



**City of Annapolis**  
**Department of Public Works**  
 145 Gorman Street Fl 2  
 Annapolis, MD 21401-2529

FOR CITY USE ONLY	
PERMIT #	_____
ISSUED	_____
EXPIRES	_____

[Waste@annapolis.gov](mailto:Waste@annapolis.gov) • 410-263-7949 • Fax 410-263-3322 • TDD use MD Relay or 711 • [www.annapolis.gov](http://www.annapolis.gov)

**Wastewater Discharge Pretreatment Application**  
**Non-Residential: Industrial Establishment**

Annapolis City Code [Chapter 16.16 Article II](#) regulates the discharge of wastewater to the City's Sanitary Sewer System. All users that discharge into the City's Sanitary Sewer System are required to complete the appropriate forms. If you are deemed to be a non-residential user, the information requested in this application will be used to determine the wastewater discharge permit requirements.

**Directions**

Complete the entire application. All required attachments shall be submitted with the application in order for the application to be considered complete. Incomplete or unsigned forms will be returned.

Mail the completed application to the office address above. Should you require assistance in completing this form, please call 410-263-7949.

**I. General Information**

Request for:

New wastewater discharge permit

Proposed discharge

Renewal wastewater discharge permit

Location being renovated or new equipment added

Existing Discharge

New owner (permits are not transferable)

Company name \_\_\_\_\_

Facility address \_\_\_\_\_

Trading/Restaurant name \_\_\_\_\_

Mailing address \_\_\_\_\_

Facility Representative/On-site Manager

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Owner/Legal Representative

Enter below the name and title of the owner or authorized agent designated as the representative and signatory authority who can be served with notices and is responsible for the signing of all correspondence and reports. All correspondence, including certified mail, will be sent to this representative at the mailing address listed.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Title \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**II. Operation Information**

Hours of Operation

	Start	Stop	24 Hours	Closed
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Scheduled Shutdown Periods: \_\_\_\_\_

**III. User Facility Information**

**A. Wastewater Characteristics**

1. Indicate if any of the following characteristics or constituents is or can be present in your discharge as a result of your operations:

- |                         |                         |  |
|-------------------------|-------------------------|--|
| Algicides*              | Hydrocarbons            | Shredded Garbage                           |
| Aluminum                | Iodine                  | Solvents                                   |
| Ammonia                 | Low pH (acids)          | Sulfate                                    |
| Barium                  | Manganese               | Sulfide                                    |
| Bromide                 | Molybdenum              | Surfactants (detergents)                   |
| Chlorine                | Oil & Grease            | Others                                     |
| Cobalt                  | PCB's                   |  |
| Flammable Substances*   | Pesticides*             | * Identify chemical compounds or elements: |
| Fluorides               | Phosphorous             | _____                                      |
| Formaldehyde            | Radioactive Substances* | _____                                      |
| High Temperature Wastes | Salt Brines             | _____                                      |

2. Indicate if any of the following chemical compounds are known or suspected to be present in your wastewater discharge or are used at your facility or generated as a by-product but not discharged. Some compounds are known by other names.

## Chemical Compound Chart:

Asbestos (fibrous)	N-nitrosodi n-polypropylamine	4-nitrophenol
Chloromethane	N-nitrosodiphenylamine	Phenanthrene
Cyanide (total)	Zinc	Phenol
2-chloronaphthalene	1,2 dichloroethane	2,6 dinitroluene
Antimony	1,1 dichloroethane	Benzo (k)fluoranthene
2-chlorophenol	Acenaphthene	1,2 diphenylhydrazine
Arsenic (total)	1,2 trans-dichloroethelene	a-BHC (alpha)
4-chlorophenyl phenyl ether	Acenaphthylene	a-endosulfan (alpha)
Beryllium (total)	2,4 dichloropropane	b-BHC (beta)
Chryses	Acrolein	b-endosulfan (beta)
Cadmium (total)	1,2 dichloropropane	d-BHC (delta)
4,4' – DDD	Acrylonitrile	Endosulfan sulfate
Chromium (total)	1,3 dichloropropane	g-BHC (gamma)
4,4' – DDE	Aldrin	Endrin
Copper (total)	Dieldrin	Bis (2 chloroethyl ether)
4,4' – DDT	Anthracene	Endrin aldehyde
Lead (total)	Diethylphthalate	Bis (2 chloroethoxy) methane
Dibenzo (e,h) anthracene	Benzene	Ethylbenzene
1,2-dichlorobenzene	di-n-butylphthalate	Bis (2 chloropropyl) ether
Nickel (total)	Benzidine	Fluoranthene
1,3-dichlorobenzene	di-n-octylphthalate	Bis (2 ethylhexyl) phthalate
Selenium (total)	Benzo (a)anthracene	Fluorine
1,4-dichlorobenzene	4,6 dinitro-o-cresol	Bromodichloromethane
Silver (total)	Benzo (a)pyrene	Heptachlor
3,3-dichlorobenzidine	2,4 dinitrophenol	Bromoform
Thallium (total)	3,4 benzofluoranthene	Heptachlor apoxide
1,1 dichloroethane	2,4 dinitrotoluene	Bromomethane
2-chloroethyl vinyl ether	PCB 1016	Heptachlorobenzene
Carbon tetrachloride	PCB 1221	4-bromophenylphenyl ether
Chloromethane	PCB 1232	Hexachlorobutadiene
Chlordane	PCB 1242	Butyl benzyl phthalate
Chloroform	PCB 1248	Pyrene
4-chloro-3 methylphenol	PCB 1254	2,3,7,8 tetrachlorodibenzo-p-dioxin
Hexachlorocyclopentadiene	PCB 1260	1,1,2,2 tetrachloroethane
Chlorobenzene	Pentachlorophenol	Tetrachloroethylene
Indeno (1,2,3-cd) pyrene	Naphthalene	Toluene
Isophrone	Nitrobenzene	toxaphene
N-nitrosodimethylamine	2-nitrophenol	1,2,4 trichlorobenzene
1,1,1 trichloroethane	1,1,2 trichloroethylene	2,4,6 trichlorophenol Vinyl chloride

3. Attach schematics/drawings of your facility, indicating site plans, floor plans, and mechanical and plumbing plans (if applicable).
- B. List principal materials (cleaning materials, solvents, plating solutions, catalysts, process chemicals, etc.) that are regularly used in your facility and that might be present in your wastewater discharge to the sanitary sewer.

Generic Name	Principal Chemical Constituents

- C. Product(s) or Service(s) – List products, manufactured or services provided by the facility in its entirety.

Product or Service	Quantity of Rate of Production	Standard Industrial Classification (SIC) Code	Process result in discharge to sanitary sewer

**IV. Other Facility Information**

1. Estimated water usage per year (from water bill): \_\_\_\_\_
2. Where is your solid waste/refuse and/or recycling stored? (e.g. “dumpster in enclosure in the back parking lot” or “96 gallon rolling container stored in the trash room”):  
\_\_\_\_\_

3. What company collects your solid waste/refuse?

Name \_\_\_\_\_ Phone \_\_\_\_\_

4. Volume of solid waste/refuse collected per week:

Volume of container(s) \_\_\_\_\_ X # times collected/week \_\_\_\_\_ = Total Volume: \_\_\_\_\_

5. What company collects your recyclables?

Name \_\_\_\_\_ Phone \_\_\_\_\_

6. Volume of recyclables collected per week:

Volume of container(s) \_\_\_\_\_ X # times collected/week \_\_\_\_\_ = Total Volume: \_\_\_\_\_

7. Describe the location of the 4” sewer cleanout which represents the discharge from your facility.

**V. Storage Tank Information**

1. Are there any under or above ground storage tanks on this site? Yes  No   
If yes, Indicate size and material stored in tanks indicated above:

**CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and attachment, and that based on my inquiry of those individuals immediately responsible for obtaining the information herein, I believe that the submitted information is true, accurate, and complete.

Print Name \_\_\_\_\_ Title \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner of Authorized Owner's Representative Date

**Attachment reminder**

Be sure to submit the following attachments to complete your application:

- Application Fee & Annual Fee for renewal permits. An invoice will be mailed upon application review for new facilities or facilities with new owners.
- Material Safety Data Sheet (MSDS) for all enzymes, bacteria or chemicals used to clean traps, floor drains or sewer lines. (MSDS are available from the manufacturer or sales representative).

Please note that your completed application and all attachments will become a part of your permit. Make sure to keep copies.