

For Agency Use
 Application Number _____
 Date Received _____

STATE OF MISSISSIPPI
 OFFICE OF POLLUTION CONTROL
 P. O. BOX 2261
 JACKSON, MISSISSIPPI 39225-2261

APPLICATION FOR A STATE OPERATING PRETREATMENT PERMIT

(Please print or type)

1. Name of Applicant:					
2. Mailing Address of Applicant:					
Number & Street (P. O. Box):					
City:		State:		Zip:	
Telephone Number:					
3. Applicant's Authorized Agent:					
Name and Title:					
Number & Street (P. O. Box):					
City:		State:		Zip:	
Telephone Number:					
4. Facilities Location:					
Number & Street (P. O. Box):					
City:		County:			
Latitude (Deg., Min., Sec.):					
Longitude (Deg., Min., Sec.):					
5. Nature of Business:					
6. Location Map: (Provide as an attachment to this application)					
7. SIC CODES (4-digit, in order of priority)					

A. FIRST				B. SECOND			
C. THIRD				D. FOURTH			
8. Name of POTW Receiving Wastewater:							
Number & Street (P. O. Box):							
City:				County:			
9. Discharge Type and Occurrence:							
A. Type of Discharge:				Continuous; If Continuous			
		Gallons Per Day,				Batch	
B. Discharge Occurrence:				Days per Week			
C. Discharge Occurrence:							
	January		February		March		April
	May		June		July		August
	September		October		November		December
10. If Batch: A.				Thousand Gallons per Discharge			
B.				Hours per Day			
C.				Discharge Occurrence per Day			
11. Maximum Period of Flow: From						to	
Month		Month					

12. Facility Water Use:	
Estimate average volume in thousand gallons per day for the following types of water usage at this facility.	
Non-contact Cooling:	
Boiler Feed:	
Process (Including Contact Cooling):	
Sanitary:	
Other:	
Total:	
13. List all Facility Discharges:	
Other water losses (surface water, product consumption, evaporation). Indicate volume in thousand gallons.	
14. Give narrative description of process(es) producing discharge, or in case of no discharge, that generates wastewater.	
15. List raw materials used:	

16. PRODUCTION			
<p>A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your Facility? ~ Yes (complete Item 16-B) ~ No (Go to 17)</p>			
<p>B. Are the limitations in the applicable effluent guidelines expressed in terms of production (or other measure of operation)? ~ Yes (complete Item 16-C) ~ No (Go to 17)</p>			
<p>C. If you answered "yes" to Item 16-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.</p>			
1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS (list outfall numbers)
a. QUANTITY PER DAY	B. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	

17. Effluent Characteristics:

A. You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall to the city sewer. If your facility does not have a discharge indicate so and disregard.

1. POLLUTANT	2. EFFLUENT						3. UNITS (<i>specify / blank</i>)	4. INTAKE (<i>optional</i>)				
	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (<i>if available</i>)		c. LONG TERM AVR. VALUE (<i>if available</i>)			d. No. OF ANALYSES	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES	
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS			a. CONCENTRATION	b. MASS		(1) CONCENTRATION
a. Biochemical Oxygen Demand (BOD)												
b. Chemical Oxygen Demand (COD)												
c. Total Suspended Solids (TSS)												
d. Ammonia (as N)												
e. Flow	VALUE		VALUE		VALUE					VALUE		
f. Temperature (winter)	VALUE		VALUE		VALUE				IC	VALUE		
g. Temperature (summer)	VALUE		VALUE		VALUE				IC	VALUE		
h. pH	MIN	MAX	MIN	MAX					STANDARD UNITS			

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (*Use the same format*) instead of completing these pages.

B. INTAKE AND EFFLUENT CHARACTERISTICS		OUTFALL NO.
Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall.		

1. Pollutant and CAS NO. <i>(if available)</i>	2. Mark "X"		3. EFFLUENT								4. UNITS		5. INTAKE <i>(optional)</i>			
	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE <i>(if available)</i>		c. LONG TERM AVERAGE VALUE <i>(if available)</i>		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis		
			(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS			
a. Bromide (24959-67-9)																
b. Chlorine, Total Residual																
c. Fluoride (16984-48-8)																
d. Nitrate-Nitrite (as N)																
e. Nitrogen, Total Organic (as N)																
f. Oil and Grease																

1. Pollutant and CAS NO. (if available)	2. Mark "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
			(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
g. Phosphorus (as P), Total (7723-14-0)														
h. Radioactivity														
1. Alpha, Total														
2. Beta, Total														
3. Radium Total														
4. Radium 226, Total														
i. Sulfate (as SO ₄) 14808-79-8)														
j. Sulfide (as S)														
k. Sulfite (as SO ₃) (14265-45-3)														
l. Surfactants														
m.														

1. Pollutant and CAS NO. (if available)	2. Mark "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
			(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Aluminum Total (7429-90-5)														
n. Barium Total (7440-39-3)														
o. Boron, Total (7440-42-8)														
p. Cobalt Total (7440-48-4)														
q. Iron Total (7439-89-6)														
r. Magnesium Total (7439-95-4)														
s. Molybdenum Total (7439-98-7)														
t. Manganese Total (7439-96-5)														
u. Tin,														

1. Pollutant and CAS NO. (if available)	2. Mark "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
			(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Total (4770-31-5)														
v. Titanium Total (7440-32-6)														

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table I (see attachment) 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 2b 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 20 pages to this part; please review each carefully. Complete one table (*all 20 pages*) for each outfall.

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)															
2M. Arsenic, Total (7440-38-2)															
3M. Beryllium Total 7440-41-7															
4M. Cadmium, Total (7440-43-9)															
5M. Chromium,															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Total (7440-47-3)															
6M. Copper, Total (7440-50-8)															
7M. Lead, Total (7439-92-1)															
8M. Mercury, Total (7439-97-6)															
9M. Nickel, Total (7440-02-0)															
10M. Selenium, Total (7782-49-2)															
11M. Silver, Total (7440-22-4)															
12M. Thallium, Total (7440-28-0)															
13M. Zinc Total															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(7440-66-6)															
14M. Cyanide, Total (57-12-5)															
15M. Phenols, Total															
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)				DESCRIBE RESULTS											
GC/MS FRACTION - VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)															
2V. Acrylonitrile (107-13-1)															
3V. Benzene (71-43-2)															
4V. Bis (Chloromethyl) Ether															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(542-88-1)															
5V. Bromoform (75-25-2)															
6V. Carbon Tetrachloride (56-23-5)															
7V. Chlorobenzene (108-90-7)															
8V. Chlorodibromomethane (124-48-1)															
9V. Chloroethane (75-00-3)															
10V. 2-Chloroethyl-vinyl Ether (110-75-8)															
11V. Chloroform (67-66-3)															
12V. Dichloro-															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
bromo-methane (75-27-4)															
13V. Dichlorodifluoromethane (75-71-8)															
14V. 1,1-Dichloroethane (75-34-3)															
15V. 1,2-Dichloroethane (107-06-2)															
16V. 1,1-Dichloroethylene (75-35-4)															
17V. 1,2-Dichloropropane (78-87-5)															
18V. 1,3-Dichloropropylene (542-75-6)															
19V. Ethylbenzene															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(100-41-4)															
20V. Methyl Bromide (74-83-9)															
21V. Methyl Chloride (74-87-3)															
22V. Methylene Chloride (75-09-2)															
23V. 1,1,2,2-Tetrachloroethane (79-34-5)															
24V. Tetrachloroethylene (127-18-4)															
25V. Toluene (108-88-3)															
26V. 1,2-Trans-Dichloroethylene															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(156-60-5)															
27V. 1,1,1-Trichloroethane (71-55-6)															
28V. 1,1,2-Trichloroethane (79-00-5)															
29V. Trichloroethylene (79-01-6)															
30V. Trichlorofluoromethane (75-69-4)															
31V. Vinyl Chloride (75-01-4)															
GC/MS FRACTION - ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)															
2A. 2,4-Dichlorophenol															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(120-83-2)															
3A. 2,4-Dimethylphenol (105-67-9)															
4A. 4,6-Dinitro-O-Cresol (534-52-1)															
5A. 2,4-Dinitrophenol (51-28-5)															
6A. 2-Nitrophenol (88-75-5)															
7A. 4-Nitrophenol (100-02-7)															
8A. P-Chloro-M-Cresol (59-50-7)															
9A. Pentachlorophenol (87-86-5)															
10A.															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Phenol (108-95-2)															
11A. 2,4,6-Trichlorophenol (88-06-2)															
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)															
2B. Acenaphthylene (208-96-8)															
3B. Anthracene (120-12-7)															
4B. Benzidine (92-87-5)															
5B. Benzo (a) Anthracene (56-55-3)															
6B. Benzo (a) Pyrene (50-32-8)															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
7B. 3,4-Benzo-fluoranthene (205-99-2)															
8B. Benzo (ghi) Perylene (191-24-2)															
9B. Benzo (k) Fluoranthene (207-08-9)															
10B. Bis (2-Chloroethoxy) Methane (111-91-1)															
11B. Bis (2-Chloroethyl) Ether (111-44-4)															
12B. Bis(2-Chloroisopropyl) Ether (102-60-1)															
13B. Bis(2-Ethyl-hexyl) Phthalate															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(117-81-7)															
14B. 4-Bromophenyl Phenyl Ether (101-55-3)															
15B. Butyl Benzyl Phthalate (85-68-7)															
16B. 2-Chloronaphthalene (91-58-7)															
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)															
18B. Chrysene (218-01-9)															
19B. Dibenzo (a,h) Anthracene (53-70-3)															
20B. 1,2-Dichloro-															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
benzene (95-50-1)															
21B. 1,3-Dichlorobenzene (541-73-1)															
22B. 1,4-Dichlorobenzene (106-46-7)															
23B. 3,3'-Dichlorobenzidine (91-94-1)															
24B. Diethyl Phthalate (84-66-2)															
25B. Dimethyl Phthalate (131-11-3)															
26B. Di-N-Butyl Phthalate (84-74-2)															
27B. 2,4-Dinitrotoluene (121-14-2)															
28B. 2,6-															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Dinitro-toluene (606-20-2)															
29B. Di-N-Octyl Phthalate (117-84-0)															
30B. 1,2-Diphenylhydrazine (as Azobenzene) (122-66-7)															
31B. Fluoranthene (206-44-0)															
32B. Fluorene (86-73-7)															
33B. Hexachlorobenzene (118-74-1)															
34B. Hexachlorobutadiene (87-68-3)															
35B. Hexachlorocyclopentadiene															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(77-47-4)															
36B. Hexachloroethane (67-72-1)															
37B. Indeno (1,2,3-cd) Pyrene (193-39-5)															
38B. Iso-phorone (78-59-1)															
39B. Naphthalene (91-20-3)															
40B. Nitrobenzene (98-95-3)															
41B. N-Nitrosodimethylamine (62-75-9)															
42B. N-NitrosodiN-Propylamine (621-64-7)															
43B. N-															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Nitro-sodiphenylamine (86-30-6)															
44B. Phenanthrene (85-01-8)															
45B. Pyrene (129-00-0)															
46B. 1,2,4-Trichlorobenzene (120-82-1)															
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)															
2P. α -BHC (319-84-6)															
3P. β -BHC (319-85-7)															
4P. m-BHC (58-89-9)															
5P. δ -BHC (319-86-8)															
6P.															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
Chlordane (57-74-9)															
7P. 4,4'-DDT (50-29-3)															
8P. 4,4'-DDE (72-55-9)															
9P. 4,4'-DDD (72-54-8)															
10P. Dieldrin (60-57-1)															
11P. α -Endo-sulfan (115-29-7)															
12P. β -Endo-sulfan (115-29-7)															
13P. Endo-sulfan Sulfate (1031-07-8)															
14P. Endrin (72-20-8)															
15P. Endrin Aldehyde															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
(7421-93-4)															
16P. Heptachlor (76-44-8)															
17P. Heptachlor Epoxide (1024-57-3)															
18P. PCB-1242 (53469-21-9)															
19P. PCB-1254 (11097-69-1)															
20P. PCB-1221 (11104-28-2)															
21P. PCB-1232 (11141-16-5)															
22P. PCB-1248 (12672-29-6)															

1. Pollutant and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. Testing Required	B. Believed Present	C. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERAGE VALUE (if available)		d. NO. OF ANALYSIS	a. Concentration	b. Mass	a. LONG TERM AVERAGE VALUE		b. Number of analysis
				(1) CONC.	(2) MASS	(1) CONC.	(2) MASS	(1) CONC.	(2) MASS				(1) CONC.	(2) MASS	
23P. PCB-1260 (11096-82-5)															
24P. PCB-1016 (12674-11-2)															
25P. Toxaphene (8001-35-2)															

18. Treatment Units:

A. Do you provide treatment for your wastewater?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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B. If yes, list and describe each treatment unit and attach a line schematic of the treatment system indicating each treatment unit and a water balance.

19. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item 17 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 Item 20*)

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

20. I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such is true and correct.

Printed Name of Applicant's Authorized Agent Title and/or Individual Meeting Signatory Requirements of 40 CFR 403.12(l)	Title
Date Application Signed	Signature of Authorized Agent and/or Individual Meeting Signatory Requirements of 40 CFR 403.12(l)

TABLE 1

TESTING REQUIREMENTS FOR ORGANIC TOXIC POLLUTANTS INDUSTRY CATEGORY

<u>INDUSTRY CATEGORY</u>	<u>GC/MS FRACTION</u>			
	<u>Volatile</u>	<u>Acid</u>	<u>Base/Neutral</u>	<u>Pesticide</u>
Adhesives and sealants				
Aluminum forming	X	X	X	-
Auto and other laundries	X	X	X	X
Battery manufacturing	X	-	X	-
Coal mining	-	-	-	-
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				
Tall oil rosin (subpart D).....	X	X	X	-
Rosin based derivatives subpart F)	X	X	X	-
All other subparts.....	X	X	-	-
Inorganic chemicals manufacturing	X	X	X	-
Iron and steel manufacturing	X	X	X	-
Leather tanning and finishing	X	X	X	-
Mechanical products manufacturing	X	X	X	-
Nonferrous metals manufacturing	X	X	X	X
Ore mining (applies to the base and precious metals/subpart B)	-	X-	-	-
Organic chemicals manufacturing	X	X	X	X
Paint and ink formulation	X	X	X	-
Pesticides	X	X	X	X
Petroleum refining	X	-	-	-
Pharmaceutical preparations	X	X	X	-
Photographic equipment and supplies	X	X	X	-
Plastic and synthetic materials mfg.	X	X	X	X
Plastic processing	X	-	-	-
Porcelain enameling	-	-	-	-
Printing and publishing	X	X	X	X
Pulp and paperboard mills				
Unbleached Kraft (subpart A)	2	X	2	X
Semi-chemical (subpart B)	2	X	2	2
(subpart C)	2	X	2	2
Unbleached Kraft-neutral sulfite				
semi-chemical (cross recovery)				
(subpart D).....	2	X	2	2
Paperboard from wastepaper (subpart E)	X	X	2	X

Dissolving Kraft (subpart F)	X	X	2	2
Market bleached Kraft (subpart G)	X	X	2	2
BCT bleached Kraft (subpart H)	X	X	2	2
Fine bleached Kraft (subpart I)	X	X	2	2
Papergrade sulfite (subpart J)	X	X	X	2
Dissolving sulfite pulp (subpart K)	X	X	2	2
Groundwood-chemical-mechanical (subpart L)	X	X	2	2
Groundwood-thermo-mechanical (subpart M)	X	X	2	2
Groundwood-CMN papers (subpart N)	X	X	2	2
Groundwood-fine papers (subpart O)	X	X	2	2
Soda (subpart P)	X	X	2	2
Deink (subpart Q)	X	X	2	X
Nonintegrated-fine papers (subpart R)	2	X	2	2
Nonintegrated-tissue papers (subpart S)	X	X	2	X
Tissue from wastepaper (subpart T)	X	X	2	X
Papergrade sulfite (subpart U)	X	X	X	2
All other subparts (V through Z)	Determined case by case, unless superseded by regulation			
Rubber processing	X	X	X	-
Soap and detergent manufacturing	X	X	X	-
Steam electric power plants	X	X	-	-
Textile mills	X	X	X	-
Timber products processing	X	X	X	X

2 - Do not test unless "reason to believe" it is discharged.