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|  | | |  | | --- | | UNION SANITARY DISTRICT  5072 BENSON ROAD  UNION CITY, CA 94587  (510) 477-7500 | | | | **WASTEWATER DISCHARGE PERMIT**  **PART B — BUSINESS DESCRIPTION** | | | | | | | | | | |
|  | | | | Permit No.: | | | |  | | | | | | | |
| Purpose — The Business Description is primarily used to determine the substances which may enter into the wastewater discharge from the Business Activity. The production quantities are necessary for State and Federal Reports. | | | | | | | | | | | | | | | |
| **B1.** | Business Activity — **(Complete a separate Part B for each major business activity occurring on the premises.)** | | | | | | | | | | | | | | |
|  | ACTIVITY: |  | | | | | | | | | SIC: |  |  |  |  |
|  | (a) Product: | | | | | |  | | | | | | | | |
|  | **TYPE OF PRODUCTS** | | **QUANTITIES** | | | | | | | | | | | | |
|  | **(Brand Name)** | | PAST CALENDAR YEAR | | | | | | ESTIMATED THIS CALENDAR YEAR | | | | | | |
|  |  | | Amount | | | Units | | | Amount | | | Units | | | |
|  |  | | Avg. | Max. | |  | | | Avg. | Max. | |  | | | |
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|  | (b) Description — Describe the wastewater generating operations. Indicate variations in production and operations during the year. **(Use additional sheets as necessary.)** |
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|  | (c) Substances Proposed to be Discharged — Give common and technical names of any materials or product proposed to be discharged to the sewer. Briefly describe the physical and chemical properties of each substance and product. | |
|  | NAME | DESCRIPTION |
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| **B2.** | Discharge Period: | | | | | | | **B3.** | Variation of Operation: | |
|  | (a) Discharge occurs daily from | | |  | to | |  |  | Indicate whether the business activity is: | |
|  | (b) Circle the days of the week  that the discharge occurs: | | | **S M T W T F S** | | | |  | Continuous throughout the year, or Seasonal - Circle the months of the year during which discharge occurs: **J F M A M J J A S O N D** | |
|  | Comments: |  | | | | | | | | |
|  |  | | | | | | | | | |
|  | **EPA Hazardous Waste Generator No.:** | | | | |  | | | | |
| **B4.** | Other Liquid Wastes — List the type and volume of liquid waste removed from the premises by means other than community sewers and disposal site. | | | | | | | | | |
| **DESCRIPTION** | | | **VOLUME (gal/mo.)** | | | **REMOVED BY (name & address)** | | | | **DISPOSAL SITE** |
|  | | |  | | |  | | | |  |
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