Casting or Molding
- 40 CFR Part 433 - Metal Finishing
- 40 CFR Part 436 - Mineral Mining and Processing
- 40 CFR Part 471 - Nonferrous Metals Forming & Metal Powders
- 40 CFR Part 421 - Nonferrous Metals Manufacturing
- 40 CFR Part 435 - Oil and Gas Extraction
- 40 CFR Part 440 - Ore mining and Dressing
- 40 CFR Part 414 - Organic Chemicals Manufacturing
- 40 CFR Part 446 - Paint Formulating
- 40 CFR Part 443 - Paving or Roofing Materials
- 40 CFR Part 455 - Pesticide Chemicals
- 40 CFR Part 419 - Petroleum Refining
- 40 CFR Part 439 - Pharmaceutical
- 40 CFR Part 422 - Phosphate Manufacturing
- 40 CFR Part 459 - Photographic Processing (includes Micrographics)
- 40 CFR Part 463 - Plastics Molding and Forming
- 40 CFR Part 466 - Porcelain Enamel
- 40 CFR Part 430 - Pulp, Paper, Paperboard
- 40 CFR Part 428 - Rubber
- 40 CFR Part 417 - Soap or Detergent Manufacturing
- 40 CFR Part 423 - Steam Electric
- 40 CFR Part 409 - Sugar Processing
- 40 CFR Part 410 - Textile Mills
- 40 CFR Part 429 - Timber Products
- 40 CFR Part 442 - Transportation Equipment Cleaning

**SECTION G. SIGNATORY REQUIREMENTS**

This application must be signed by a duly authorized representative of the user:

1. If the user is a corporation:

(a) The president, secretary, treasurer, or a 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; or

(b) The manager of one or more manufacturing, production, or operating facilities providing the manager is authorized to make management decisions that govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiate and direct other comprehensive measures to assure long-term environmental compliance with environmental laws and regulations; can ensure that the necessary systems are established or actions taken to gather complete and accurate information for individual wastewater discharge permit requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

2. If the user is a partnership or sole proprietorship: a general partner or proprietor, respectively.

3. If the user is a Federal, State, or local government facility: a director or highest official appointed or designated to oversee the operations and performance of the activities of the government facility, or their designee.

4. The individuals described in paragraphs 1 through 3, above, may designate a duly authorized representative if the authorization is in writing, the authorization specifies the individual or position responsible for the overall operation of the facility from which the discharge originates or having overall responsibility for environmental matters for the company, and the written authorization is submitted to the city.

*"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."*

By \_\_\_\_\_  
(signature) (date)

Name \_\_\_\_\_  
(typed)

Title \_\_\_\_\_

\*\*\**(If the signer is a designate as described in paragraph 4, above, written authorization from the users' duly authorized representative specifying the designate and the designate's position must be submitted with the application.)*