



Industrial Waste Program Small Quantity Wastewater Application

Submit to the City of Anacortes Wastewater Treatment Plant
 P. O. Box 547, Anacortes, WA 98221
 Phone: 360-299-1501
 Fax: 360-299-9206

Business Name			
Business Location (address, city and zip code)			
Company/Business Contact			
Contact Name			
Company			
Mailing Address			
City/State/Zip Code			
Office Phone No.			
Cell Phone No.			
Fax No.			
E-mail Address			
Primary person to be contacted about this application			
Company/Business Name			
Company/Business Name			
Wastewater Source			
Quantity			
Frequency		Normal pumping frequency	Once every ____ year(s)
List all business activities generating wastewater (whether or not the waste is hauled off site or collected)	<i>Examples of business activities generating wastewater include equipment (e.g., tools, trucks, containers washing or steam cleaning, photo finishing, x-ray developing, disinfection solutions, metal finishing, rinse waters, laboratory wastes, mop water)</i>		



Industrial Waste Program Small Quantity Wastewater Application

Describe the best management practices (BMPs) your business employs to prevent pollutants from entering your holding tank. *Examples of BMPs include sending waste such as used hazardous materials to an approved treatment and disposal site.*

The requested information is needed to aid our program in determining whether or not the wastewater in your holding tank may be hauled to the Anacortes Wastewater Treatment Plant for disposal. After review of this application, we may request that you sample your holding tank for specific pollutants (e.g. metals such as mercury or organic pollutants such as toluene) or that we be allowed to inspect your facility/process prior to our making a determination. If you choose not to follow through with these requests, the Anacortes Wastewater Treatment Plant may not accept the waste at our facility. If you have any questions regarding this application or our requirements please contact the Anacortes Wastewater Treatment Plant Manager at 360-299-1501.

I certify that, to the best of my knowledge and belief, the information provided in this document and all attachments is 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.

Signature

Date

Name (print)