

Form Approved
OMB Number
Approval Expires XX-XX-XX

EPA ID NUMBER:
(for official use only)

NPDES PERMIT NUMBER:

FACILITY NAME:

PART 1: LIMITED BACKGROUND INFORMATION

This part should be completed only by "discharge-only" facilities—that is, facilities that do not currently have, and are not seeking, an NPDES permit for a direct discharge to a surface body of water. This part also does not pertain to facilities that are requesting, or that are required to have, discharge permits for their permits.

For purposes of this form, the term "you" refers to the applicant. "This facility" and "your facility" refer to the facility for which application information is submitted.

1. Facility Information.

a. Facility name

b. Mailing address

c. Contact person

Title

Phone number

d. Facility address
(not P.O. Box)

e. Indicate the type of facility:

___ Publicly owned treatment works (POTW)

___ Privately owned treatment works

___ Federally owned treatment works

___ Blending or treatment operation

___ Surface disposal site

___ Sewage sludge incinerator

___ Other. If other, explain:

2. Applicant Information. If the applicant is different from the above, provide the following:

a. Applicant name

b. Mailing address

c. Contact person

2. Applicant Information. (cont'd).

Title

Phone number

d. Is the applicant the owner or operator (or both) of this facility?

___ owner ___ operator ___ other (describe) ___

e. Indicate whether correspondence regarding this permit should be directed to the facility or the applicant.

___ facility ___ applicant

3. Sewage sludge amount. Provide the total dry matter tons per latest 365-day period of sewage sludge handled under the following practices:

a. Amount generated at the facility:

b. Amount received from off site:

c. Amount treated or blended on site:

d. Amount sold or given away in a bag or other container to applicant or to the land:

e. Amount of bulk sewage sludge shipped off site for treatment or blending:

f. Amount applied to the land in bulk form:

g. Amount placed on a surface disposal site:

h. Amount fired in a sewage sludge incinerator:

i. Amount sent to a municipal solid waste landfill:

j. Amount used or disposed by another practice:

Describe: _____