

**INSTRUCTIONS TO FILL OUT  
WASTEWATER DISCHARGE PERMIT APPLICATION  
BASELINE MONITORING REPORT**

All questions must be answered. **DO NOT LEAVE BLANKS.** If a question is not applicable, indicate so on the form. Instructions to the questions on the permit application are given below. If you have any questions while completing the permit application, please contact the Environmental Compliance Inspector.

**SECTION A - INSTRUCTIONS (GENERAL INFORMATION)**

1. Enter the company's legal name. Do not use a colloquial name.
  - a. If the company has more than one facility, enter the facility name. Give the name, as it is legally referred to by the company (i.e. Plant 1, Louisville Plant, etc.).
  - b. If the company has a corporate owner with a name different from that of the company, enter the corporate owner name.
2. Provide the plant (facility) location of the company that is applying for a discharge permit.
3. Provide the mailing address where correspondence from MSD may be sent.
4. Provide all the names of the authorized signatories for this facility for the purpose of signing all reports. The designated signatory is defined as:
  - a. A responsible corporate officer, if the Industrial User submitting the reports is a corporation. For the purpose of this paragraph, a responsible corporate officer means:
    - (i) a president, secretary, treasurer, or 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
    - (ii) the manager of one or more manufacturing, production, or operation facilities employing more than 250 persons, if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
  - b. A general partner or proprietor if the Industrial User submitting the reports is a partnership or sole proprietorship respectively.
  - c. The principal executive officer or director having responsibility for the overall operation of the discharging facility if the Industrial User submitting the reports is a Federal, State, or local governmental entity, or their agents.
  - d. A duly authorized representative of the individual designated in paragraph (a), (b), or (c) of this section if:
    - (i) the authorization is made in writing by the individual described in paragraph (a), (b), or (c);
    - (ii) the authorization specifies either an individual or a position having responsibility for the overall operation of the facility from which the Industrial Discharge originates, such as the plant manager, operator of a well, or well field superintendent, or a position of equivalent responsibility, or having overall responsibility for environmental matters for the company; and

- (iii) the written authorization is submitted to the MSD.
  - e. If an authorization under paragraph (d) of this section is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, overall responsibility for environmental matters for the company, a new authorization satisfying the requirements of paragraph (d) of this section must be submitted to the MSD prior to or together with any reports to be signed by an authorized representative.
5. Provide the name of a person who is thoroughly familiar with the facts reported on this form and who can be contacted by MSD (i.e., the plant manager).

**SECTION B - INSTRUCTIONS (BUSINESS OPERATIONS)**

1. Describe the type of business operations that occur at your facility. Include all activities of manufacturing, assembly, or services offered.
2. For all processes found on the premises, indicate the Standard Industrial Classification (SIC) Code Number, as found in the most recent Edition of Standard Industrial Classification Manual prepared by the Executive Office of the President, Office of Management and Budget. This document is available from the Government Printing Office in Washington D.C., or in San Francisco, California. **DO NOT USE PREVIOUS EDITIONS OF THE MANUAL.** Copies of the manual are also available at most public libraries.
3. List the types of products manufactured or assembled at your facility or the type of service offered (i.e. commercial laundry, hospital, etc.). Estimate the average and maximum amounts produced daily for each operation or volume of service offered (i.e. lb. of laundry taken in at commercial cleaner, number of patients serviced at a hospital, etc.). Be sure to **specify the units of production or service (lb/hr, GPD, etc.)**. Attach additional pages as necessary.
4. Indicate hours of operation or production per day (include times and days of the week) and days of operation per year. Also indicate the hours of wastewater discharge per day, if different from the hours of operation/production.
5. Indicate the date the facility began operation, or if the facility is new the date of expected

startup. **SECTION C - INSTRUCTIONS (WATER SUPPLY)**

1. Check off all applicable sources of water. If you receive water from a municipal water utility other than Louisville Water Company, indicate the name of the utility.

If the Louisville Water Company was checked above as a water source please attach a copy of the last bill.

**SECTION D - INSTRUCTIONS (WASTEWATER DISCHARGE INFORMATION)**

1.
  - a. For an existing business, indicate whether or not your facility is currently connected to the MSD sewer system. If it is not, indicate if you have applied for a sewer hookup.
  - b. For a new business, indicate whether or not your facility will occupy an existing building. If a new building is to be constructed, indicate if you have obtained a building permit. Indicate whether or not your facility will be connected to the MSD sewer system.
2. For each outfall at your facility; list the size of the sewer, location of the outfall in relation to landmarks at the facility (i.e. outfall located in the grass on northwest corner of Building #1), and the average flow

through the outfall in gallons per day. If there are more than three outfalls at your facility, include this information on an additional sheet and attach to permit application.

3. Fill out a Wastestream Classification Sheet (WCS) for your facility. Follow the example with instructions on how to fill out a WCS. There are additional instructions attached near the application. The WCS must include all sources of wastewater generated at your facility that are to be discharged to the MSD sewer system.
4. Indicate if any process or wastewater treatment changes are planned for the next three years which would affect wastewater discharge volumes and/or characteristics.
5. If you answered YES to #4, describe the planned changes and their effects on wastewater discharge. Attach additional sheets if necessary.
6. Indicate if any source reduction or pollution prevention methods are currently in use or are planned for your facility. If you answer NO to this question, skip to next section.
7. If you answered YES to #6, describe the methods of source reduction or pollution prevention used. Attach additional sheets if necessary.

#### **SECTION E - DISCHARGES TO THE COMBINED SEWER SYSTEM**

1. Using Figure 1, indicate if the facility is located within the Combined Sewer Service Area. If the facility is not located within the Combined Sewer Service Area, indicate to which wastewater treatment plant the facility discharges. If you do not know, please contact MSD's Customer Relations Department at 587-0603.
2. Indicate whether wastewater is discharged on a batch basis. If wastewater is discharged on a batch basis, indicate:
  - the volume of typical batch discharges;
  - the typical time between batch discharges;
  - the volume available for batch discharge storage.
3. Indicate whether wastewater is discharged on an intermittent basis. If wastewater is discharged on an intermittent basis, indicate whether you can control the discharge. If you can control the discharge, indicate:
  - whether you can delay clean up activities and the time they can be delayed and/or
  - whether you can change product campaigns runs to low water usage ones.
4. Indicate whether the facility has equalization or storage available for wastewater. If either is available, indicate:
  - the volume available;
  - the average daily flow subject to equalization/storage;
  - the duration of available storage at the average daily flow rate;
  - whether the volume available for equalization or storage can be increased by operational changes. An example is dropping the equalization tank in anticipation of wet weather to increase the holding capacity of the tank.

5. Indicate whether stormwater (roof drains and site runoff) from your site enters the Combined Sewer System. If it does enter the Combined Sewer System, indicate whether it:
  - Commingles with wastewater before discharge;
  - Discharge via a separate stormwater outfall sewer;
  - Run off the site into a catch basin(s);
  - Run off the site into a stream or other water body and the name of the stream/waterbody.
  
6. Indicate whether site sotrmwater can be reduced or controlled by any of the following means:
  - Infiltration to groundwater (ie. Rain gardens, bioretention swales)
  - Captured and released at a slow rate (Rain barrels, storage basins, etc.)
  - Captured and reused
  - Removed from direct discharge to sewer by diverting to overland discharge
  - Constructing 'green' roofs
  
7. Indicate whether you have a KPDES permit for stormwater from the Kentucky Division of Water. If you have a KPDES permit for stormwater, enclose a copy of the permit and the results of any sampling conducted with this application.
  
8. Indicate whether you have a stormwater management plan for the facility and if applicable, enclose a copy with this application.
  
9. Provide a map of the site which shows the percentages of impervious and pervious surfaces and their associated directions of stormwater flow off the property.

**SECTION F - INSTRUCTIONS (TREATMENT)**

1. Indicate if any wastewater treatment occurs at your facility.
2. Indicate if any changes to existing wastewater treatment system(s) are planned for the next three years. If any changes are planned, please describe. Attach additional sheets if necessary.
3. Check off any treatment processes used or planned for your facility.
4. Describe in detail any treatment processes which take place at your facility as indicated in #3.
5. Describe any bypass lines or unusual occurrence procedures which may allow untreated wastewater to be discharged to MSD.
6. Indicate if there is a written procedure for maintenance on treatment equipment. **SECTION**

**SECTION G - INSTRUCTIONS (FACILITY OPERATIONAL CHARACTERISTICS)**

1. List the number of shifts worked per day and the number of employees working per shift per day.

2. Indicate whether the business activity is continuous throughout the year or if it is seasonal. If the activity is seasonal, circle the months of the year during which business activity occurs. Make any comments you feel are required to describe the variation in operation of your business activity.
3. Indicate whether the facility wastewater discharge is continuous throughout the year or if it is seasonal. If the activity is seasonal, circle the months of the year during which discharge occurs. Make any comments you feel are required to describe the variation in operation of your business activity.
4. A professional quality building layout or plant site plan of the premises indicating building layout is required. Approved building plans may be substituted. The location of each existing and proposed sampling location and facility sewer line must be clearly identified as well as all sanitary and wastewater to the public sewer. The quality of the drawing is subject to MSD approval.

#### **SECTION H - INSTRUCTIONS (SPILL PREVENTION)**

1. Indicate if your facility has filed a spill prevention plan with MSD to prevent spills or slug discharges from entering the MSD sewer system. If yes, list the date on which the plan was filed.
2. Indicate if there are any floor drains located in the manufacturing, production, or chemical storage areas. If yes, describe the drain's discharge location (i.e. discharges to Outfall #1).
3. Indicate if your facility has any liquid storage containers, bins, ponds, or underground storage tanks (UST's). If yes, please describe their location in relation to the facility and sanitary or storm sewers, contents, size, and frequency and method of cleaning.

#### **SECTION I - INSTRUCTIONS (NON-DISCHARGED WASTES)**

1. List any wastes generated at the facility. Indicate the type of waste, quantity generated, disposal method (i.e. incinerated, hauled, etc.), and final disposal facility.
2. For each waste listed in #1 that is disposed of on site, indicate type of disposal (i.e. septic system, lagoon, holding pond (evaporative-type), etc.).
3. For each waste listed in #1 that is disposed of off site (at a centralized waste treatment facility), identify the name and location of the disposal facility.
4. Indicate whether or not your facility has been issued any Federal, State, or local environmental permits. If yes, list the permits your facility holds (i.e. air, hazardous waste, underground injection, solid waste, NPDES (for discharges to surface water), etc.).

#### **SECTION J - INSTRUCTIONS (CONFIDENTIAL BUSINESS INFORMATION)**

This section describes what information, associated with the permit application and related documents, may be declared confidential. It also gives instructions for declaring confidentiality.

#### **SECTION K - INSTRUCTIONS (AUTHORIZED SIGNATURES)**

1. Indicate whether or not all applicable Federal, State, and local pretreatment standards and requirements are being met by your facility on a regular and consistent basis.
2. If you answered NO to #1:
  - a. List any additional treatment processes and/or maintenance operations being considered to bring the facility into compliance.

b. Provide a schedule for bringing your facility into compliance. Include specific treatment or process changes to be made and reasonable completion times.

See instructions for question 4 in section A, for a definition of an authorized representative.