

**SCHEDULE "H" - WASTEWATER DISCHARGE PERMIT APPLICATION FOR
GROUNDWATER REMEDIATION SITES**

This is an Application for a **Wastewater Discharge Permit** for Groundwater
Remediation Sites under the following bylaw:

City of Abbotsford Sewer Rates & Regulations Bylaw No. 1862-2009

Please enclose a cheque in the amount of \$1500, payable to the City of Abbotsford,
for payment for the Wastewater Discharge Permit Application fee.

General Instructions

- *Provide all required information and attachments.*
- *If you do not have an answer for the requested information, indicate so and explain why.*
- *Indicate "n/a" if a section does not apply to your Application.*
- *Use additional pages as required.*
- *Send the completed Application form, attachments and Application fee to the following address:*

Attn: Source Control Program
Abbotsford/Mission Water & Sewer Services
32315 South Fraser Way
Abbotsford, BC V2T 1W7

Telephone: (604) 853-5485
Facsimile: (604) 557-1457

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Permit Conditions

In consideration of the granting of this permit, the applicant agrees:

1. To accept and abide by the Terms and Conditions herein;
2. To accept and abide by the City of Abbotsford Sewer Rates and Regulations Bylaw No. 1862-2009;
3. To provide any additional information on the Wastewater Discharge as required by City staff;
4. To cooperate at all times with City staff in the inspection, sampling and study of the Wastewater facilities and Discharges;
5. To ensure that no other Wastes are discharged into the Sanitary Sewer other than the agreed upon Wastewater;
6. To operate only the Wastewater Discharge point(s) to the Sanitary Sewer as authorized under this permit.
7. To inspect any Pretreatment equipment on a regular basis to ensure that it remains in good working order and to notify City staff immediately of any malfunction of these works;
8. To provide a Monitoring Point on the Discharge pipe entering the Sanitary Sewer. The Monitoring Point must be provided in such a location that is easily accessible by City staff;
9. To immediately notify the City, as specified in Schedule "I" of this Bylaw, and to undertake appropriate remedial action in the event of an accidental Discharge to any Sewer;
10. Without limiting Section 2 of these conditions, to pay Sanitary Sewer use fees, as established in Schedule "D" of this Bylaw, to allow City staff to obtain Discharge volumes by recording meter readings from a City Water meter or a Sanitary Sewer meter; if a Sanitary Sewer meter is used to determine Sanitary Sewer use fees, to install the Sanitary Sewer meter in such a location that is easily accessible to City staff; and to provide City staff with confirmation of the Sanitary Sewer meter accuracy prior to discharging any Wastewater into the Sanitary Sewer;
11. To pay the City any applicable charges for treatment and trunk Sanitary Sewer, as established in the Development Cost Charges Imposition Bylaw, 2008, as amended or replaced from time to time and calculated by the Engineer in accordance with that bylaw;

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12. To pay the City any applicable charges for Biochemical Oxygen Demand (BOD) and total suspended solids (TSS) Waste as established in Schedules "D" and "G" in this Bylaw;
13. To apply for a revised Wastewater Discharge Permit if any changes in the processes, production, and methods of Wastewater treatment or operations creates a significant change in Wastewater volume or quality; and
14. to pay all costs related to this Wastewater Discharge Permit.

The Engineer may modify the conditions of this agreement, subject to providing notice and reasons to the applicant, and may suspend or revoke the Wastewater Discharge Permit at any time if the Engineer considers it necessary for public health or safety; the Permit holder has not complied with this Bylaw; or that any of the conditions of this Permit have been contravened.

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SECTION A: APPLICANT INFORMATION

<i>Company Name:</i>	
<i>Contact Name:</i>	
<i>Title:</i>	
<i>Email:</i>	
<i>Telephone:</i>	
<i>Facsimile:</i>	
<i>Emergency Telephone:</i>	

Site Address:

Company Name		
House No.	Street	
City	Province	Postal Code

Mailing Address:

Company Name		
House No.	Street	
City	Province	Postal Code

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SECTION C: SITE CONTAMINATION CHARACTERIZATION

Characterize the nature of the site contamination. Include supporting analytical data for the soil, groundwater and/or collected Storm Water with this Application. Provide an assessment of whether Hazardous Wastes are present in the soil, groundwater and/or Storm Water. If Hazardous Wastes are present, detail the provisions taken to comply with Column 3 of Schedule 1.2 (Standard for Discharges Directed to Municipal or Industrial Effluent Treatment Works) of the provincial Hazardous Waste Regulation.

Attach additional pages if necessary

SECTION D: OPERATING PERIOD

Specify the typical operating period for when process Wastewater will be discharged to the Sanitary Sewer:

HOURS/DAY	DAYS/WEEK	WEEKS/YEAR

Will the typical operating days for your operation be Monday through Friday?

- Yes No

If no, indicate the typical days of operation for your business:

- | | | | |
|---------------------------------|-----------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday |
| <input type="checkbox"/> Friday | <input type="checkbox"/> Saturday | <input type="checkbox"/> Sunday | |

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Specify the typical number of hours of process Wastewater discharged to the Sanitary Sewer during the following times:

08:00 to 16:00	16:00 to 24:00	0:00 to 08:00

Expected duration of the project: _____

SECTION E: FLOW INFORMATION

Total remediation or excavation site area:	<input type="checkbox"/> m ² <input type="checkbox"/> acres
Total Discharge volume over the requested term of the Permit:	<input type="checkbox"/> m ³ <input type="checkbox"/> L
Maximum daily Discharge volume:	<input type="checkbox"/> m ³ <input type="checkbox"/> L
Peak Flow Rate:	L/s
Maximum Discharge duration:	Hours/day
	Days/week
	Weeks/year

Describe the method for measuring the volume of Wastewater discharged to the Sanitary Sewer.

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Attach additional pages if necessary

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RESTRICTED WASTES	YES	NO	UNKNOWN	BEFORE PRETREATMENT (CONCENTRATION OR RANGE)	AFTER PRETREATMENT (CONCENTRATION OR RANGE)
Total Oil and Grease					
Oil and Grease (Hydrocarbons)					
Sulphate					
Sulphide					
Chlorine					
Chloride					
Sodium Chloride					
Total BETX					
• Benzene					
• Ethylbenzene					
• Toluene					
• Xylenes					
Tetrachloroethylene					
Tetrachloroethylene					
Polynuclear Aromatic Hydrocarbons (PAHs)					
Phenols					
Chlorinated Phenols					
Aluminum					
Arsenic					
Boron					
Cadmium					
Chromium					

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RESTRICTED WASTES	YES	NO	UNKNOWN	BEFORE PRETREATMENT (CONCENTRATION OR RANGE)	AFTER PRETREATMENT (CONCENTRATION OR RANGE)
Cobalt					
Copper					
Iron					
Lead					
Manganese					
Mercury					
Molybdenum					
Nickel					
Selenium					
Silver					
Zinc					

Indicate whether any of the following Wastes are contained in the Wastewater. Where the answer is yes, fill in the concentration levels before Pretreatment and after Pretreatment (if applicable). Include supporting analytical data.

OTHER SUBSTANCES	YES	NO	UNKNOWN	BEFORE PRETREATMENT (CONCENTRATION OR RANGE)	AFTER PRETREATMENT (CONCENTRATION OR RANGE)
Conductivity					
Chemical Oxygen Demand (COD)					
Total Polychlorinated Biphenyls (PCBs)					

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OTHER SUBSTANCES	YES	NO	UNKNOWN	BEFORE PRETREATMENT (CONCENTRATION OR RANGE)	AFTER PRETREATMENT (CONCENTRATION OR RANGE)
Carbon Tetrachloride					
Trichloroethylene					
Vinyl Chloride					

SECTION G: WASTEWATER TREATMENT

Specify the type of remediation planned for your site:

Pump and treat
 Open excavation
 Combination pump and treat/excavation
 Other: _____

On the following page, describe Wastewater Treatment Works that will be utilized to treat the Wastewater prior to Discharge to the Sanitary Sewer. Please include the following:

- Basic design criteria and sizing calculations for the treatment system components;
- The maximum design flow rate for the Treatment Works;
- Justification of the Works based on Wastewater quality data, results from other similar installations and/or scientific evidence from literature demonstrating performance;
- Maintenance procedures to be carried out to ensure integrity of the Works;
- Any provisions to bypass the Treatment Works;
- For carbon filters, identify procedures/monitoring that will be implemented to ensure carbon replacement prior to breakthrough;
- Method(s) of disposal of any treatment by-products; and
- A schematic flow diagram, identifying Wastewater sources, collection piping, Treatment Works, instrumentation, sampling point and the point of connection to the Sanitary Sewer.

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Attach additional pages if necessary

SECTION H: SPILL PREVENTION & CONTAINMENT

Summarize the provisions taken to prevent spills (e.g. from a hydrocarbon storage tank) or untreated groundwater from entering the Sanitary Sewer system.

Attach additional pages if necessary

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SECTION I: REQUESTED PERMIT TERM

Please indicate in the appropriate box below the length of time that you will require a Wastewater Discharge Permit. The maximum term for an excavation or groundwater remediation Permit is one year.

- Less than 7 days
- 7-30 days
- 31-90 days
- 91-180 days
- 181-270 days
- 271-365 days

SECTION J: DECLARATION

This Application form must be signed by a representative of the company listed as the applicant in Section A, who will be responsible for complying with all terms and conditions of the Wastewater Discharge Permit.

I DECLARE THAT THE INFORMATION GIVEN ON THIS APPLICATION IS CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE.	
_____ <i>Name (Please Print)</i>	_____ <i>Title</i>
_____ <i>Signature</i>	_____ <i>Date</i>

If you elect to appoint another company employee or consultant as the primary contact for this Application, please complete the following:

PRIMARY CONTACT INFORMATION		
_____ <i>Name (Please Print)</i>	_____ <i>Title</i>	
_____ <i>Company Name (if Consultant)</i>	_____ <i>Telephone</i>	_____ <i>Fax</i>