

**CITY OF PEWAUKEE
SEWER & WATER DIVISION
W240 N3065 PEWAUKEE ROAD
PEWAUKEE, WISCONSIN 53072
PHONE: 262-691-0804
FAX: 262-691-5729**

NOTICE OF INTENT TO DISCHARGE WASTEWATER

(Please print. Mail or fax to the address above.)

Note - The discharge shall comply with all conditions of the City Municipal Code Chapter 13.20 found in Title 13 Public Services at: www.cityofbrookfield.com.

FORM I - To Be Completed By Commercial / Industrial User

1. Company Name: _____
2. Facility Address: Street _____
City, State, Zip _____
3. Mailing Address: Street _____
(If Different) City, State, Zip _____
4. Company Representative:
Name _____ Title _____
Phone _____ Fax _____
E-Mail _____
5. Brief description of business:

6. Existing number of employees: Full Time _____ Part Time _____
7. Operating: Days/Week _____ Hours/Day _____ # Shifts _____
8. Facility four-digit SIC code ____ _
Or six-digit NAICS code ____ _
9. Reason for filing survey:
 - a. _____ Change of occupancy
 - b. _____ Construction of a new facility/new addition
 - c. _____ Proposing to discharge from a facility where there is currently no discharge or adding a new sewer connection
 - d. _____ Significantly altering the volume or characteristics of an existing discharge
 - e. _____ Applying for reissuance of an existing discharge permit
 - f. _____ Per request by municipality - discharge ongoing with no expected changes
 - g. _____ Update previous information

10. Date when new or altered discharge is expected to begin _____

11. Estimated sanitary sewer discharge:

<u>Existing</u>		<u>Proposed</u>
_____	Gal/Day process wastewater	_____
_____	Gal/Day sanitary wastewater	_____
_____	Gal/Day cooling water	_____

Note: A review of quarterly water usage bills may be helpful in assigning flow values. Total gal/day (for all uses) = qtr usage (in 1000 gallons) x 1000/# operating days in qtr. This daily total is then distributed into estimated gal/day of process, sanitary, and/or cooling.

Process wastewater is any discharge other than sanitary, non-contact cooling or boiler blowdown water.

Sanitary flow may be estimated as 20 gal/day/employee.

12. Describe process(es) that will result in the discharge of a commercial/industrial process wastewater: _____

13. List any chemicals/pollutants expected to be present in your discharge:

14. Describe any wastewater pretreatment and/or facilities to be used: _____

15. Is there any usage of toxic organic compounds at the facility?
(solvents, flammable compounds, etc.) Yes _____ No _____

16. How are toxic organic compounds disposed of?
____ Discharge to sanitary sewer
____ Hauled to treatment / recycling facility
____ No waste (used in process or sparingly on rags)
____ Other, specify: _____

17. Comments: _____

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.

Authorized Representative _____ Date _____