



DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

South Dakota Surface Water Discharge Program
Application for Permit to Discharge Wastewater

GENERAL INFORMATION

This form is provided by the Secretary of the South Dakota Department of Environment and Natural Resources in accordance with '74:03:18:09 of the Administrative Rules of South Dakota. No South Dakota Surface Water Discharge Permit will be issued except under completion, and submittal of this form to:

South Dakota Department of Environment and Natural Resources
Surface Water Quality Program
Joe Foss Building
523 East Capitol Avenue
Pierre, South Dakota 57501-3181

Check the appropriate response:

[] Permit Renewal [] New Application

Indicate type of facility (check most appropriate response):

[] POTW [] Industry
[] Water Treatment Plant [] Federal
[] Other (please specify)

PLEASE PRINT OR TYPE

1. Name of Facility:

2. Mailing Address of Owner:

Name _____
Street _____
City _____
State _____ County _____ Zip Code _____

3. Mailing address of facility (if different from owner):

Name _____
Street _____
City _____
State _____ County _____ Zip Code _____

Include other local contacts:

Name _____ Title _____ Phone _____
Name _____ Title _____ Phone _____

4. Telephone Number:

Owner: _____ Facility: _____

FOR SDDENR USE ONLY

Application Number: _____ Permit Number: _____
Date Received: _____ Date Permitted: _____
New Facility: _____ Existing Facility: _____
Receiving Stream: _____ PCS: _____

5. Is this facility located on Indian lands?

Yes

No

6. Please include a brief description of the nature of the business conducted at this facility.

Include from one to four Standard Industrial Classification (SIC) codes which best reflect the principal products or services provided by the facility.

Please list all the activities which require the applicant to obtain a discharge permit.

7. Operational History:

Date Constructed: _____

Operational Start-up: _____

NOTE: Provide a narrative description of each change or improvement made to this facility, either currently underway or anticipated over the next five years, which will affect the quality of the discharge or generated sludge. For each change or improvement, provide projected dates, as accurately as possible, for completion of each step listed below:

A. Begin Construction _____

B. End Construction _____

C. Begin Discharge _____

D. Operational Level Attained _____

8. Type of treatment (check all appropriate boxes):

A. No treatment

Stabilization pond:

- A. Effluent discharge to "Waters of the State"
 B. Effluent used for irrigation
 C. Total retention - No Discharge
 D. Stabilization pond/artificial wetland system
 E. Infiltration/percolation basins
 F. Aerated Lagoon
 G. Other, please explain: _____

Mechanical Treatment Facilities:

- A. Conventional Secondary Treatment
 B. Advanced Treatment - Tertiary
 C. Other, please explain: _____

NOTE: Please attach a description of the treatment units employed by the facility, including a line drawing of the current wastewater treatment facility. Waters of the State can not be used for treatment

9. Number of separate discharge points which have an existing or potential release of treated or untreated wastewater (outfalls): _____

Describe the discharge and the type of wastewater from each outfall. Include all overflows, bypasses, or seasonal discharges from lift stations, lagoons, holding ponds, etc.:

Outfall 001 _____

Outfall 002 _____

Outfall 003 _____

Attach additional sheets if necessary.

NOTE: Please place points of discharge on a topographic map, or other map if a topographic map is unavailable. This map should extend to one (1) square mile beyond the property boundaries of the facility and each of its intake and discharge facilities; each of its hazardous waste treatment, storage, or disposal facilities; each well where fluids from the facility are injected underground; and those wells, springs, other surface water bodies, drinking water wells, and surface water intake structures listed in public records, or otherwise known to the applicant in the map area.

10. Are you able to bypass your treatment facility?

- Yes If yes, which outfall(s) listed above correspond to this bypass discharge? _____
 No

11. Is discharge (check one):

- A. Continuous
 B. Intermittent
 C. Seasonal
 D. No Discharge

If other than continuous, please explain:

12. Name of Receiving Waters: _____

If wastewater is discharged to places other than surface water, please explain:

13. Type of Sludge disposal (check all appropriate boxes):

- A. Land Application (please explain): _____
- B. Surface Disposal
- C. Landfill
- D. Other (please explain): _____
- E. Sludge is not generated or disposed of at this facility

14. If A, B, C, or D was marked in Question 13, provide a narrative on the following sludge production information: (Attach additional sheets if necessary)

- A. Tons of dry sludge produced each year _____
- B. Average percent solids sludge produced _____
- C. Tons of dry sludge disposed of each year _____
- D. Average percent solids sludge sent for use and/or disposal _____
- E. Attach any sludge monitoring data obtained over the last year (including groundwater monitoring data, results of hazardous waste tests, and results of actions taken to determine whether sludge is hazardous). Include a description of the methods used and sampling locations and dates.

15. List other information which you feel should be brought to the attention of the SDDENR in regard to the issuance of a discharge permit for the facility. (Attach additional sheets if necessary.)

16. Type of Discharge (check all that apply):

- Publicly Owned Treatment Works (Complete Appendix A)
- Existing Industrial process wastewater (Complete Appendix B)
- New Industrial process wastewater (Complete Appendix C)
- Non-contact cooling water, or other non-process wastewater (Complete Appendix D)
- Storm water associated with industrial activity (Complete Appendix E)
- Large or medium municipal separate storm sewer system
- Discharge to sanitary sewer and/or Publicly Owned Treatment Works (Complete Appendix C)
- Backwash from water treatment plants (Complete Appendix C)
- Concentrated animal feeding operation (Complete Appendix C)
- Concentrated aquatic animal production facility (Complete Appendix C)
- Privately owned treatment works (Complete Appendix C)
- Federal facility (except those located on Indian reservations) (Complete Appendix C)
- Silvicultural point source (Complete Appendix C)
- Other (please specify) _____

17. Does this application substantially duplicate an application by the same applicant which was denied by the SDDENR or the USEPA within the past five years and which has not been reversed by a court of competent jurisdiction?

- Yes
- No

18. Existing Environmental Permits

Please check all other Environmental Permits which are held by the facility. Include permit numbers in the space provided:

- A. NPDES or SWD (Discharges to Surface Water) _____
- B. UIC (Underground Injection of Fluids) _____
- C. RCRA (Hazardous Wastes) _____
- D. PSD (Air Emissions from Proposed Sources) _____
- E. Other (please specify) _____
- F. Other (please specify) _____

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 directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I also certify that I will provide for the operation of this facility in accordance with the Rules and Regulations Governing Operation of Water Pollution Control Facilities and will provide certified operators as required by SDCL 34A-3, Water Supply and Treatment System Operators. I am aware that there are significant penalties for submitting false information, including revocation of the permit and the possibility of fine and imprisonment for knowing violations.

NOTE: Application must be signed by the authorized chief elective or executive officer of the applicant, or by the applicant, if an individual.

I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Name _____ Title _____

Date _____

Signature _____

STATE OF SOUTH DAKOTA

BEFORE THE SECRETARY OF

THE DEPARTMENT OF AGRICULTURE AND NATURAL RESOURCES

IN THE MATTER OF THE)	
APPLICATION OF)	
_____	)	CERTIFICATION OF
)	
STATE OF _____	)	APPLICANT
)	
COUNTY OF _____)	

I, _____, the applicant in the above matter after being duly sworn upon oath hereby certify the following information in regard to this application:

I have read and understand South Dakota Codified Law Section 1-41-20 which provides:

"The secretary may reject an application for any permit filed pursuant to Titles 34A or 45, including any application by any concentrated swine feeding operation for authorization to operate under a general permit, upon making a specific finding that:

- (1) The applicant is unsuited or unqualified to perform the obligations of a permit holder based upon a finding that the applicant, any officer, director, partner, or resident general manager of the facility for which application has been made:

 - (a) Has intentionally misrepresented a material fact in applying for a permit;*
 - (b) Has been convicted of a felony or other crime involving moral turpitude;*
 - (c) Has habitually and intentionally violated environmental laws of any state or the United States which have caused significant and material environmental damage;*
 - (d) Has had any permit revoked under the environmental laws of any state or the United States; or*
 - (e) Has otherwise demonstrated through clear and convincing evidence of previous actions that the applicant lacks the necessary good character and competency to reliably carry out the obligations imposed by law upon the permit holder; or**
- (2) The application substantially duplicates an application by the same applicant denied within the past five years which denial has not been reversed by a court of competent jurisdiction. Nothing in this subdivision may be construed to prohibit an applicant from submitting a new application for a permit previously denied, if the new application represents a good faith attempt by the applicant to correct the deficiencies that served as the basis for the denial in the original application.*

All applications filed pursuant to Titles 34A and 45 shall include a certification, sworn to under oath and signed by the applicant, that he is not disqualified by reason of this section from obtaining a permit. In the absence of evidence to the contrary, that certification shall constitute a prima facie showing of the suitability and qualification of the applicant. If at any point in the application review, recommendation or hearing process, the secretary finds the applicant has intentionally made any material misrepresentation of fact in regard to this certification,

consideration of the application may be suspended and the application may be rejected as provided for under this section.

Applications rejected pursuant to this section constitute final agency action upon that application and may be appealed to circuit court as provided for under chapter 1-26.”

I certify pursuant to 1-41-20, that as an applicant, officer, director, partner, or resident general manager of the activity or facility for which the application has been made that I; a) have not intentionally misrepresented a material fact in applying for a permit; b) have not been convicted of a felony or other crime of moral turpitude; c) have not habitually and intentionally violated environmental laws of any state or the United States which have caused significant and material environmental damage; (d) have not had any permit revoked under the environmental laws of any state or the United States; or e) have not otherwise demonstrated through clear and convincing evidence of previous actions that I lack the necessary good character and competency to reliably carry out the obligations imposed by law upon me. I also certify that this application does not substantially duplicate an application by the same applicant denied within the past five years which denial has not been reversed by a court of competent jurisdiction. Further;

“I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.”

Dated this _____ day of _____, 20_____ .

Applicant (print)

Applicant (signature)

Subscribed and sworn before me this _____ day of _____, 20_____ .

Notary Public (signature)

My commission expires: _____

(SEAL)

**PLEASE ATTACH ANY ADDITIONAL INFORMATION NECESSARY TO DISCLOSE
ALL FACTS AND DOCUMENTS PERTAINING TO
SDCL 1-41-20 (1) (a) THROUGH (e).
ALL VIOLATIONS MUST BE DISCLOSED, BUT WILL NOT
AUTOMATICALLY RESULT IN THE REJECTION OF AN APPLICATION**



DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

South Dakota Surface Water Discharge Program
Application for Permit to Discharge Wastewater

APPENDIX B - EXISTING INDUSTRIAL PROCESS WASTEWATER

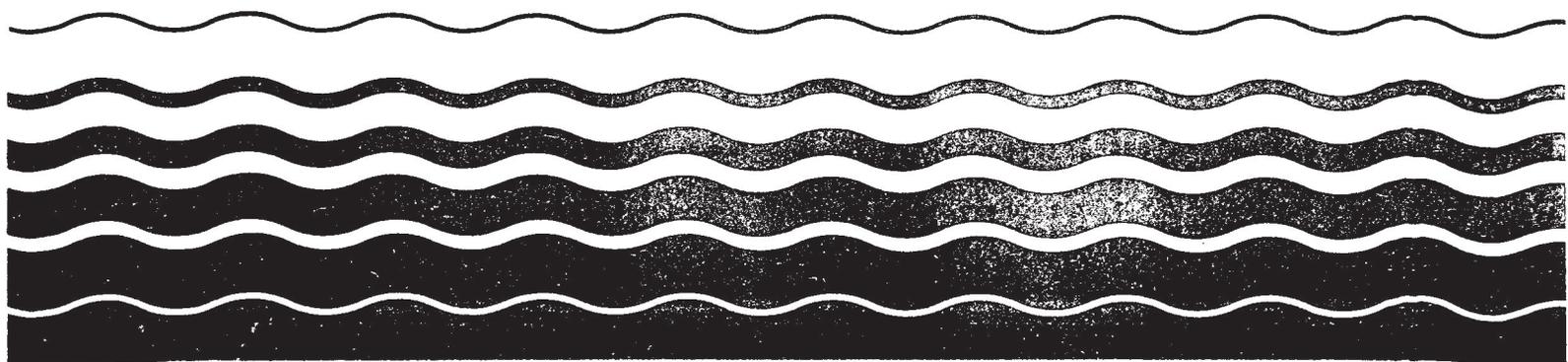
Permits Division



Application Form 2C - Wastewater Discharge Information

Consolidated Permits Program

This form must be completed by all persons applying for an EPA permit to discharge wastewater (*existing manufacturing, commercial, mining, and silvicultural operations*).



INSTRUCTIONS — FORM 2c
Application for Permit to Discharge Wastewater
EXISTING MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURAL OPERATIONS

You may not claim as confidential any information required by this form or Form 1, whether the information is reported on the forms or in an attachment. This information will be made available to the public upon request.

Any information you submit to EPA which goes beyond that required by this form or Form 1 you may claim as confidential, but claims for information which is effluent data will be denied. If you do not assert a claim of confidentiality at the time of submitting the information, EPA may make the information public without further notice to you. Claims of confidentiality will be handled in accordance with EPA's business confidentiality regulations at 40 CFR Part 2.

Definitions

All significant terms used in these instructions and in the form are defined in the glossary found in the General Instructions which accompany Form 1.

EPA ID Number

Fill in your EPA Identification Number at the top of each page of Form 2c. You may copy this number directly from item I of Form 1.

Item I

You may use the map you provided for item XI of Form 1 to determine the latitude and longitude of each of your outfalls and the name of the receiving water.

Item II-A

The line drawing should show generally the route taken by water in your facility from intake to discharge. Show all operations contributing wastewater, including process and production areas, sanitary flows, cooling water, and stormwater runoff. You may group similar operations into a single unit, labeled to correspond to the more detailed listing in item II-B. The water balance should show average flows. Show all significant losses of water to products, atmosphere, and discharge. You should use actual measurements whenever available; otherwise use your best estimate. An example of an acceptable line drawing appears in Figure 2c-1 to these instructions.

Item II-B

List all sources of wastewater to each outfall. Operations may be described in general terms (for example, "dye-making reactor" or "distillation tower"). You may estimate the flow contributed by each source if no data are available. For stormwater discharges you may estimate the average flow, but you must indicate the rainfall event upon which the estimate is based and the method of estimation. For each treatment unit, indicate its size, flow rate, and retention time, and describe the ultimate disposal of any solid or liquid wastes not discharged. Treatment units should be listed in order and you should select the proper code from Table 2c-1 to fill in column 3-b for each treatment unit. Insert "XX" into column 3-b if no code corresponds to a treatment unit you list. If you are applying for a permit for a privately owned treatment works, you must also identify all of your contributors in an attached listing.

Item II-C

A discharge is intermittent unless it occurs without interruption during the operating hours of the facility, except for infrequent shut-downs for maintenance, process changes, or other similar activities. A discharge is seasonal if it occurs only during certain parts of the year. Fill in every applicable column in this item for each source of intermittent or seasonal discharges. Base your answers on actual data whenever available; otherwise, provide your best estimate. Report the highest daily value for flow rate and total volume in the

"Maximum Daily" columns (columns 4-a-2 and 4-b-2). Report the average of all daily values measured during days when discharge occurred within the last year in the "Long Term Average" columns (columns 4-a-1 and 4-b-1).

Item III-A

All effluent guidelines promulgated by EPA appear in the Federal Register and are published annually in 40 CFR Subchapter N. A guideline applies to you if you have any operations contributing process wastewater in any subcategory covered by a BPT, BCT, or BAT guideline. If you are unsure whether you are covered by a promulgated effluent guideline, check with your EPA Regional office (Table 1 in the Form 1 instructions). You must check "yes" if an applicable effluent guideline has been promulgated, even if the guideline limitations are being contested in court. If you believe that a promulgated effluent guideline has been remanded for reconsideration by a court and does not apply to your operations, you may check "no."

Item III-B

An effluent guideline is expressed in terms of production (or other measure of operation) if the limitation is expressed as mass of pollutant per operational parameter; for example, "pounds of BOD per cubic foot of logs from which bark is removed," or "pounds of TSS per megawatt hour of electrical energy consumed by smelting furnace". An example of a guideline not expressed in terms of a measure of operation is one which limits the concentration of pollutants.

Item III-C

This item must be completed only if you checked "yes" to item III-B. The production information requested here is necessary to apply effluent guidelines to your facility and you cannot claim it as confidential. However, you do not have to indicate how the reported information was calculated. Report quantities in the units of measurement used in the applicable effluent guideline. The production figures provided must be based on actual daily production and not on design capacity or on predictions of future operations. To obtain alternate limits under 40 CFR 122.45(b)(2)(ii), you must define your maximum production capability and demonstrate to the Director that your actual production is substantially below maximum production capability and that there is a reasonable potential for an increase above actual production during the duration of the permit.

Item IV-A

If you check "yes" to this question, complete all parts of the chart, or attach a copy of any previous submission you have made to EPA containing same information.

Item IV-B

You are not required to submit a description of future pollution control projects if you do not wish to or if none is planned.

Item V-A, B, C, and D

The items require you to collect and report data on the pollutants discharged for each of your outfalls. Each part of this item addresses a different set of pollutants and must be completed in accordance with the specific instructions for that part. The following general instructions apply to the entire item.

General Instructions

Part A requires you to report at least one analysis for each pollutant listed. Parts B and C require you to report analytical data in two ways. For some pollutants, you may be required to mark 'X' in the "Testing Required" column (column 2-a, Part C), and test (sample and analyze) and report the levels of the pollutants in your discharge whether or not you expect them to be present in your discharge. For all others, you must mark 'X' in either the "Believe Present" column or the "Believe Absent" column (columns 2-a or 2-b, Part B, and columns 2-b or 2-c, Part C) based on your best estimate, and test for those which you believe to be present. (See specific instructions on the form and below for Parts A through D.) Base your determination that a pollutant is present in or absent from your discharge on your knowledge of your raw materials, maintenance chemicals, inter-

FORM 2C — INSTRUCTIONS (continued)

ITEM V — A, B, C, and D (continued)

mediate and final products and byproducts, and any previous analyses known to you of your effluent or similar effluent. (For example, if you manufacture pesticides, you should expect those pesticides to be present in contaminated stormwater runoff.) If you would expect a pollutant to be present solely as a result of its presence in your intake water, you must mark "Believe Present" but you are not required to analyze for that pollutant. Instead, mark an 'X' in the "Intake" column.

A. Reporting. All levels must be reported as concentration and as total mass. You may report some or all of the required data by attaching separate sheets of paper instead of filling out pages V-1 to V-9 if the separate sheets contain all the required information in a format which is consistent with pages V-1 to V-9 in spacing and in identification of pollutants and columns. (For example, the data system used in your GC/MS analysis may be able to print data in the proper format.) Use the following abbreviations in the columns headed "Units" (column 3, Part A, and column 4, Parts B and C).

Concentration		Mass
ppm parts per million		lbs pounds
mg/l milligrams per liter		ton tons (English tons)
ppb parts per billion		mg milligrams
ug/l micrograms per liter		g grams
		kg kilograms
		T tonnes (metric tons)

All reporting of values for metals must be in terms of "total recoverable metal," unless:

- (1) An applicable, promulgated effluent limitation or standard specifies the limitation for the metal in dissolved, valent, or total form; or
- (2) All approved analytical methods for the metal inherently measure only its dissolved form (e.g., hexavalent chromium); or
- (3) The permitting authority has determined that in establishing case-by-case limitations it is necessary to express the limitations on the metal in dissolved, valent, or total form to carry out the provisions of the CWA.

If you measure only one daily value, complete only the "Maximum Daily Values" columns and insert '1' into the "Number of Analyses" column (columns 2-a and 2-d, Part A, and column 3-a, 3-d, Parts B and C). The permitting authority may require you to conduct additional analyses to further characterize your discharges. For composite samples, the daily value is the total mass or average concentration found in a composite sample taken over the operating hours of the facility during a 24-hour period; for grab samples, the daily value is the arithmetic or flow-weighted total mass or average concentration found in a series of at least four grab samples taken over the operating hours of the facility during a 24-hour period.

If you measure more than one daily value for a pollutant and those values are representative of your wastestream, you must report them. You must describe your method of testing and data analysis. You also must determine the average of all values within the last year and report the concentration and mass under the "Long Term Average Values" columns (column 2-c, Part A, and column 3-c, Parts B and C), and the total number of daily values under the "Number of Analyses" columns (column 2-d, Part A, and columns 3-d, Parts B and C). Also, determine the average of all daily values taken during each calendar month, and report the highest average under the "Maximum 30-day Values" columns (column 2-c, Part A, and column 3-b, Parts B and C).

B. Sampling: The collection of the samples for the reported analyses should be supervised by a person experienced in performing sampling of industrial wastewater. You may contact your EPA or State permitting authority for detailed guidance on sampling techniques and for answers to specific questions. Any specific requirements contained in the applicable analytical methods should be followed for sample containers, sample preservation,

holding times, the collection of duplicate samples, etc. The time when you sample should be representative of your normal operation, to the extent feasible, with all processes which contribute wastewater in normal operation, and with your treatment system operating properly with no system upsets.

a minimum of one grab sample may be taken for effluents from holding ponds or other impoundments with a retention period of greater than 24 hours. For stormwater discharges a minimum of one to four grab samples may be taken, depending on the duration of the discharge. One grab must be taken in the first hour (or less) of discharge, with one additional grab (up to a minimum of four) taken in each succeeding hour of discharge for discharges lasting four or more hours. The Director may waive composite sampling for any outfall for which you demonstrate that use of an automatic sampler is infeasible and that a minimum of four grab samples will be representative of your discharge.

Grab and composite samples are defined as follows:

Grab sample: An individual sample of at least 100 milliliters collected at a randomly-selected time over a period not exceeding 15 minutes.

Composite sample: A combination of at least 8 sample aliquots of at least 100 milliliters, collected at periodic intervals during the operating hours of a facility over a 24 hour period. The composite must be flow proportional; either the time interval between each aliquot or the volume of each aliquot must be proportional to either the stream flow at the time of sampling or the total stream flow since the collection of the previous aliquot. Aliquots may be collected manually or automatically. For GC/MS Volatile Organic Analysis (VOA), aliquots must be combined in the laboratory immediately before analysis. Four (4) (rather than eight) aliquots or grab samples should be collected for VOA. These four samples should be collected during actual hours of discharge over a 24 hour period and need not be flow proportioned. Only one analysis is required.

The Agency is currently reviewing sampling requirements in light of recent research on testing methods. Upon completion of its review, the Agency plans to propose changes to the sampling requirements.

Data from samples taken in the past may be used, provided that:

All data requirements are met;

Sampling was done no more than three years before submission; and

All data are representative of the present discharge.

Among the factors which would cause the data to be unrepresentative are significant changes in production level, changes in raw materials, processes, or final products, and changes in wastewater treatment. When the Agency promulgates new analytical methods in 40 CFR Part 136, EPA will provide information as to when you should use the new methods to generate data on your discharges. Of course, the Director may request additional information, including current quantitative data, if she or he determines it to be necessary to assess your discharges.

C. Analysis: You must use test methods promulgated in 40 CFR Part 136; however, if none has been promulgated for a particular pollutant, you may use any suitable method for measuring the level of the pollutant in your discharge provided that you submit a description of the method or a reference to a published method. Your description should include the sample holding time, preservation techniques, and the quality control measures which you used. If you have two or more substantially identical outfalls, you may request permission from your permitting authority to sample and analyze only one outfall and submit the results of the analysis

ITEM V — A, B, C, and D (continued)

for other substantially identical outfalls. If your request is granted by the permitting authority, on a separate sheet attached to the application form, identify which outfall you did test, and describe why the outfalls which you did not test are substantially identical to the outfall which you did test.

D. Reporting of Intake Data: You are not required to report data under the "Intake" columns unless you wish to demonstrate your eligibility for a "net" effluent limitation for one or more pollutants, that is, an effluent limitation adjusted by subtracting the average level of the pollutant(s) present in your intake water. NPDES regulations allow net limitations only in certain circumstances. To demonstrate your eligibility, under the "intake" columns report the average of the results of analyses on your intake water (if your water is treated before use, test the water after it is treated), and discuss the requirements for a net limitation with your permitting authority.

Part V-A

Part V-A must be completed by all applicants for all outfalls, including outfalls containing only noncontact cooling water or storm runoff. However, at your request, the Director may waive the requirement to test for one or more of these pollutants, upon a determination that available information is adequate to support issuance of the permit with less stringent reporting requirements for these pollutants. You also may request a waiver for one or more of these pollutants for your category or subcategory from the Director, Office of Water Enforcement and Permits. See discussion in General Instructions to item V for definitions of the columns in Part A. The "Long Term Average Values" column (column 2-c) and "Maximum 30-day Values" column (column 2-b) are not compulsory but should be filled out if data are available.

Use composite samples for all pollutants in this Part, except use grab samples for pH and temperature. See discussion in General Instructions to Item V for definitions of the columns in Part A. The "Long Term Average Values" column (column 2-c) and "Maximum 30-Day Values" column (column 2-b) are not compulsory but should be filled out if data are available.

Part V-B

Part V-B must be completed by all applicants for all outfalls, including outfalls containing only noncontact cooling water or storm runoff. You must report quantitative data if the pollutant(s) in question is limited in an effluent limitations guideline either directly, or indirectly but expressly through limitation on an indicator (e.g., use of TSS as an indicator to control the discharge of iron and aluminum). For other discharged pollutants you must provide quantitative data or explain their presence in your discharge. EPA will consider requests to the Director of the Office of Water Enforcement and Permits to eliminate the requirement to test for pollutants for an industrial category or subcategory. Your request must be supported by data representative of the industrial category or subcategory in question. The data must demonstrate that individual testing for each applicant is unnecessary, because the facilities in the category or subcategory discharge substantially identical levels of the pollutant or discharge the pollutant uniformly at sufficiently low levels. Use composite samples for all pollutants you analyze for in this part, except use grab samples for residual chlorine, oil and grease, and fecal coliform. The "Long Term Average Values" column (column 3-c) and "Maximum 30-day Values" column (column 3-b) are not compulsory but should be filled out if data are available.

Part V-C

Table 2c-2 lists the 34 "primary" industry categories in the left-hand column. For each outfall, if any of your processes which contribute wastewater falls into one of those categories, you must mark 'X' in "Testing Required" column (column 2-a) and test for (1) all of the toxic metals, cyanide, and total phenols, and (2) the organic toxic pollutants contained in Table 2c-2 as applicable to your category, unless you qualify as a small business (see below). The organic toxic pollutants are listed by GC/MS frac-

tions on pages V-4 to V-9 in Part V-C. For example, the Organic Chemicals Industry has an asterisk in all four fractions; therefore, applicants in this category must test for all organic toxic pollutants in Part V-C. The inclusion of total phenols in Part V-C is not intended to classify total phenols as a toxic pollutant. If you are applying for a permit for a privately owned treatment works, determine your testing requirements on the basis of the industry categories of your contributors. When you determine which industry category you are in to find your testing requirements, you are not determining your category for any other purpose and you are not giving up your right to challenge your inclusion in that category (for example, for deciding whether an effluent guideline is applicable) before your permit is issued. For all other cases (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), you must mark "X" in either the "Believed Present" column (column 2-b) or the "Believed Absent" column (column 2-c) for each pollutant. For every pollutant you know or have reason to believe is present in your discharge in concentrations of 10 ppb or greater, you must report quantitative data. For acrolein, acrylonitrile, 2, 4 dinitrophenol, and 2-methyl-4, 6 dinitrophenol, where you expect these four pollutants to be discharged in concentrations of 100 ppb or greater, you must report quantitative data. For every pollutant expected to be discharged in concentrations less than the thresholds specified above, you must either submit quantitative data or briefly describe the reasons the pollutant is expected to be discharged. At your request the Director, Office of Water Enforcement and Permits, may waive the requirement to test for pollutants for an industrial category or subcategory. Your request must be supported by data representatives of the industrial category or subcategory in question. The data must demonstrate that individual testing for each applicant is unnecessary, because the facilities in question discharge substantially identical levels of the pollutant, or discharge the pollutant uniformly at sufficiently low levels. If you qualify as a small business (see below) you are exempt from testing for the organic toxic pollutants, listed on pages V-4 to V-9 in Part C. For pollutants in intake water, see discussion in General Instructions to this item. The "Long Term Average Values" column (column 3-c) and "Maximum 30-day Values" column (column 3-b) are not compulsory but should be filled out if data are available. You are required to mark "Testing Required" for dioxin if you use or manufacture one of the following compounds:

- (a) 2,4,5-trichlorophenoxy acetic acid, (2,4,5-T);
- (b) 2-(2,4,5-trichlorophenoxy) propanoic acid, (Silvex, 2,4,5-TP);
- (c) 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate, (Erbon);
- (d) 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate, (Ronnel);
- (e) 2,4,5-trichlorophenol, (TCP); or
- (f) hexachlorophene, (HCP).

If you mark "Testing Required" or "Believed Present," you must perform a screening analysis for dioxins, using gas chromatography with an electron capture detector. A TCDD standard for quantitation is not required. Describe the results of this analysis in the space provided; for example, "no measurable baseline deflection at the retention time of TCDD" or "a measurable peak within the tolerances of the retention time of TCDD." The permitting authority may require you to perform a quantitative analysis if you report a positive result. The Effluent Guidelines Division of EPA has collected and analyzed samples from some plants for the pollutants listed in Part C in the course of its BAT guidelines development program. If your effluents are sampled and analyzed as part of this program in the last three years, you may use these data to answer Part C provided that the permitting authority approves, and provided that no process change or change in raw materials or operating practices has occurred since the samples were taken that would make the analyses unrepresentative of your current discharge.

ITEM V — A, B, C, and D (continued)

Small Business Exemption: If you qualify as a "small business," you are exempt from the reporting requirements for the organic toxic pollutants, listed on pages V-4 to V-9 in Part C. There are two ways in which you can qualify as a "small business." If your facility is a coal mine, and if your probable total annual production is less than 100,000 tons per year, you may submit past production data or estimated future production (such as a schedule of estimated total production under 30 CFR § 795.14(c)) instead of conducting analyses for the organic toxic pollutants. If your facility is not a coal mine, and if your gross total annual sales for the most recent three years average less than \$100,000 per year (in second quarter 1980 dollars), you may submit sales data for those years instead of conducting analyses for the organic toxic pollutants. The production or sales data must be for the facility which is the source of the discharge. The data should not be limited to production or sales for the process or processes which contribute to the discharge, unless those are the only processes at your facility. For sales data, in situations involving intracorporate transfer of goods and services, the transfer price per unit should approximate market prices for those goods and services as closely as possible. Sales figures for years after 1980 should be indexed to the second quarter of 1980 by using the gross national product price deflator (second quarter of 1980 = 100). This index is available in *National Income and Product Accounts of the United States* (Department of Commerce, Bureau of Economic Analysis).

Part V-D

List any pollutants in Table 2c-3 that you believe to be present and explain why you believe them to be present. No analysis is required, but if you have analytical data, you must report it.

Note: Under 40 CFR 117.12(a)(2), certain discharges of hazardous substances (listed in Table 2c-4 of these instructions) may be exempted from the requirements of section 311 of CWA, which establishes reporting requirements, civil penalties and liability for cleanup costs for spills of oil and hazardous substances. A discharge of a particular substance may be exempted if the origin, source, and amount of the discharged substances are identified in the NDPEs permit application or in the permit, if the permit contains a requirement for treatment of the discharge, and if the treatment is in place. To apply for an exclusion of the discharge of any hazardous substance from the requirements of section 311, attach additional sheets of paper to your form, setting forth the following information:

1. The substance and the amount of each substance which may be discharged.
2. The origin and source of the discharge of the substance.
3. The treatment which is to be provided for the discharge by:
 - a. An onsite treatment system separate from any treatment system treating your normal discharge;
 - b. A treatment system designed to treat your normal discharge and which is additionally capable of treating the amount of the substance identified under paragraph 1 above; or
 - c. Any combination of the above.

See 40 CFR §117.12(a)(2) and (c), published on August 29, 1979, in 44 FR 50766, or contact your Regional Office (Table 1 on Form 1, Instructions), for further information on exclusions from section 311.

Item VI

This requirement applies to current use or manufacture of a toxic pollutant as an intermediate or final product or byproduct. The Director may waive or modify the requirement if you demonstrate that it would be unduly burdensome to identify each toxic pollutant and the Director has adequate information to issue your permit. You may not claim this information as confidential; however, you do not have to distinguish between use or production of the pollutants or list the amounts.

Item VII

Self explanatory. The permitting authority may ask you to provide additional details after your application is received.

Item IX

The Clean Water Act provides for severe penalties for submitting false information on this application form.

Section 309(c)(2) of the Clean Water Act provides that "Any person who knowingly makes any false statement, representation, or certification in any application, ... shall upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment for not more than six months, or by both."

40 CFR Part 122.22 requires the certification to be signed as follows:

(A) *For a corporation:* by a responsible corporate official. For purposes of this section, a responsible corporate official 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 operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25,000,000 (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

Note: EPA does not require specific assignments or delegation of authority to responsible corporate officers identified in §122.22(a)(1)(i). The Agency will presume that these responsible corporate officers have the requisite authority to sign permit applications unless the corporation has notified the director to the contrary. Corporate procedures governing authority to sign permit applications may provide for assignment or delegation to applicable corporate position under §122.22(a)(1)(ii) rather than to specific individuals.

(B) *For a partnership or sole proprietorship:* by a general partner or the proprietor, respectively; or

(C) *For a municipality, State, Federal, or other public agency:* by either a principal executive officer or ranking elected official. For purposes of this section, a principal executive officer of a Federal Agency includes (i) the chief executive officer of the Agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the Agency (e.g., *Regional Administrators of EPA*). Applications for Group II stormwater dischargers may be signed by a duly authorized representative (as defined in 40 CFR 122.22(b)) of the individuals identified above.

CODES FOR TREATMENT UNITS

PHYSICAL TREATMENT PROCESSES

1-A . . . . .	.Ammonia Stripping	1-M . . . . .	.Grit Removal
1-B . . . . .	.Dialysis	1-N . . . . .	.Microstraining
1-C . . . . .	.Diatomaceous Earth Filtration	1-O . . . . .	.Mixing
1-D . . . . .	.Distillation	1-P . . . . .	.Moving Bed Filters
1-E . . . . .	.Electrodialysis	1-Q . . . . .	.Multimedia Filtration
1-F . . . . .	.Evaporation	1-R . . . . .	.Rapid Sand Filtration
1-G . . . . .	.Flocculation	1-S . . . . .	.Reverse Osmosis (<i>Hyperfiltration</i>)
1-H . . . . .	.Flotation	1-T . . . . .	.Screening
1-I . . . . .	.Foam Fractionation	1-U . . . . .	.Sedimentation (<i>Settling</i>)
1-J . . . . .	.Freezing	1-V . . . . .	.Slow Sand Filtration
1-K . . . . .	.Gas-Phase Separation	1-W . . . . .	.Solvent Extraction
1-L . . . . .	.Grinding (<i>Comminutors</i>)	1-X . . . . .	.Sorption

CHEMICAL TREATMENT PROCESSES

2-A . . . . .	.Carbon Adsorption	2-G . . . . .	.Disinfection (<i>Ozone</i>)
2-B . . . . .	.Chemical Oxidation	2-H . . . . .	.Disinfection (<i>Other</i>)
2-C . . . . .	.Chemical Precipitation	2-I . . . . .	.Electrochemical Treatment
2-D . . . . .	.Coagulation	2-J . . . . .	.Ion Exchange
2-E . . . . .	.Dechlorination	2-K . . . . .	.Neutralization
2-F . . . . .	.Disinfection (<i>Chlorine</i>)	2-L . . . . .	.Reduction

BIOLOGICAL TREATMENT PROCESSES

3-A . . . . .	.Activated Sludge	3-E . . . . .	.Pre-Aeration
3-B . . . . .	.Aerated Lagoons	3-F . . . . .	.Spray Irrigation/Land Application
3-C . . . . .	.Anaerobic Treatment	3-G . . . . .	.Stabilization Ponds
3-D . . . . .	.Nitrification-Denitrification	3-H . . . . .	.Trickling Filtration

OTHER PROCESSES

4-A . . . . .	.Discharge to Surface Water	4-C . . . . .	.Reuse/Recycle of Treated Effluent
4-B . . . . .	.Ocean Discharge Through Outfall	4-D . . . . .	.Underground Injection

SLUDGE TREATMENT AND DISPOSAL PROCESSES

5-A . . . . .	.Aerobic Digestion	5-M . . . . .	.Heat Drying
5-B . . . . .	.Anaerobic Digestion	5-N . . . . .	.Heat Treatment
5-C . . . . .	.Belt Filtration	5-O . . . . .	.Incineration
5-D . . . . .	.Centrifugation	5-P . . . . .	.Land Application
5-E . . . . .	.Chemical Conditioning	5-Q . . . . .	.Landfill
5-F . . . . .	.Chlorine Treatment	5-R . . . . .	.Pressure Filtration
5-G . . . . .	.Composting	5-S . . . . .	.Pyrolysis
5-H . . . . .	.Drying Beds	5-T . . . . .	.Sludge Lagoons
5-I . . . . .	.Elutriation	5-U . . . . .	.Vacuum Filtration
5-J . . . . .	.Flotation Thickening	5-V . . . . .	.Vibration
5-K . . . . .	.Freezing	5-W . . . . .	.Wet Oxidation
5-L . . . . .	.Gravity Thickening		

TESTING REQUIREMENTS FOR ORGANIC TOXIC POLLUTANTS INDUSTRY CATEGORY*

INDUSTRY CATEGORY	GC/MS FRACTION ¹			
	Volatile	Acid	Base/Neutral	Pesticide
Adhesives and sealants	X	X	X	—
Aluminum forming	X	X	X	—
Auto and other laundries.	X	X	X	X
Battery manufacturing	X	—	X	—
Coal mining	X	X	X	X
Coil coating	X	X	X	—
Copper forming	X	X	X	—
Electric and electronic compounds	X	X	X	X
Electroplating	X	X	X	—
Explosives manufacturing	—	X	X	—
Foundries	X	X	X	—
Gum and wood chemicals	X	X	X	X
Inorganic chemicals manufacturing	X	X	X	—
Iron and steel manufacturing	X	X	X	—
Leather tanning and finishing	X	X	X	X
Mechanical products manufacturing	X	X	X	—
Nonferrous metals manufacturing.	X	X	X	X
Ore mining.	X	X	X	X
Organic chemicals manufacturing.	X	X	X	X
Paint and ink formulation	X	X	X	X
Pesticides.	X	X	X	X
Petroleum refining	X	X	X	X
Pharmaceutical preparations.	X	X	X	—
Photographic equipment and supplies	X	X	X	X
Plastic and synthetic materials manufacturing.	X	X	X	X
Plastic processing	X	—	—	—
Porcelain enameling.	X	—	X	X
Printing and publishing.	X	X	X	X
Pulp and paperboard mills	X	X	X	X
Rubber processing	X	X	X	—
Soap and detergent manufacturing	X	X	X	—
Steam electric power plants	X	X	X	—
Textile mills	X	X	X	X
Timber products processing	X	X	X	X

*See note at conclusion of 40 CFR Part 122, Appendix D (1983) for explanation of effect of suspensions on testing requirements for primary industry categories.

¹The pollutants in each fraction are listed in Item V—C.

X = Testing required.

— = Testing not required.

**TOXIC POLLUTANTS AND HAZARDOUS SUBSTANCES REQUIRED TO
BE IDENTIFIED BY APPLICANTS IF EXPECTED TO BE PRESENT**

TOXIC POLLUTANT	HAZARDOUS SUBSTANCES	HAZARDOUS SUBSTANCES
Asbestos	Dichlorvos	Naled
	Diethyl amine	Napthenic acid
HAZARDOUS SUBSTANCES	Dimethyl amine	Nitrotoluene
Acetaldehyde	Dintrobenzene	Parathion
Allyl alcohol	Diquat	Phenolsulfonate
Allyl chloride	Disulfoton	Phosgene
Amyl acetate	Diuron	Propargite
Aniline	Epichlorohydrin	Propylene oxide
Benzonitrile	Ethion	Pyrethrins
Benzyl chloride	Ethylene diamine	Quinoline
Butyl acetate	Ethylene dibromide	Resorcinol
Butylamine	Formaldehyde	Strontium
Captan	Furfural	Strychnine
Carbaryl	Guthion	Styrene
Carbofuran	Isoprene	2,4,5-T (2,4,5-Trichlorophenoxyacetic acid)
Carbon disulfide	Isopropanolamine	TDE (Tetrachlorodiphenyl ethane)
Chlorpyrifos	Kelthane	2,4,5-TP [2-(2,4,5-Trichlorophenoxy)
Coumaphos	Kepone	propanoic acid]
Cresol	Malathion	Trichlorofon
Crotonaldehyde	Mercaptodimethur	Triethanolamine
Cyclohexane	Methoxychlor	Triethylamine
2,4-D (2,4-Dichlorophenoxyacetic acid)	Methyl mercaptan	Trimethylamine
Diazinon	Methyl methacrylate	Uranium
Dicamba	Methyl parathion	Vanadium
Dichlobenil	Mevinphos	Vinyl acetate
Dichlone	Mexacarbate	Xylene
2,2-Dichloropropionic acid	Monoethyl amine	Xylenol
	Monomethyl amine	Zirconium

HAZARDOUS SUBSTANCES

1. Acetaldehyde	70. Calcium cyanide	136. Ferric ammonium citrate
2. Acetic acid	71. Calcium dodecylbenzenesulfonate	137. Ferric ammonium oxalate
3. Acetic anhydride	72. Calcium hypochlorite	138. Ferric chloride
4. Acetone cyanohydrin	73. Captan	139. Ferric fluoride
5. Acetyl bromide	74. Carbaryl	140. Ferric nitrate
6. Acetyl chloride	75. Carbofuran	141. Ferric sulfate
7. Acrolein	76. Carbon disulfide	142. Ferrous ammonium sulfate
8. Acrylonitrile	77. Carbon tetrachloride	143. Ferrous chloride
9. Adipic acid	78. Chlordane	144. Ferrous sulfate
10. Aldrin	79. Chlorine	145. Formaldehyde
11. Allyl alcohol	80. Chlorobenzene	146. Formic acid
12. Allyl chloride	81. Chloroform	147. Fumaric acid
13. Aluminum sulfate	82. Chloropyrifos	148. Furfural
14. Ammonia	83. Chlorosulfonic acid	149. Guthion
15. Ammonium acetate	84. Chromic acetate	150. Heptachlor
16. Ammonium benzoate	85. Chromic acid	151. Hexachlorocyclopentadiene
17. Ammonium bicarbonate	86. Chromic sulfate	152. Hydrochloric acid
18. Ammonium bichromate	87. Chromous chloride	153. Hydrofluoric acid
19. Ammonium bifluoride	88. Cobaltous bromide	154. Hydrogen cyanide
20. Ammonium bisulfite	89. Cobaltous formate	155. Hydrogen sulfide
21. Ammonium carbamate	90. Cobaltous sulfamate	156. Isoprene
22. Ammonium carbonate	91. Coumaphos	157. Isopropanolamine dodecylbenzenesulfonate
23. Ammonium chloride	92. Cresol	158. Kelthane
24. Ammonium chromate	93. Crotonaldehyde	159. Kepone
25. Ammonium citrate	94. Cupric acetate	160. Lead acetate
26. Ammonium fluoroborate	95. Cupric acetoarsenite	161. Lead arsenate
27. Ammonium fluoride	96. Cupric chloride	162. Lead chloride
28. Ammonium hydroxide	97. Cupric nitrate	163. Lead fluoborate
29. Ammonium oxalate	98. Cupric oxalate	164. Lead flourite
30. Ammonium silicofluoride	99. Cupric sulfate	165. Lead iodide
31. Ammonium sulfamate	100. Cupric sulfate ammoniated	166. Lead nitrate
32. Ammonium sulfide	101. Cupric tartrate	167. Lead stearate
33. Ammonium sulfite	102. Cyanogen chloride	168. Lead sulfate
34. Ammonium tartrate	103. Cyclohexane	169. Lead sulfide
35. Ammonium thiocyanate	104. 2,4-D acid (2,4-Dichlorophenoxyacetic acid)	170. Lead thiocyanate
36. Ammonium thiosulfate	105. 2,4-D esters (2,4-Dichlorophenoxyacetic acid esters)	171. Lindane
37. Amyl acetate	106. DDT	172. Lithium chromate
38. Aniline	107. Diazinon	173. Malathion
39. Antimony pentachloride	108. Dicamba	174. Maleic acid
40. Antimony potassium tartrate	109. Dichlobenil	175. Maleic anhydride
41. Antimony tribromide	110. Dichlone	176. Mercaptodimethur
42. Antimony trichloride	111. Dichlorobenzene	177. Mercuric cyanide
43. Antimony trifluoride	112. Dichloropropane	178. Mercuric nitrate
44. Antimony trioxide	113. Dichloropropene	179. Mercuric sulfate
45. Arsenic disulfide	114. Dichloropropene-dichloropropane mix	180. Mercuric thiocyanate
46. Arsenic pentoxide	115. 2,2-Dichloropropionic acid	181. Mercurous nitrate
47. Arsenic trichloride	116. Dichlorvos	182. Methoxychlor
48. Arsenic trioxide	117. Dieldrin	183. Methyl mercaptan
49. Arsenic trisulfide	118. Diethylamine	184. Methyl methacrylate
50. Barium cyanide	119. Dimethylamine	185. Methyl parathion
51. Benzene	120. Dinitrobenzene	186. Mevinphos
52. Benzoic acid	121. Dinitrophenol	187. Mexacarbate
53. Benzonitrile	122. Dinitrotoluene	188. Monoethylamine
54. Benzoyl chloride	123. Diquat	189. Monomethylamine
55. Benzyl chloride	124. Disulfoton	190. Naled
56. Beryllium chloride	125. Diuron	191. Naphthalene
57. Beryllium fluoride	126. Dodecylbenzenesulfonic acid	192. Naphthenic acid
58. Beryllium nitrate	127. Endosulfan	193. Nickel ammonium sulfate
59. Butylacetate	128. Endrin	194. Nickel chloride
60. n-Butylphthalate	129. Epichlorohydrin	195. Nickel hydroxide
61. Butylamine	130. Ethion	196. Nickel nitrate
62. Butyric acid	131. Ethylbenzene	197. Nickel sulfate
63. Cadmium acetate	132. Ethylenediamine	198. Nitric acid
64. Cadmium bromide	133. Ethylene dibromide	199. Nitrobenzene
65. Cadmium chloride	134. Ethylene dichloride	200. Nitrogen dioxide
66. Calcium arsenate	135. Ethylene diaminetetracetic acid (EDTA)	201. Nitrophenol
67. Calcium arsenite		202. Nitrotoluene
68. Calcium carbide		203. Paraformaldehyde
69. Calcium chromate		

HAZARDOUS SUBSTANCES (continued)

204. Parathion	238. Sodium dodecylbenzenesulfonate	266. Trichloroethylene
205. Pentachlorophenol	239. Sodium fluoride	267. Trichlorophenol
206. Phenol	240. Sodium hydrosulfide	268. Triethanolamine dodecylbenzenesulfonate
207. Phosgene	241. Sodium hydroxide	269. Triethylamine
208. Phosphoric acid	242. Sodium hypochlorite	270. Trimethylamine
209. Phosphorus	243. Sodium methyrate	271. Uranyl acetate
210. Phosphorus oxychloride	244. Sodium nitrite	272. Uranyl nitrate
211. Phosphorus pentasulfide	245. Sodium phosphate (dibasic)	273. Vanadium pentoxide
212. Phosphorus trichloride	246. Sodium phosphate (tribasic)	274. Vanadyl sulfate
213. Polychlorinated biphenyls (PCB)	247. Sodium selenite	275. Vinyl acetate
214. Potassium arsenate	248. Strontium chromate	276. Vinylidene chloride
215. Potassium arsenite	249. Strychnine	277. Xylene
216. Potassium bichromate	250. Styrene	278. Xylenol
217. Potassium chromate	251. Sulfuric acid	279. Zinc acetate
218. Potassium cyanide	252. Sulfur monochloride	280. Zinc ammonium chloride
219. Potassium hydroxide	253. 2,4,5-T acid (2,4,5- Trichlorophenoxyacetic acid)	281. Zinc borate
220. Potassium permanganate	254. 2,4,5-T amines (2,4,5-Trichlorophenoxy acetic acid amines)	282. Zinc bromide
221. Propargite	255. 2,4,5-T esters (2,4,5-Trichlorophenoxy acetic acid esters)	283. Zinc carbonate
222. Propionic acid	256. 2,4,5-T salts (2,4,5-Trichlorophenoxy acetic acid salts)	284. Zinc chloride
223. Propionic anhydride	257. 2,4,5-TP acid (2,4,5-Trichlorophenoxy propanoic acid)	285. Zinc cyanide
224. Propylene oxide	258. 2,4,5-TP acid esters (2,4,5- Trichlorophenoxy propanoic acid esters)	286. Zinc fluoride
225. Pyrethrins	259. TDE (Tetrachlorodiphenyl ethane)	287. Zinc formate
226. Quinoline	260. Tetraethyl lead	288. Zinc hydrosulfite
227. Resorcinol	261. Tetraethyl pyrophosphate	289. Zinc nitrate
228. Selenium oxide	262. Thallium sulfate	290. Zinc phenolsulfonate
229. Silver nitrate	263. Toluene	291. Zinc phosphide
230. Sodium	264. Toxaphene	292. Zinc silicofluoride
231. Sodium arsenate	265. Trichlorofon	293. Zinc sulfate
232. Sodium arsenite		294. Zirconium nitrate
233. Sodium bichromate		295. Zirconium potassium flouride
234. Sodium bifluoride		296. Zirconium sulfate
235. Sodium bisulfite		297. Zirconium tetrachloride
236. Sodium chromate		
237. Sodium cyanide		

LINE DRAWING

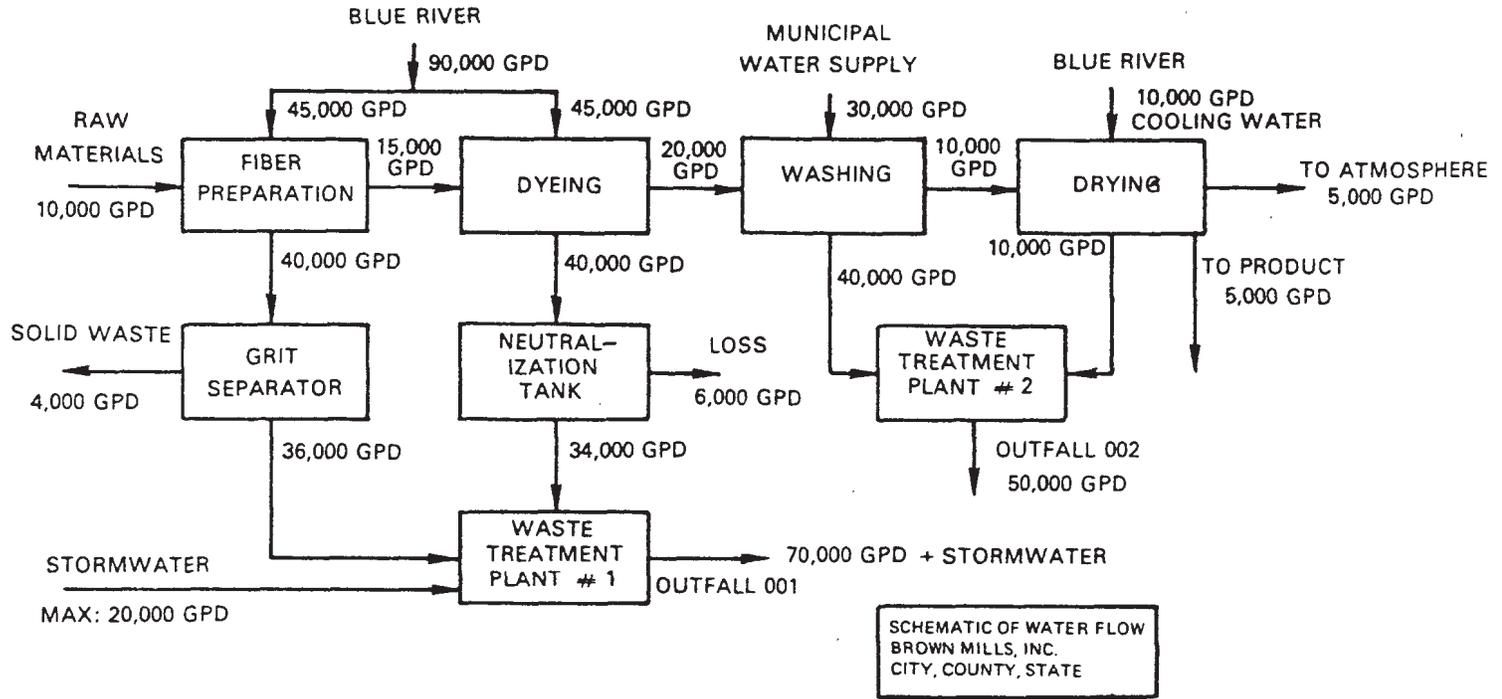


FIGURE 2C-1

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?
 YES (complete the following table) NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW (list)	3. FREQUENCY		4. FLOW				c. DURATION (in days)
		a. DAYS PER WEEK (specify average)	b. MONTHS PER YEAR (specify average)	a. FLOW RATE (in mgd)		b. TOTAL VOLUME (specify with units)		
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?
 YES (complete Item III-B) NO (to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?
 YES (complete Item III-C) NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS (list outfall numbers)
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of waste-water treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.
 YES (complete the following table) NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	b. SOURCE OF DISCHARGE		a. REQUIRED	b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

CONTINUED FROM PAGE 2

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding — Complete one set of tables for each outfall — Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

YES (list all such pollutants below)

NO (go to Item VI-B)

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

YES (identify the test(s) and describe their purposes below)

NO (go to Section VIII)

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

YES (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)

NO (go to Section IX)

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)

IX. CERTIFICATION

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.

A. NAME & OFFICIAL TITLE (type or print)

B. PHONE NO. (area code & no.)

C. SIGNATURE

D. DATE SIGNED

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT				4. UNITS		5. INTAKE (optional)		6. NO. OF ANALYSES		
	PRE-SENT	RECEIVED	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE		c. LONG TERM AVERAGE VALUE (if available)	d. NO. OF ANALYSES	e. CONCENTRATION	f. MASS		g. LONG TERM AVERAGE VALUE	
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS						(1) CONCENTRATION	(2) MASS
g. Nitrogen, Total Organic (as N)	<input type="checkbox"/>	<input type="checkbox"/>											
h. Oil and Grease	<input type="checkbox"/>	<input type="checkbox"/>											
i. Phosphorus (as P), Total (7723-14-0)	<input type="checkbox"/>	<input type="checkbox"/>											
j. Radioactivity													
(1) Alpha, Total	<input type="checkbox"/>	<input type="checkbox"/>											
(2) Beta, Total	<input type="checkbox"/>	<input type="checkbox"/>											
(3) Radium, Total	<input type="checkbox"/>	<input type="checkbox"/>											
(4) Radium 226, Total	<input type="checkbox"/>	<input type="checkbox"/>											
k. Sulfate (as SO ₄) (14808-79-8)	<input type="checkbox"/>	<input type="checkbox"/>											
l. Sulfide (as S)	<input type="checkbox"/>	<input type="checkbox"/>											
m. Sulfite (as SO ₃) (14265-45-3)	<input type="checkbox"/>	<input type="checkbox"/>											
n. Surfactants	<input type="checkbox"/>	<input type="checkbox"/>											
o. Aluminum, Total (7429-90-5)	<input type="checkbox"/>	<input type="checkbox"/>											
p. Barium, Total (7440-39-3)	<input type="checkbox"/>	<input type="checkbox"/>											
q. Boron, Total (7440-42-8)	<input type="checkbox"/>	<input type="checkbox"/>											
r. Cobalt, Total (7440-48-4)	<input type="checkbox"/>	<input type="checkbox"/>											
s. Iron, Total (7439-89-6)	<input type="checkbox"/>	<input type="checkbox"/>											
t. Magnesium, Total (7439-95-4)	<input type="checkbox"/>	<input type="checkbox"/>											
u. Molybdenum, Total (7439-98-7)	<input type="checkbox"/>	<input type="checkbox"/>											
v. Manganese, Total (7439-96-5)	<input type="checkbox"/>	<input type="checkbox"/>											
w. Tin, Total (7440-31-5)	<input type="checkbox"/>	<input type="checkbox"/>											
x. Titanium, Total (7440-32-6)	<input type="checkbox"/>	<input type="checkbox"/>											

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2c for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (all 7 pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT				4. UNITS			5. INTAKE (optional)			
	a. TEST ING. QUER. F.D.	b. BE- LIEVED PRE- SENT.	c. BE- LIEVED AP- SENT.	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)	d. NO. OF ANAL- YSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANAL- YSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS					(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS														
1M. Antimony, Total (7440-36-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
2M. Arsenic, Total (7440-38-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
3M. Beryllium, Total, (7440-41-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
4M. Cadmium, Total (7440-43-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
5M. Chromium, Total (7440-47-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
6M. Copper, Total (7440-50-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
7M. Lead, Total (7439-92-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
8M. Mercury, Total (7439-97-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
9M. Nickel, Total (7440-02-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
10M. Selenium, Total (7782-49-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
11M. Silver, Total (7440-22-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
12M. Thallium, Total (7440-28-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
13M. Zinc, Total (7440-66-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
14M. Cyanide, Total (57-12-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
15M. Phenols, Total	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											

DIOXIN				DESCRIBE RESULTS
2,3,7,8-Tetra- chlorodibenzo-P- Dioxin (1764-01-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'		3. EFFLUENT				4. UNITS		5. INTAKE (optional)		
	STRENGTH PRE-TEST	STRENGTH RECEIVED	a. MAXIMUM DAILY VALUE (if available)		b. MAXIMUM 30 DAY VALUE (if available)		a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	b. NO. OF ANALYSES	
	PRE-TEST	RECEIVED	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - VOLATILE COMPOUNDS											
1V. Acrolein (107-02-8)	<input type="checkbox"/>	<input type="checkbox"/>									
2V. Acrylonitrile (107-13-1)	<input type="checkbox"/>	<input type="checkbox"/>									
3V. Benzene (71-43-2)	<input type="checkbox"/>	<input type="checkbox"/>									
4V. Bis (Chloromethyl) Ether (542-88-1)	<input type="checkbox"/>	<input type="checkbox"/>									
5V. Bromoform (75-25-2)	<input type="checkbox"/>	<input type="checkbox"/>									
6V. Carbon Tetrachloride (56-23-5)	<input type="checkbox"/>	<input type="checkbox"/>									
7V. Chlorobenzene (108-90-7)	<input type="checkbox"/>	<input type="checkbox"/>									
8V. Chlorodibromomethane (124-48-1)	<input type="checkbox"/>	<input type="checkbox"/>									
9V. Chloroethane (75-00-3)	<input type="checkbox"/>	<input type="checkbox"/>									
10V. 2-Chloroethylvinyl Ether (110-75-8)	<input type="checkbox"/>	<input type="checkbox"/>									
11V. Chloroform (67-66-3)	<input type="checkbox"/>	<input type="checkbox"/>									
12V. Dichlorobromomethane (75-27-4)	<input type="checkbox"/>	<input type="checkbox"/>									
13V. Dichlorodifluoromethane (75-71-8)	<input type="checkbox"/>	<input type="checkbox"/>									
14V. 1,1-Dichloroethane (75-34-3)	<input type="checkbox"/>	<input type="checkbox"/>									
15V. 1,2-Dichloroethane (107-06-2)	<input type="checkbox"/>	<input type="checkbox"/>									
16V. 1,1-Dichloroethylene (75-35-4)	<input type="checkbox"/>	<input type="checkbox"/>									
17V. 1,2-Dichloropropane (78-87-5)	<input type="checkbox"/>	<input type="checkbox"/>									
18V. 1,3-Dichloropropylene (542-75-6)	<input type="checkbox"/>	<input type="checkbox"/>									
19V. Ethylbenzene (100-41-4)	<input type="checkbox"/>	<input type="checkbox"/>									
20V. Methyl Bromide (74-83-9)	<input type="checkbox"/>	<input type="checkbox"/>									
21V. Methyl Chloride (74-87-3)	<input type="checkbox"/>	<input type="checkbox"/>									

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'		3. EFFLUENT				4. UNITS		5. INTAKE (optional)					
	TESTING QUANTITY	DELIVERED SENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (1) CONCENTRATION	(2) MASS	c. LONG TERM AYRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	e. CONCENTRATION	f. MASS	g. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	h. NO. OF ANALYSES
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS														
1B. Acenaphthene (83-32-9)	<input type="checkbox"/>	<input type="checkbox"/>												
2B. Acenaphthylene (208-96-8)	<input type="checkbox"/>	<input type="checkbox"/>												
3B. Anthracene (120-12-7)	<input type="checkbox"/>	<input type="checkbox"/>												
4B. Benzidine (92-87-5)	<input type="checkbox"/>	<input type="checkbox"/>												
5B. Benzo (a) Anthracene (56-55-3)	<input type="checkbox"/>	<input type="checkbox"/>												
6B. Benzo (a) Pyrene (50-32-8)	<input type="checkbox"/>	<input type="checkbox"/>												
7B. 3,4-Benzo-fluoranthene (205-99-2)	<input type="checkbox"/>	<input type="checkbox"/>												
8B. Benzo (ghi) Perylene (191-24-2)	<input type="checkbox"/>	<input type="checkbox"/>												
9B. Benzo (k) Fluoranthene (207-08-9)	<input type="checkbox"/>	<input type="checkbox"/>												
10B. Bis (2-Chloro-ethoxy) Methane (111-91-1)	<input type="checkbox"/>	<input type="checkbox"/>												
11B. Bis (2-Chloro-ethyl) Ether (111-44-4)	<input type="checkbox"/>	<input type="checkbox"/>												
12B. Bis (2-Chloro-propyl) Ether (102-60-1)	<input type="checkbox"/>	<input type="checkbox"/>												
13B. Bis (2-Ethyl-hexyl) Phthalate (117-81-7)	<input type="checkbox"/>	<input type="checkbox"/>												
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)	<input type="checkbox"/>	<input type="checkbox"/>												
15B. Butyl Benzyl Phthalate (85-68-7)	<input type="checkbox"/>	<input type="checkbox"/>												
16B. 2-Chloro-naphthalene (91-58-7)	<input type="checkbox"/>	<input type="checkbox"/>												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)	<input type="checkbox"/>	<input type="checkbox"/>												
18B. Chrysene (218-01-9)	<input type="checkbox"/>	<input type="checkbox"/>												
19B. Dibenzo (a,h) Anthracene (53-70-3)	<input type="checkbox"/>	<input type="checkbox"/>												
20B. 1,2-Dichloro-benzene (95-50-1)	<input type="checkbox"/>	<input type="checkbox"/>												
21B. 1,3-Dichloro-benzene (541-73-1)	<input type="checkbox"/>	<input type="checkbox"/>												

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'		3. EFFLUENT		4. UNITS		5. INTAKE (optional)		
	TESTING REQUIRED	PRE-SENT	CONCENTRATION	MAXIMUM DAILY VALUE	CONCENTRATION	CONCENTRATION	CONCENTRATION	LONG TERM AVERAGE VALUE	NO. OF ANALYSES
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (continued)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)
22B. 1,4-Dichlorobenzene (106-46-7)	<input type="checkbox"/>	<input type="checkbox"/>							
23B. 3,3'-Dichlorobenzidine (91-94-1)	<input type="checkbox"/>	<input type="checkbox"/>							
24B. Diethyl Phthalate (84-66-2)	<input type="checkbox"/>	<input type="checkbox"/>							
25B. Dimethyl Phthalate (131-11-3)	<input type="checkbox"/>	<input type="checkbox"/>							
26B. Di-N-Butyl Phthalate (84-74-2)	<input type="checkbox"/>	<input type="checkbox"/>							
27B. 2,4-Dinitrotoluene (121-14-2)	<input type="checkbox"/>	<input type="checkbox"/>							
28B. 2,6-Dinitrotoluene (606-20-2)	<input type="checkbox"/>	<input type="checkbox"/>							
29B. Di-N-Octyl Phthalate (117-84-0)	<input type="checkbox"/>	<input type="checkbox"/>							
30B. 1,2-Diphenylhydrazine (as Azobenzene) (122-66-7)	<input type="checkbox"/>	<input type="checkbox"/>							
31B. Fluoranthene (206-44-0)	<input type="checkbox"/>	<input type="checkbox"/>							
32B. Fluorene (86-73-7)	<input type="checkbox"/>	<input type="checkbox"/>							
33B. Hexachlorobenzene (118-74-1)	<input type="checkbox"/>	<input type="checkbox"/>							
34B. Hexachlorobutadiene (87-68-3)	<input type="checkbox"/>	<input type="checkbox"/>							
35B. Hexachlorocyclopentadiene (77-47-4)	<input type="checkbox"/>	<input type="checkbox"/>							
36B. Hexachloroethane (67-72-1)	<input type="checkbox"/>	<input type="checkbox"/>							
37B. Indeno (1,2,3-cd) Pyrene (193-39-5)	<input type="checkbox"/>	<input type="checkbox"/>							
38B. Isophorone (78-59-1)	<input type="checkbox"/>	<input type="checkbox"/>							
39B. Naphthalene (91-20-3)	<input type="checkbox"/>	<input type="checkbox"/>							
40B. Nitrobenzene (98-95-3)	<input type="checkbox"/>	<input type="checkbox"/>							
41B. N-Nitrosodimethylamine (62-75-9)	<input type="checkbox"/>	<input type="checkbox"/>							
42B. N-Nitrosodi-N-Propylamine (621-64-7)	<input type="checkbox"/>	<input type="checkbox"/>							

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'		3. EFFLUENT				4. UNITS		5. INTAKE (optional)			
	TEST RECD	DATE PREP	DATE RECEIVED	CONCENTRATION (1)	MASS (2)	CONCENTRATION (1)	MASS (2)	CONCENTRATION (1)	MASS (2)	LONG TERM AVERAGE VALUE (1)	LONG TERM AVERAGE VALUE (2)	NO. OF ANALYSES
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (continued)												
43B. N-Nitrosodiphenylamine (86-30-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
44B. Phenanthrene (85-01-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
45B. Pyrene (129-00-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
46B. 1,2,4-Trichlorobenzene (120-82-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
GC/MS FRACTION - PESTICIDES												
1P. Aldrin (309-00-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
2P. α -BHC (319-84-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
3P. β -BHC (319-85-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
4P. γ -BHC (58-89-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
5P. δ -BHC (319-86-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
6P. Chlordane (57-74-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
7P. 4,4'-DDT (50-29-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
8P. 4,4'-DDE (72-55-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
9P. 4,4'-DDD (72-54-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
10P. Dieldrin (60-57-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
11P. α -Endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
12P. β -Endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
13P. Endosulfan Sulfate (1031-07-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
14P. Endrin (72-20-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
15P. Endrin Aldehyde (7421-93-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
16P. Heptachlor (76-44-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									

EPA I.D. NUMBER (copy from Item 1 of Form 1) | OUTFALL NUMBER

CONTINUED FROM PAGE V-8

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'		3. EFFLUENT		4. UNITS		5. INTAKE (optional)	
	a. TESTING RECORD	b. RECEIVED LEVEL	b. MAXIMUM DAILY VALUE (1) CONCENTRATION (2) MASS	c. LONG TERM AVG. VALUE (if available) (1) CONCENTRATION (2) MASS	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION (2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION — PESTICIDES (continued)								
17P. Heptachlor Epoxide (1024-57-3)	<input type="checkbox"/>	<input type="checkbox"/>						
18P. PCB-1242 (53469-21-9)	<input type="checkbox"/>	<input type="checkbox"/>						
19P. PCB-1254 (11097-69-1)	<input type="checkbox"/>	<input type="checkbox"/>						
20P. PCB-1221 (11104-28-2)	<input type="checkbox"/>	<input type="checkbox"/>						
21P. PCB-1232 (11141-16-5)	<input type="checkbox"/>	<input type="checkbox"/>						
22P. PCB-1248 (12672-29-6)	<input type="checkbox"/>	<input type="checkbox"/>						
23P. PCB-1260 (11096-82-5)	<input type="checkbox"/>	<input type="checkbox"/>						
24P. PCB-1016 (12674-11-2)	<input type="checkbox"/>	<input type="checkbox"/>						
25P. Toxaphene (8001-35-2)	<input type="checkbox"/>	<input type="checkbox"/>						