

SILICON VALLEY CLEAN WATER

JOINT POWERS AUTHORITY ~ A PUBLIC ENTITY



1400 RADIO ROAD
REDWOOD CITY, CALIFORNIA 94065
650.591.7121 | FAX: 650.591.7122
WWW.SVCW.ORG

CITY OF SAN CARLOS | CITY OF REDWOOD CITY | CITY OF BELMONT | WEST BAY SANITARY DISTRICT

IMPORTANT NOTICE TO DISCHARGERS

You have contacted Silicon Valley Clean Water (SVCW) regarding the discharge of liquid waste into the sanitary sewers. **Be advised that it is illegal to discharge hazardous waste into the sanitary sewers. It is the responsibility of your company to determine whether the liquid waste is classified as a hazardous waste; SVCW does not make this determination.** To help with this evaluation you should contact your facility's Environmental Health and Safety staff, a private consultant, or San Mateo County Environmental Health at (650) 363-4305.

Once the waste is determined to be non-hazardous, SVCW will evaluate the waste for acceptance into the sanitary sewers. Complete the attached form and fax to SVCW. The review process typically takes 1-3 days and the results will be returned to you by fax.

You should be aware that many non-hazardous wastes may impact the SVCW treatment processes. Our treatment facility was designed to treat a limited range of pollutants found in residential wastewater. We encourage you to pursue any available reuse or recycle options before considering discharge to the sanitary sewers.

SVCW NON-ROUTINE DISCHARGE APPLICATION

File # 70-60.01

Person Requesting:

Phone No.

Company:

Fax No.:

Affected Business:

Assessors Parcel No.:

Address:

City:

Zip:

Waste Description:

Constituents in Wastewater:

Concentration:

Units:

Volume to Discharge (gal):

Date of Discharge:

Preferred Time of Discharge:

Preferred Discharge Method:

Exact location, description and address of sanitary sewer discharge point:

Comments:

Waste Certification: I certify that the information above is true and complete to the best of my knowledge. I certify that the proposed discharge is not a hazardous waste. I understand that it is illegal to discharge hazardous waste to the sanitary sewers.

Signed: _____ Title: _____ Date: _____

Submit Application to:

Silicon Valley Clean Water

Environmental Services Division Phone: (650) 591-7121

1400 Radio Road

E-Mail GoGreen@svcw.org

Redwood City, CA 94065

PAGE 1 OF 2 (Page 1 to be completed by Discharger; page 2 to be completed by SVCW)

Received at SVCW: Date: _____ Time: _____ By: _____

SVCW NON-ROUTINE DISCHARGE APPLICATION

File # 70-60.01

Expected Impact of Discharge:

Collection System:

SVCW Pump Station:

SVCW Plant Processes:

SVCW Effluent Quality:

SVCW Sludge Quality:

Air Quality & Odors:

Work Health & Safety:

Additional Discussion:

SVCW Authorization: Discharge Approved Not Approved

Signature _____ Date: _____

Allowable Flow Rate: _____ gallons/day _____ gallons/minute

Total Discharge Allowed: _____ gallons

Time of Discharge: Time/Date Start: _____ Time/Date Stop: _____

Other Conditions:

This authorization applies only to the material described on Page 1. The discharge of hazardous waste is not allowed. The discharge must be in compliance with the SVCW Regulations and any applicable provisions of Federal, State, or local regulations.

Sanitary Sewer District/City Authorization:

Date Application Received:	DISTRICT USE:
Local Authorization Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	PERMIT #:
Discharge Approved: <input type="checkbox"/>	PERMIT FEE: \$
Discharge NOT Approved: <input type="checkbox"/>	SAMPLING & MONITORING: \$
By: _____ Date: _____	TOTAL FEES: \$
Title:	INVOICE #:
District/City:	DATE FEES PAID:

*** FEES MUST BE PAID PRIOR TO DISCHARGE ***

Additional Discussion/Conditions: