BRAINERD PUBLIC UTILITIES

8027 Highland Scenic Rd • P.O. Box 373 • Brainerd, Minnesota 56401
Business Office: 218.829.8726 ■ ***Repair Service:*** 218.829.2193
www.bpu.org

PERMIT (RE)-ISSUANCE APPLICATION FOR DISCHARGE OF INDUSTRIAL WASTEWATER TO THE BRAINERD COLLECTION SYSTEM

Brainerd City Code Section 700.15. Permit Requirement: Industrial Users discharging wastewater to the BPU WWTF shall apply for an Industrial Discharge Permit in accordance with these rules unless the Public Utilities Wastewater Manager determines the wastewater has an insignificant impact to the BPU WWTF. No Industrial User requiring a permit shall discharge to the BPU WWTF until the Industrial User has been issued a permit. Issuance of an Industrial Discharge Permit shall not relieve the Industrial User from any obligation to obtain any hazardous waste license required by other authorities or to comply with any other local, state, or federal requirements regarding waste disposal.

The criteria utilized by the Public Utility Wastewater Manager to determine if an Industrial Discharge Permit will be required include:

(a) An average flow loading greater than 25,000 gallons per operating day; or
(b) A pollutant concentration of greater than 50% for one or more regulated pollutants (see 700.09, Subd. 6) at the point of discharge; or
(c) Has prohibitive discharge properties (see 700.07.); or
(d) Industrial wastewater flow has been pretreated or passed through an equalization tank before discharge; or
(e) A hydraulic or organic loading greater than 5% of the average dry weather capacity of the BPU WWTF; or
(f) An industrial process regulated by EPA categorical standards; or
(g) Others as designated by Brainerd Public Utilities as defined in 40 CFR 403.12 (a).

WWTF/ Pretreatment Program Use Only

Facility		CIU SIU SD LWH	LWH Only: Tour Complete
Staff		MPCA Notification (if required)	
App. Received		Application Fee paid ($100)	
Industrial Category		Annual Fee $ Paid in full	Lab data entered
Permit #		In Compliance? Yes No	
Permit Issue Date		Notes:	

GENERAL

1. Company Name: _____
2. Mailing Address: _____
   _____
3. Facility Address: _____
   _____
4. Contact Person: _____
   Job Title: _____
   Telephone No.: _____
5. Does your facility currently hold a permit with the BPU WWTF: Y / N
   Current Permit: Permit #: _____ Expiry Date: _____

A. OPERATION

1. Total Number of Employees: _____
2. Operating Hours Per Day: _____
3. Number of Shifts Per Day: _____
4. Number of Employees Per Shift: 1st _____ 2nd _____ 3rd _____
5. Operating Days Per Week: _____

B. PRODUCTION

1.

Nature of Operation	SIC Code	Estimated Rate Of Production	Estimated Total Quantity/Year

2.

Principal Raw Materials	Percent Total

3.

Principal Products	Percent Total

4. If there are seasonal changes in your production rate, please describe:

_____

_____

_____

_____

_____

D. SOURCE OF WATER SUPPLY

Source	Gallons/Year	Determined By
Municipal		
Private Well		
Other		
TOTAL		

E. WASTE DISCHARGE

Type	Gallons/Year	Determined By
Uncontaminated Cooling Water Discharged to:		
a.) Storm Sewer		
b.) Receiving Water		
c.) Domestic or Sewer Combined		
Domestic Waste		
Industrial Waste		
Other		
TOTAL		

Explain discrepancy, if any, between total water supply and total waste discharge:

_____

_____

_____

F. INDUSTRIAL WASTEWATER FLOW CHARACTERISTICS

1. Continuous Discharge

Concentration	Daily Flow Rate	Time & Duration	Determined By
Average			
Maximum			
Minimum			

Please indicate (if any) the weekly, monthly, yearly, or seasonal variations of your discharges: _____

2. Batch Dump

Quantity	Contents	Duration	Frequency

3. Does your company have an NPDES Permit for discharge? _____
   If "YES", please indicate the discharge volume, location, and name of the receiving water. _____
   _____

G. ANALYTICAL DATA ON INDUSTRIAL WASTE

1. Date Representative Sample Collected: _____
2. Sample Collected By (Organization): _____
3. Sample Analyzed By (Organization): _____
4. Type of Sample Collection (grab or composite): _____
   _____

H. ANALYTICAL DATA ON INDUSTRIAL WASTE (Cont.)

5. Method of Sample Composition (manual or automatic): _____
   _____

Constituent	Result
pH	units
Total Suspended Solids	mg/L
$CBOD_5$	mg/L
Chemical Oxygen Demand	mg/L
Grease and/or Oil	mg/L
Arsenic	mg/L
Cadmium	mg/L
Chromium (Total)	mg/L

Copper	mg/L
Cyanide (Total)	mg/L
Lead	mg/L
Mercury	mg/L
Molybdenum	mg/L
Nickel	mg/L
Phosphorus (Total)	mg/L
Selenium	mg/L
Silver	mg/L
Zinc	mg/L
TTO (EPA method 624, 625)	mg/L
Other	mg/L

I. ANALYTICAL DATA ON INDUSTRIAL WASTE (Cont.)

6. Method of Sample Composition (manual or automatic): _____

_____

Compound (Acronym) (Source of Compound list and Reporting Limit (RL) goals* *Subject to change upon guidance revision	Aqueous Reporting Limit (RL) Goals (ng/L)	CAS Number
Perfluorobutanate (PFBA)	under 6	375-22-4
Perfluoropentanoate (PFPeA)		2706-90-3
Perfluorohexanoate (PFHxA)	under 4	307-24-4
Perfluoroheptanoate (PFHpA)		375-85-9
Perfluorooctanoate (PFOA)	under 4	335-67-1
Perfluorononanoate (PFNA)		375-95-1
Perfluorodecanoate (PFDA)		335-76-2
Perfluoroundecanoate (PFUnA)		2058-94-8
Perfluorododecanoate (PFDoA)		307-55-1
Perfluorotridecanoic Acid (PFTrDA)		72629-94-8
Perfluorotetradecanoic acid (PFTeDA)		376-06-7
Perfluorobutanesulfonate (PFBS)	under 4	375-73-5
Perfluoropentanesulfonate (PFPeS)		2706-91-4
Perfluorohexanesulfonate (PFHxS)	under 4	355-46-4
Perfluoroheptanesulfonate (PFHpS)		375-92-8
Perfluorooctanesulfonate (PFOS)	under 4	1763-23-1
Perfluorononanesulfonate (PFNS)		474511-07-4
Perfluorodecanesulfonate (PFDS)		335-77-3
Perfluorododecanesulfonate (PFDoS)		79780-39-5
4:2 Fluorotelomer sulfonic acid (4:2 FTS)		757124-72-4
6:2 Fluorotelomer sulfonic acid (6:2 FTS)		27619-97-2
8:2 Fluorotelomer sulfonic acid (8:2 FTS)		39108-34-4
N-Methylperfluorooctanesulfonamidoacetic acid (N-MeFOSAA)		2355-31-9
N-Methylperfluorooctanesulfonamidoacetic acid (N-EtFOSAA)		2991-50-6
Perfluorooctane Sulfonamide (PFOSA)		754-91-6
N-Methyl perfluorooctane sulfonamide (N-MeFOSA)		31506-32-8
N-Ethyl perfluorooctane sulfonamide (N-EtFOSA)		4151-50-2
N-Methyl perfluorooctane sulfonamidoethanol (N-MeFOSE)		24448-09-7
N-Ethyl perfluorooctane sulfonamidoethanol (N-EtFOSE)		1691-99-2
Hexafluoropropylene oxide dimer acid (HFPO-DA)		13252-13-6
3H-Perfluoro-3-[(3-methoxy-propoxy) propanoic acid] (ADONA)		919005-14-4
9-Chlorohexadecafluoro-3-oxane-1-sulfonic acid (9Cl-PF3ONS)		756426-58-1
11-chloroeicosafluoro-3-oxaundecane-1-sulfonic acid (11CL-PF3OUdS)		763051-92-9

J. PRETREATMENT

1. All Industrial Users

a.) Does the Company accomplish in-line and/or end-of-pipe treatment of its waste? _____

b.) If "YES", please list the parameter treated, the treatment processes, their objectives, and solid waste disposal method:

Parameter Treated	Process	Objective	Solid Waste Disposal

c.) Details of pretreatment system currently in place: _____

_____

_____

_____

d.) If "NO", please indicate which method(s) your company will consider for meeting Brainerd WWTF POTW limitations and/or EPA Pretreatment Standards.

___ Already in Compliance.
___ Addition of Pretreatment Processes (Describe below).
___ Modification of Processes (Describe below).
___ Substitution of Alternative Chemicals (Describe below).
___ Elimination of Certain Processes (Describe below).
___ Other (Describe below).

_____

_____

_____

Federal Categorical Pretreatment Industries Only

a.) Categorical Process Wastewater Flow

EPA Category	Average (GPD)	Maximum (GPD)	Percent Total

b.) If your Company cannot meet the EPA Pretreatment Standards on a consistent basis, please complete the following table for additional pretreatment and/or operation and maintenance (O&M):

Major Pretreatment Component And/Or Additional O&M	Commencement Date	Completion Date	Operating Date

K. DESCRIPTION OF INDUSTRIAL WASTE GENERATING PROCESS

1. Please attach a process diagram of your operation(s) including the following information:
   a.) Manufacturing steps.
   b.) Stages where water and/or chemicals are added or discharged to the sewer.
   c.) Source of water supply.
   d.) Pretreatment system location, if required.
   e.) Continuous flow and/or batch discharge stages.
   f.) Location of meters, sampling, and monitoring points; and
   g.) Number and location of sanitary and/or combined sewer connections.

L. CERTIFICATION OF INFORMATION

I hereby certify that the information supplied in this application is complete and correct to the best of my knowledge.

*Name (PRINT): _____

Title: _____

Signature: _____

Telephone: _____

Date: _____

*For Federal Categorical Pretreatment Industries, the signatory must be an authorized representative. An authorized representative may be:

1.) a principal executive officer of at least the level of vice president if the Permittee is a corporation.

2.) a general partner or proprietor, if the Permittee is a partnership or sole proprietorship, respectively; or

3.) a duly authorized representative of the individual designated in (1) or (2) above if such representative is responsible for overall operation of the facility.

Send competed form (including laboratory results) and an application fee of $100 to:

Brainerd Public Utilities Wastewater Treatment Facility
ATTN: Wastewater Manager
8027 Highland Scenic Road
Baxter, MN 56425

PERMIT FEE RATE:

Permit duration is a minimum of three (3) or five (5) years.

Discharge less than 1 million gallons per year - $200
Discharge between 1 and 10 million gallons per year - $300
Discharge greater than 10 million gallons per year - $400