

**GROUNDWATER REMEDIATION USER
APPLICATION
FOR
PERMIT TO DISCHARGE**

MSD



Metropolitan Sewerage District of Buncombe County, North Carolina
Industrial & Commercial Waste Division
2028 Riverside Drive
Asheville, North Carolina 28804
Telephone (828) 254-9646
Telecopier (828) 232-5546

MSD USE ONLY

ISSUED:		20
RECEIVED:		20
REVIEWED:		20
RETURNED FOR COMMENT:		20

Pursuant to the Sewer Use Ordinance of the Metropolitan Sewerage District of Buncombe County, North Carolina (MSD), all persons who are users or may become users of the sewerage systems are subject to regulation. Some of the objectives of our Ordinance and this application are:

- To prevent the introduction of pollutants into the Sewerage System which will interfere with the operation of the Sewerage System or contaminate the resulting sludge generated;
- To prevent the introduction of pollutants into the Sewerage System which will pass through the system, inadequately treated, into any waters of the State or otherwise be incompatible with the Sewerage System;
- To promote reuse and recycling of contaminated groundwater; and
- To provide for the regulation of direct and indirect contributors to the Sewerage System, through the issuance of permits to certain non-domestic Users and through enforcement of general requirements for the other Users; authorizes monitoring and enforcement activities, requires User reporting and provides for the setting of fees for the equitable distribution of costs.

1. NAME OF COMPANY OWNING THE SITE: _____

Site Location: _____ Phone: () _____

City: _____ State: **NC** Zip: _____

2. COMPANY'S CHIEF EXECUTIVE OFFICER: _____

Name: _____ Title: _____

Mailing Address: _____ Phone: () _____

City: _____ State: _____ Zip: _____

3. NAME OF COMPANY MANAGING THE SITE: _____

Mailing Address: _____ Phone: () _____

City: _____ State: _____ Zip: _____

4. PERSON ON SITE (Authorized to Represent this Firm in Official Dealings with the MSD)

Name: _____ Title: _____

5. TYPE OF APPLICATION

- New remediation system facility (Anticipated date of discharge: _____) Renewal for remediation system
- Revision for change in discharge or system modification Change in ownership

6. GENERAL INSTRUCTIONS

- a) All terms used herein are as defined in the Sewer Use Ordinance of MSD.
- b) Where Remediated groundwater is discharged, a Permit to Discharge Waste will be issued to the User (or rejected) subject to the requirements of the Sewer Use Ordinance of MSD and any special requirements as contained in the Permit to Discharge Remediated Groundwater.
- c) The User may, if so desired, assert a business confidentiality claim covering all or part of the information in this Application in accordance with provisions of Section 12 of the Sewer Use Ordinance of MSD. To file such a claim, contact the General-Manager of MSD for further details.
- d) Submit the completed Application and attachments to:

General Manager
Metropolitan Sewerage District of Buncombe County
2028 Riverside Drive
Asheville, North Carolina 28804

7. GENERAL PERMIT CONDITIONS

- a. A Permit issued in response to this Application is subject to all applicable provisions of the Sewer Use Ordinance of MSD, NPDES No. NC0024911 for the operation of the Metropolitan Wastewater Treatment Plant by MSD and all applicable State and Federal Regulations.
- b. A Permit issued in response to this Application is required for construction and operation of any pretreatment facilities and/or continued operation of existing pretreatment facilities.
- c. This Application and all reports or information submitted pursuant to the requirements, thereof, must be signed and certified by an authorized representative of the User.
- d. The provisions of a Permit issued in response to this Application are severable and, if any provision of such Permit or the Application of any provision of such Permit to any circumstances is held invalid, the Application of such provision to other circumstances and the remainder of such Permit shall not be affected thereby.
- e. It is the responsibility of each Industrial or Commercial User to insure that all sludges generated by the User of a Permit issued in response to this Application, are managed under applicable sludge management requirements specified in all applicable State and Federal regulations.
- f. Notice is hereby given that any and all significant violations of provisions of the MSD Sewer Use Ordinance by the User of a Permit issued in response to this Application or any other Users of the MSD Sewerage System and a list of resulting enforcement actions taken by MSD will be published each year in the local newspaper. For the purpose of this Section, a “significant violation” shall be as defined in Subsection 1.03.64 of the Sewer Use Ordinance of MSD.

8. INDUSTRIAL CATEGORY

- a. Provide a brief narrative description of the manufacturing, production or service activities **performed by the company owning the site during time the groundwater was contaminated.**

	Description of Activities
1)	
2)	
3)	
4)	

- b. Provide a brief narrative description of the manufacturing, production or service activities **currently performed by the company owning the site.**

	Description of Activities
1)	
2)	
3)	
4)	

- c. Indicate North American Industry Classification System (NAICS) number(s) for all processes currently in use. *(If more than one applies, list in descending order of importance.)*

9) RECOVERY WELLS (wells contributing the water to pretreatment system)

Well's Designated Name(s) <i>(i.e.: RW-01)</i>	GPM	Pump-Time Hours/Day	Pump-Time Days/Week or Days/Year

10) **REMEDICATION PROCESS**

a) Indicate all pretreatment devices or processes used for treating groundwater. (Check all that are utilized.)

- | | |
|---|---|
| <input type="checkbox"/> Activated carbon | <input type="checkbox"/> Grit Sedimentation |
| <input type="checkbox"/> Air stripping | <input type="checkbox"/> Ion Exchange |
| <input type="checkbox"/> Centrifuge/ Cyclone Separation | <input type="checkbox"/> Microfiltration |
| <input type="checkbox"/> Chemical Precipitation | <input type="checkbox"/> Nanofiltration |
| <input type="checkbox"/> Chlorination | <input type="checkbox"/> Ozonation |
| <input type="checkbox"/> Biological Treatment | <input type="checkbox"/> pH Neutralization |
| <input type="checkbox"/> Dissolved Air Floatation | <input type="checkbox"/> Reverse Osmosis |
| <input type="checkbox"/> Filtration | <input type="checkbox"/> Screening |
| <input type="checkbox"/> Flocculation | <input type="checkbox"/> Ultrafiltration |
| <input type="checkbox"/> Flow Equalization | <input type="checkbox"/> Other * |
| <input type="checkbox"/> Grease or Oil Separation | |

b) Is the treatment of groundwater: batch or continuous?

c) If batch, indicate:

amount of gallons/batch

average number of batches per 24-hour day or 7 day week.

d) If continuous, indicate the average flow for 24-hour day

e) Is operation subject to seasonal variation?

Yes

No

f) If "Yes", describe:

(1) Standard waste flow gallons per day (GPD) during the months of

(2) Expected seasonal variances gallons per day (GPD) during the months of

10) **REMEDIATION PROCESS (con't)**

e. Does operation shut down for vacation, maintenance, or other reasons?

Yes

No

f. If "Yes" indicate period when shutdown occurs and reasons:

11) **WASTES FROM PROCESS**

a. Are any liquid wastes, by-products, material residues or sludges from this pretreatment facility disposed of by a means other than discharging to the MSD sewer lines?

Yes (If "yes", complete items 14. b., c., d. and e.)

No (If "no", skip remainder of Section 14.)

b. These wastes may best be described as:

Generated Wastes	Description	Estimated Gallons or Pounds Per Year Generated
Acids		
Alkalies		
Heavy Metal Sludges		
Inks/Dyes		
Oil and/or Grease		
Organic Compounds		
Pesticides		
Settleable Residues		
Solvents		
Other Hazardous Wastes		
By-Products		
Other Wastes		

c. For the above checked wastes, does your company practice?

Storage

On-site

Off-site

Disposal

On-site

Off-site

11) **WASTES FROM PROCESS (con't)**

- d. Briefly describe the method(s) of storage or disposal checked above. Indicate whether landfill, incineration, resource recovery or contract hauling. Identify contract parties or facilities involved.

Waste	Method of disposal

12) **CHANGES TO PROCESS**

- a) Are any pretreatment process changes or expansions planned during the next 5 years, which would alter wastewater volumes or characteristics?

Yes

No

- b) If yes, briefly describe these changes and their effects on the wastewater discharge volume and characteristics: (Attach additional sheets if needed)

13. **MONITORING**

- a) Schematic information:

- (1) Provide a simple 8 1/2" x 11" drawing or sketch of the total plant area showing the location of the Recovery Wells, Monitoring Wells and Remediation System.
- (2) Provide a systematic design of the groundwater pretreatment system, showing tanks, pumps, chemicals, meters, sampling points.

13. MONITORING (con't)

- b) Attach a copy to this application of the most recent data analyses performed on the Monitoring/Recovery Wells. Be sure to include the date of the analysis, name of laboratory performing the analysis, and location(s) from which sample(s) were taken (attach sketches, plans, etc., as necessary).

- c) Size of line discharging from the pretreatment system. _____

14. WASTE CHARACTERIZATION

- a. Please indicate the pollutants you are required to monitor and report to the State of North Carolina or the Environmental Protection Agency.

Chemical Name

Chemical Name

15. EXECUTION OF APPLICATION

Company Name: _____
Authorized Signature: * _____
Title: _____
Date: _____

** Authorized signature must correspond to Item 2 or 4 from Page 1 of this Application.*