



# City of St. Joseph, MO, Water Protection Division Industrial Wastewater Discharge Permit Application

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Notice to Signing Official: In accordance with Title 40 of the Code of Federal Regulations, Part 403, Section 403.14, information and data provided in this permit application, which identifies the nature and frequency of discharge, shall be made available to the public, upon request, without restriction. Requests for confidential treatment of other information shall be governed by procedures specified in 40 CFR Part 2.

## Section 1. General Information

1.1. Company Name

1.2. Facility Physical Address

1.3. Facility City, State, & Zip

1.4. Company Mailing Address (if different than above)

1.5. Company Mailing City & State

### Designated Authorized Representative(s) of the Business (attach similar information for each authorized representative)

1.6. Name & Title

1.7. Telephone #

1.8. Email Address

### Designated Facility Contact (must be local)

1.9. Name & Title

1.10. Telephone #

1.11. Email Address

1.12. Year Facility was established at present location:

1.13. Year Company began operating facility:

1.14. Check one of the following.

Existing Industrial User

Proposed Industrial User

Anticipated Date of First Discharge: \_\_\_\_\_

1.15. Is this application submittal for a permit renewal?

Yes

No

1.16. Is this application submittal for a permit modification?

Yes

No



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**Section 2. Business Activity**

2.1. If your facility employs (or will be employing) processes in any of the following industrial categories or business activities listed below (regardless of whether or not they generate wastewater, sludge, or other wastes), place a check beside the category or business activity. Please check all that apply. If your facility receives wastewater from another facility that employs processes in any of the activities listed below, place a check beside the applicable activity. Note that facilities with processes listed below may be covered by Federal Pretreatment Standards. These facilities are known as "Categorical Industrial Users." If your facility's processes are not properly described in any of the categories below, please check "Other" and provide a brief description.

<b><u>2.1. Industrial Category or Business Activity</u></b>	<b>Federal Regulation</b>	<b>Applicable</b>
Aluminum Forming	40 CFR Part 467	<input type="checkbox"/>
Asbestos Manufacturing	40 CFR Part 427	<input type="checkbox"/>
Battery Manufacturing	40 CFR Part 461	<input type="checkbox"/>
Builders Paper and Board Mills	40 CFR Part 431	<input type="checkbox"/>
Canned and Preserved Fruits and Vegetable Processing	40 CFR Part 407	<input type="checkbox"/>
Canned and Preserved Seafood Processing	40 CFR Part 408	<input type="checkbox"/>
Carbon Black Manufacturing	40 CFR Part 458	<input type="checkbox"/>
Cement Manufacturing	40 CFR Part 411	<input type="checkbox"/>
Centralized Waste Treatment	40 CFR Part 437	<input type="checkbox"/>
Coal Mining	40 CFR Part 434	<input type="checkbox"/>
Coil Coating	40 CFR Part 465	<input type="checkbox"/>
Copper Forming	40 CFR Part 468	<input type="checkbox"/>
Dairy Products Processing	40 CFR Part 405	<input type="checkbox"/>
Electrical and Electronic Components	40 CFR Part 469	<input type="checkbox"/>
Electroplating	40 CFR Part 413	<input type="checkbox"/>
Equipment / Vehicle Repair	Not Applicable	<input type="checkbox"/>
Explosives Manufacturing	40 CFR Part 457	<input type="checkbox"/>
Feedlots	40 CFR Part 412	<input type="checkbox"/>
Ferroalloy Manufacturing	40 CFR Part 424	<input type="checkbox"/>
Fertilizer Manufacturing	40 CFR Part 418	<input type="checkbox"/>
Food / Beverage Products	Not Applicable	<input type="checkbox"/>
Glass Manufacturing	40 CFR Part 426	<input type="checkbox"/>
Grain Mills	40 CFR Part 406	<input type="checkbox"/>
Gum and Wood Chemicals Manufacturing	40 CFR Part 454	<input type="checkbox"/>
Hospital / Medical Care	40 CFR Part 460	<input type="checkbox"/>
Ink Formulating	40 CFR Part 447	<input type="checkbox"/>
Inorganic Chemicals Manufacturing	40 CFR Part 415	<input type="checkbox"/>
Iron and Steel Manufacturing	40 CFR Part 420	<input type="checkbox"/>
Laboratory (medical)	Not Applicable	<input type="checkbox"/>
Laboratory (non-medical)	Not Applicable	<input type="checkbox"/>
Landfill	40 CFR Part 445	<input type="checkbox"/>



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**2.1. Industrial Category or Business Activity (continued)**

**Federal Regulation**

**Applicable**

Laundry	Not Applicable	<input type="checkbox"/>
Leather Tanning and Finishing	40 CFR Part 425	<input type="checkbox"/>
Meat Products	40 CFR Part 432	<input type="checkbox"/>
Metal Finishing	40 CFR Part 433	<input type="checkbox"/>
Metal Molding and Casting	40 CFR Part 464	<input type="checkbox"/>
Metal Products and Machinery	40 CFR Part 438	<input type="checkbox"/>
Mineral Mining and Processing	40 CFR Part 436	<input type="checkbox"/>
Miscellaneous Chemicals	Not Applicable	<input type="checkbox"/>
Nonferrous Metals Forming and Metal Powders	40 CFR Part 471	<input type="checkbox"/>
Nonferrous Metals Manufacturing	40 CFR Part 421	<input type="checkbox"/>
Oil and Gas Extraction	40 CFR Part 435	<input type="checkbox"/>
Ore Mining and Dressing	40 CFR Part 440	<input type="checkbox"/>
Organic Chemicals, Plastics, and Synthetic Fibers	40 CFR Part 414	<input type="checkbox"/>
Paint Formulating	40 CFR Part 446	<input type="checkbox"/>
Paving and Roofing Materials (tars and asphalt)	40 CFR Part 443	<input type="checkbox"/>
Pesticide Chemicals	40 CFR Part 455	<input type="checkbox"/>
Petroleum Refining	40 CFR Part 419	<input type="checkbox"/>
Pharmaceutical Manufacturing	40 CFR Part 439	<input type="checkbox"/>
Phosphate Manufacturing	40 CFR Part 422	<input type="checkbox"/>
Photographic Processing	40 CFR Part 459	<input type="checkbox"/>
Plastics Molding and Forming	40 CFR Part 463	<input type="checkbox"/>
Porcelain Enameling	40 CFR Part 466	<input type="checkbox"/>
Printing	Not Applicable	<input type="checkbox"/>
Pulp, Paper, and Paperboard Mills	40 CFR Part 430	<input type="checkbox"/>
Rubber Manufacturing	40 CFR Part 428	<input type="checkbox"/>
Steam Electric Power Generating	40 CFR Part 423	<input type="checkbox"/>
Sugar Processing	40 CFR Part 409	<input type="checkbox"/>
Textile Mills	40 CFR Part 410	<input type="checkbox"/>
Timber Products Processing	40 CFR Part 429	<input type="checkbox"/>
Transportation Equipment Cleaning	40 CFR Part 442	<input type="checkbox"/>
Warehousing / Distribution	Not Applicable	<input type="checkbox"/>
Other (describe briefly)	Not Applicable	<input type="checkbox"/>



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2.2. Please provide a description of all industrial processes and operations occurring at this facility, including those that generate wastewater. Attach additional sheets if necessary.

2.3. Indicate the applicable North American Industry Classification (NAICS) or Standard Industrial Classification (SIC) code(s) for all processes. If more than one applies, list all in descending order of importance.

a.	b.	c.	d.
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**Section 3. Facility Operational Characteristics**

3.1. Indicate the start and end times for each shift and the average number of employees per shift.

Shift	Start	End	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1									
2									
3									

3.2. Indicate date(s) and reason(s) for any scheduled shutdowns (Holiday, Mainenance, Turnarounds, etc...)

Date(s)	Reason(s)

3.3. Are there any peak periods associated with production?       Yes       No

3.3.1. If "Yes" indicate when: \_\_\_\_\_

3.4. Please indicate if major production processes/operations are:       Batch       Continuous       Both

3.4.1. If "Both" indicate approximate percentages of:    Batch \_\_\_\_\_      Continuous \_\_\_\_\_

3.5. On a separate sheet, please list ALL chemicals used and/or stored on site. Include ALL hazardous, corrosive, explosive, flammable, or toxic materials. Indicate storage locations and approximate quantities of each chemical. If trade names are used, list the chemical constituents and indicate if Safety Data Sheets are available for these products.



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3.6. Please submit a detailed facility diagram(s). At a minimum, the diagram(s) must show the following:

- Orientation (compass rose, north arrow, etc.), adjacent streets, other proximity references, etc.
- Water lines, meters, etc.
- Sewer lines, manholes, meters, etc. Mark point(s) of discharge into the sewer system and proposed sampling locations
- Floor drains, sinks, lavatories, etc.
- Industrial equipment/processes. Number each unit process discharging wastewater to the POTW.

*Note - Much of the above information is generally included on a utility plan/blueprint.*

**Section 4. Water Usage**

4.1. Check boxes for water supply source(s). Include account numbers where applicable. Do not include information on irrigation meters or fire protection meters. Attach additional sheets if necessary. The location of each water meter, well or other source must be indicated by a number or letter on the facility diagram required in Section 3.6.

- Municipal Water Supply    Gallons/month: \_\_\_\_\_    Account #: \_\_\_\_\_
- Private Well(s)    Gallons/month: \_\_\_\_\_    # of Wells: \_\_\_\_\_
- Surface Water    Gallons/month: \_\_\_\_\_    Waterbody Name: \_\_\_\_\_
- Other    Gallons/month: \_\_\_\_\_    Describe Source: \_\_\_\_\_

4.2. List average water usages at this facility. New facilities may estimate usages.

Usage Type	Average Water Usage (gpd)	Indicate Estimated or Measured
a. Contact Cooling Water		
b. Non-Contact Cooling Water		
c. Boiler Feed		
d. Process/Operation		
e. Sanitary		
f. Air Pollution Control		
g. Contained in Product		
h. Plant and equipment wash down		
i. Irrigation (not metered separately)		
j. Other (specify)		
<b>TOTAL of a. through j.</b>		

4.3. Describe any water treatment or conditioning processes applied to incoming water only. Attach additional sheets if necessary.



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4.4. Is any water recycled or recirculated?  Yes  No

If "Yes" please describe the recycling or recirculation process. Use additional sheets if necessary.

**Section 5. Wastewater Discharge**

5.1. Does (or will) this facility discharge any wastewater other than sanitary wastewater (lavatories, lavatory floor drains, sinks, showers, water coolers, etc.) to the POTW?

Yes (complete the remainder of Section 5)  No (skip to Section 6)

5.2. Check one of the following. Process wastewater discharges from this facility are:

Batch  Continuous  Both Batch & Continuous

5.2.1. If batch wastewater discharges occur, please provide the following information:

- a. Number of batches per day/week/month: \_\_\_\_\_
- b. Average volume: \_\_\_\_\_ gallons per batch
- c. Flow rate: \_\_\_\_\_ gallons per minute during discharge
- d. Days of discharge:  Mon  Tues  Wed  Thu  Fri  Sat  Sun
- e. Time(s) of discharge: \_\_\_\_\_

5.2.2. If continuous wastewater discharges occur, please provide the following information:

a. Hours of discharge (ex: 0700 - 1500, 24hrs, etc.)

Mon	Tues	Wed	Thu	Fri	Sat	Sun

- b. Peak instantaneous flow rate (gpm): \_\_\_\_\_
- c. Maximum daily flow rate (gpd): \_\_\_\_\_
- d. Annual daily average flow rate (gpd): \_\_\_\_\_



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5.3. Please submit a process flow diagram for each major activity in which wastewater is (or will be) generated. These diagrams must depict the flow of materials, products, water, and wastewater from the start of each activity to its completion, showing all unit processes. Indicate which processes use water and which generate wastestreams. Number each unit process having wastewater discharges to the sewer system. Use these numbers when showing unit processes in the facility diagram in Section 3.6.

5.4. Do you have (or plan to have) the following equipment at this facility's wastewater sampling point?

	<b>Currently</b>				<b>Planned</b>		
Sampling Equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Sampling Equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Flow Meter	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Flow Meter	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
pH Meter	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	pH Meter	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

5.4.1. If you answered "Yes" to any of the above, please indicate the current or planned location of the equipment on the facility diagram in Section 3.6. and describe the equipment below including manufacturer and model.

5.5. Are any process changes or expansions planned during the next five years that will change wastewater volume, flow, or strength characteristics? (consider all processes: production, recovery, wastewater treatment, etc.)

Yes       No

5.5.1. If "Yes" describe these changes and their effect on present wastewater volume, flow, and strength characteristics. Use additional sheets if necessary.

5.6. Does this facility currently reuse or plan to reuse materials and/or use or plan to use a water reclamation system?

Yes       No

5.6.1. If "Yes", on a separate sheet, please describe the recovery process(es), substance(s) recovered, percent recovered, and the concentration in the spent solution(s). Use the reference number(s) from the process flow diagram that corresponds to the process(es) being described.



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5.7. This section applies to **NON-CATEGORICAL USERS** only. If you have any question of whether this facility is categorical or not, please contact an Industrial Pretreatment Coordinator at Water Protection. List average and maximum discharge flows and type of discharge for each plant process. Use the numbers for unit processes from the facility diagram in Section 3.6. Attach additional sheets if necessary.

#	Process Description	Average Flow (gpd)	Max Flow (gpd)	Discharge Type (batch/continuous/both)

Sections 5.8. through 5.10. are for **CATEGORICAL USERS** only. Non-categorical users may skip to Section 6. If you have any question of whether this facility is categorical or not, please contact an Industrial Pretreatment Coordinator at Water Protection. Attach additional sheets if necessary. Refer to the following definitions for Section 5.8.

**Regulated Process** - An industrial process regulated by a national categorical pretreatment standard.

**Unregulated Process** - An industrial process that produces a wastestream that is not regulated by a federal categorical pretreatment standard.

**Dilution Wastestream** - An unregulated wastestream containing none of the regulated pollutant or only trace amounts of it (i.e. boiler blowdown, sanitary wastewater, noncontact cooling water, and wastestreams listed in 40 CFR 403, Appendix D)

5.8. List average and maximum discharge flows and type of discharge for each plant process. Use the numbers for unit processes from the facility diagram in Section 3.6. Attach additional sheets if necessary.

#	Regulated Process	Average Flow (gpd)	Max Flow (gpd)	Discharge Type (batch/continuous/both)

#	Unregulated Process	Average Flow (gpd)	Max Flow (gpd)	Discharge Type (batch/continuous/both)

#	Dilution Wastestreams	Average Flow (gpd)	Max Flow (gpd)	Discharge Type (batch/continuous/both)



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**5.9. Categorical Users Only:** Please provide the following information if you are subject to Total Toxic Organic (TTO) requirements (i.e. electroplating, metal finishing, electrical components, copper or aluminum forming, coil coating).

5.9.1. Does (or will) this facility use any of the organics listed under the TTO standards of the applicable categorical pretreatment standards published in the Code of Federal Regulations?

Yes      No      N/A

5.9.2. Has a Toxic Organics Management Plan (TOMP) been developed? If "Yes" please ensure that a copy of the plan is on file with Water Protection.

Yes      No

**5.10. Categorical Users Only:** For new applicants (i.e. those without an existing Wastewater Discharge Permit), include a Baseline Monitoring Report (BMR) with this application. Refer to 40 CFR 403.12 for BMR requirements.

### Section 6. Characteristics of Wastewater Discharge

6.1. Please indicate, by selecting from the checkboxes below, for each listed chemical whether you know it will be present (Known Present), whether you suspect that it might be present (Maybe Present), or if you know that it will not be present (Known Absent) **in your manufacturing or service activity or generated as a by-product**. Some compounds are known by other names. Compounds with an asterisk (\*) indicate a possible synonym listing. See "Priority Pollutant Synonym List" in Appendix A.

Item Number	Chemical Compound	Known Present	Maybe Present	Known Absent	Item Number	Chemical Compound	Known Present	Maybe Present	Known Absent
1	Asbestos (fibrous)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12	Selenium (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Cyanide (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13	Silver (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Antimony (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14	Thallium (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Arsenic (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15	Zinc (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Beryllium (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16	Acenaphthene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Cadmium (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17	Acenaphthylene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Chromium (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18	Acrolein	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Copper (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19	Acrylonitrile	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Lead (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20	Aldrin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Mercury (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21	Anthracene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Nickel (total)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22	Benzene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Item Number	Chemical Compound	Known Present	Maybe Present	Known Absent	Item Number	Chemical Compound	Known Present	Maybe Present	Known Absent
23	Benzidine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48	2-chloroethylvinyl ether	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	Benzo (a) anthracene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49	Chloroform*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	Benzo (a) pyrene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50	Chloromethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	Benzo (b) fluoranthene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	51	2-chloronaphthalene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	Benzo (g,h,i) perylene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	52	2-chlorophenol*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	Benzo (k) fluoranthene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	53	4-chlorophenylphenyl ether	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	a-BHC (alpha)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54	Chrysene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	b-BHC (beta)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55	4,4 - DDD*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	d-BHC (delta)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	56	4,4 - DDE*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	g-BHC (gamma)*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	57	4,4 - DDT*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	Bis (2-chloroethyl) ether*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	58	Dibenzo (a,h) anthracene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34	Bis (2-chloroethoxy) methane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	59	Dibromochloromethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35	Bis (2-chloroisopropyl) ether*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	60	1,2-dichlorobenzene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36	Bis (chloromethyl) ether*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	61	1,3-dichlorobenzene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37	Bis (2-ethylhexyl) phthalate*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	62	1,4-dichlorobenzene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38	Bromodichloromethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	63	3,3-dichlorobenzidine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	Bromoform*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	64	Dichlorodifluoromethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40	Bromomethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	65	1,1-dichloroethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41	4-bromophenylphenyl ether	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	66	1,2-dichloroethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42	Butylbenzyl phthalate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	67	1,1-dichloroethene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	Carbon tetrachloride*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	68	Trans-1,2-dichloroethene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	Chlordane	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	69	2,4-dichlorophenol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45	4-chloro-3-methylphenol*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70	1,2-dichloropropane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46	Chlorobenzene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	71	(cis&trans) 1,3-dichloropropene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	Chloroethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	72	Dieldrin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Item Number	Chemical Compound	Known Present	Maybe Present	Known Absent	Item Number	Chemical Compound	Known Present	Maybe Present	Known Absent
73	Diethyl phthalate*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	98	Isophorone*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74	2,4-dimethylphenol*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	99	Methylene chloride*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75	Dimethyl phthalate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100	Naphthalene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
76	Di-n-butyl phthalate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	101	Nitrobenzene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
77	Di-n-octyl phthalate*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	102	2-nitrophenol*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
78	4,6-dinitro-2-methylphenol*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	103	4-nitrophenol*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
79	2,4-dinitrophenol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	104	N-nitrosodimethylamine*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80	2,4-dinitrotoluene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	105	N-nitroso-di-n-propylamine*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
81	2,6-dinitrotoluene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	106	N-nitrosodiphenylamine*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
82	1,2-diphenylhydrazine*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	107	PCB-1016*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
83	Endosulfan 1*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	108	PCB-1221*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
84	Endosulfan 11*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	109	PCB-1232*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
85	Endosulfan sulfate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	110	PCB-1242*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
86	Endrin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	111	PCB-1248*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
87	Endrin aldehyde	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	112	PCB-1254*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88	Ethylbenzene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	113	PCB-1260*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
89	Fluoranthene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	114	Pentachlorophenol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90	Fluorene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	115	Phenanthrene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91	Heptachlor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	116	Phenol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92	Heptachlor epoxide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	117	Pyrene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
93	Hexachlorobenzene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	118	2,3,7,8-tetrachlorodibenzo-p-dioxin*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
94	Hexachlorobutadiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	119	1,1,2,2-tetrachloroethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
95	Hexachlorocyclopentadiene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	120	Tetrachloroethene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
96	Hexachloroethane*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	121	Toluene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
97	Indeno (1,2,3-cd) pyrene*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	122	Toxaphene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





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6.5. Please complete the following if a Third Party Lab or Contractor is used for any wastewater sampling or analyses.

Company Name

Address

City, State, & Zip

Telephone #

Email Address

Parameter(s) collected for and/or analyzed

6.6. Please indicate the proposed method(s) to collect wastewater discharge sample(s) and describe where sample(s) will be collected (i.e. end of pipe, dedicated sample point, sump, etc.) The proposed sample collection point must be indicated by number on the facility diagram required in Section 3.6. Attach additional sheets if necessary.

**Sample Collection Point**

**Sample Method**


<input type="checkbox"/> Composite	<input type="checkbox"/> Grab
<input type="checkbox"/> Composite	<input type="checkbox"/> Grab
<input type="checkbox"/> Composite	<input type="checkbox"/> Grab

**Section 7. Wastewater Treatment**

7.1. Is any form of wastewater treatment used prior to discharge?     Yes     No

*If you answered "Yes" to 7.1. please complete the remainder of this section. If you answered "No" to 7.1. please skip to Section 8.*

7.2. Please check the boxes for all types of wastewater treatment used to treat any wastestreams prior to discharge.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Air Flotation        | <input type="checkbox"/> Ozonation              | <input type="checkbox"/> Flow equalization     |
| <input type="checkbox"/> Centrifuge           | <input type="checkbox"/> Sedimentation          | <input type="checkbox"/> Grease Trap           |
| <input type="checkbox"/> Chlorination         | <input type="checkbox"/> Spill Protection       | <input type="checkbox"/> Neutralization        |
| <input type="checkbox"/> Filtration           | <input type="checkbox"/> Biological Treatment   | <input type="checkbox"/> Reverse Osmosis       |
| <input type="checkbox"/> Oil/Water Separation | <input type="checkbox"/> Chemical Precipitation | <input type="checkbox"/> Solvent Precipitation |
| <input type="checkbox"/> Ion Exchange         | <input type="checkbox"/> Cyclone Separator      | <input type="checkbox"/> Other                 |



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7.2. continued

If you checked "Other" for 7.2., please specify.

7.3. On a separate sheet, briefly describe the operation of the wastewater treatment system(s). Include chemicals used and what they are used for.

7.4. Please check the box below describing in what mode the wastewater treatment system operates.

Batch     
  Continuous     
  Both Batch & Continuous

7.4.1. If you selected "Batch" or "Both Batch & Continuous", please specify the frequency, duration, and volume of each discharge.

7.5. Please submit a detailed process flow diagram of the wastewater treatment system. Include process equipment, by-product disposal method, waste/by-product volumes, design and operating conditions, etc. Mark point(s) of discharge into the sewer system.

7.6. Do you have a wastewater treatment operator?

Yes     
  No

7.6.1. If "yes" please complete the following for each operator. For Full vs. Part time indicate whether the employee is committed full or part time to operation of the wastewater treatment system and, if part time, how many hours per week are committed to wastewater treatment. Attach additional sheets if necessary.

Name		Title	
Missouri DNR Wastewater Certification # if applicable		Phone Number	
<input type="checkbox"/> Full Time	Specify Hours		
<input type="checkbox"/> Part Time	Specify Hours		

7.7. Do you have a standard operation and maintenance (O&M) manual for the correct operation of the wastewater treatment equipment?

Yes     
  No

7.7.1. If "Yes", please submit a copy with this application.



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**Section 8. Spill Prevention**

8.1. Does this facility have floor drains in the manufacturing, chemical storage, or pretreatment area(s)?

Yes  No

8.1.1. If "Yes", to where do these floor drains discharge?

8.2. Does this facility have an Accidental Discharge & Slug Control Plan (ADSCP) designed to prevent or minimize the potential of spills or slug discharges from entering the sewer system?

Yes  No

8.2.1. If "Yes", please submit a copy with this application.

**Section 9. Stormwater**

9.1. Is this facility located in the service are of the Combined Sewer System or the Separate Sanitary Sewer System?

Combined Sewer  Separate Sanitary Sewer

9.2. Does this facility currently have a National Pollutant Discharge Elimination System (NPDES) Stormwater Permit issued by the Missouri Department of Natural Resources?

Yes  No

9.3. Does this facility currently have a Stormwater Pollution Prevention Plan (SWPPP)?

Yes  No

9.3.1. If "Yes" please submit a copy of the SWPPP with this application.

9.3.2. If "No", are any structural or non-structural Stormwater Best Management Practices (BMP) implemented at this facility?

Yes  No

9.3.2.1. If "Yes" please describe these BMPs.



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**Section 10. Non-Discharged Waste**

10.1. Are any liquid or solid wastes generated that are NOT discharged to the sewer?  Yes  No

*If you answered "Yes" to 10.1. please complete the remainder of this section. If you answered "No" to 10.1. please skip to Section 11.*

10.2. For each type of waste generated, indicate the following in the table below: quantity generated (specify gal/yr, lb/yr, etc.), disposal method (hauled off-site, recycled/reused, incinerated, etc.), name and address of hauling firm (if applicable), applicable permit number, and name and address of final disposal site. Attach additional sheets if necessary.

Type of Waste	Quantity	Disposal Method	Hauling Firm	Permit #	Final Disposal Site
Acids, Alkalies					
Dyes, Inks					
Heavy Metals					
Inorganic Compounds					
Oil & Grease					
Organic Compounds (Solvents)					
Paints					
Pesticides					
Petroleum Wastes					
Sludge					
Other (Specify Below)					
Other (Specify Below)					



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**Section 11. Authorized Representative Statement**

*I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, 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.*

Name	Title
Signature	Date



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**Appendix A** (page 1 of 2)

Item	Chemical Compound	Synonym	Item	Chemical Compound	Synonym
1	Asbestos	Actinolite, Amosite, Antophyllite, Chrysotile, Crocidolite, Tremolite	26	Benzo(b)fluoranthene	2,3-Benzfluoranthene 2,3-Benzofluoranthene 3,4-Benz(e)acephenathrylene 3,4-Benzfluoranthene 3,4-Benzofluoranthene Benz(e)fluoranthene
2	Cyanide	Hydrogen Cyanide, Potassium Cyanide, Sodium Cyanide	27	Benzo(g,h,i)perylene	1,12-Benzoperylene
3	Antimony	Stibium	28	Benzo(k)fluoranthene	11,12-Benzofluoranthene
4	Arsenic	Arsenia	32	g-BHC (gamma)	Lindane
5	Beryllium	Glucinium	33	bis(2-chlorethoxl) methane	2,2'-Dichlorethyl ether
9	Lead	Plumbum	35	bis(2-chloroisopropyl) ether	2,2'-Dichloroisopropyl ether
10	Mercury	Hydrargyrum, Liquid Silver, Quick Silver	36	bis(chloromethyl)ether	(sym)Dichloromethyl ether
13	Silver	Argentum	37	bis(2-ethylhexyl) phthalate	2,2'-Diethylhexyl phthalate
16	Acenaphthene	1,2-Dihydroacenoaphthylene; Periethylenenaphthalene; 1,8-Ethylenenaphthalene	38	Bromodichloromethane	Dichlorobromomethane
18	Acrolein	2-Propenal; Propenal; Allyl aldehyde, Acraldehyde; Acrylaldehyde, Acrylic aldehyde, Aqualin	39	Bromoform	Tribromomethane
19	Acrylonitrile	2-Propenenitrile; Propenenitrile, Vinyl cyanide, Cyanoethylene; Acritet; Fumigrain; Ventox; Acrylonitrile monomer	40	Bromomethane	Methyl bromide
20	Aldrin	1,2,3,4,10, 10-Hexachloro-1,4,4a,5,8,8a-Hexahydro-1,4:5,8-Dimethanonaphthalene; HHDN; Compound 118; Octalene	43	Carbon Tetrachloride	Tetrachloromethane
22	Benzene	Benzol; Cyclohexatriene, Phenyl hydride	45	4-chloro-3-methylphenol	Para-chloro-meta-cresol
23	Benzidine	4,4'-Bianiline; 4,4'-Biphenyldiamine; 1,1'-Biphenyl-4,4'-diamine; 4,4'-Diaminobiphenyl; p-Diaminodiphenyl	47	Chloromethane	Ethylchloride
24	Benzo(a)anthracene	1,2-Benzanthracene, 2,3-Benzphenenthrene	49	Chloroform	Trichloromethane
25	Benzo(a)pyrene	3,4-Benzopyrene	50	Chloromethane	Methyl chloride



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Item	Chemical Compound	Synonym	Item	Chemical Compound	Synonym
52	2-chlorophenol	Para-chlorophenol	98	Isophorone	3,5,5-Trimethyl-2-Cyclohexene-1-one
54	Chrysene	1,2-Benzphenanthrene	99	Methylene chloride	Dichloromethane
55	4,4'-DDD	Dichlorodiphenyl-dichloroethane p,p'-tde Tetrachlorodiphenylethane	102	2-nitrophenyl	Para-nitrophenyl
56	4,4'-DDE	Dichlorodiphenyl-dichloroethylene	103	4-nitrophenyl	Ortho-nitrophenyl
57	4,4'-DDT	Dichlorodiphenyl-trichloroethane	104	N-nitrosodimethylamine	Dimethylnitrosoamine
58	Dibenzo(a,h)anthracene	1,2,5,6-dibenzanthracene	105	N-nitrosodi-n-propylamine	n-Nitro-di-n-propylamine
59	Dibromochloromethane	Chlorodibromomethane	106	N-nitrosodipheynylamine	Diphenyl-nitrosoamine
60	1,2-dichlorobenzene	Ortho-dichlorobenzene	107	PCB-1018	Arochlor-1018
61	1,2-dichlorobenzene	Meta-dichlorobenzene	108	PCB-1221	Arochlor-1221
62	1,4-dichlorobenzene	Para-dichlorobenzene	109	PCB-1232	Arochlor-1232
64	Dichlorodifluoromethane	Difluorodichloromethane, Flurocarbon-12	110	PCB-1242	Arochlor-1242
65	1,1'dichloroethane	Ethylidene chloride	111	PCB-1248	Arochlor-1248
66	1,2-dichloroethane	Ethylene chloride, Ethylene dichloride	112	PCB-1254	Arochlor-1254
67	1,1-dichloroethane	1,1-Dichloroethylene	113	PCB-1260	Arochlor-1260
68	trans-1,2-dichloroethene	Acetylene dichloride	118	2,3,7,8-tetrachlorodibenzo-p-dioxin	TCDD
70	1,2-dichloropropane	Propylene dichloride	119	1,1,2,2-tetrachloroethene	Acetylene tetrachloride
71	(cis & trans) 1,3-dichloropropane	(cis & trans) 1,3 Dichloropropylene	120	Tetrachloroethene	Perchloroethylene, Tetrachloroethylene
73	Diethylphthalate	Ethyl phthalate	121	Toluene	Methylbenzene toluol
74	2,4-dimethylphenol	2,4-zylenol	124	1,1,1-trichloroethane	Methyl chloroform
77	di-n-octyl phthalate	Di(2-ethylhexyl)phthalate	125	1,1,2-trichloroethane	Vinyl trichloride
78	4,6-dinitro-2-methylphenol	4,6-Dinitro-octyl-cresol	126	Trichloroethane	Trichloroethylene
82	1,2-diphenylhydrazine	Hydrazobenzene	127	Trichlorofluoromethane	Fluorocarbon-11; Fluorotrchloromethane
83	Endosulfan I	a-Endosulfan-alpha	129	Vinyl chloride	Chloroethene; Chloroethylene
84	Endosulfan II	b-Endosulfan-beta			
90	Fluorene	(alpha)-Diphylene methane			
93	Hexachorbenzene	Perchlorobenzene			
95	Hexachlorocyclopentadiene	Perchlorocyclopentadiene			
96	Hexachloroethane	Perchloroethane			
97	indeno-(1,3,3-cd) pyrene	2,3-ortho-Phenylene pyrene			