

Detailed Wastewater Discharge Application ARROW Utilities

When required by ARROW Utilities, a discharger to sewage works shall complete this form under ARROW Utilities Quality of Wastewater Bylaw, which addresses wastewater quality and sewer use within ARROW Utilities' member municipalities.

Instructions:

Return application to: Attention: Regulatory Services <u>discharge@arrowutilities.ca</u>

**If assistance is required, please contact via the above email or 780-416-6805.

Please note the following:

- Print clearly while completing the form.
- This application is not complete until all the required information is submitted and received by Regulatory Services. Indicate what material has been attached to ensure that ARROW Utilities is aware of all the information provided.
- A permit may take 7 business days or longer before it is issued. Submit an application at the earliest opportunity.
- When a permit is required under the ARROW Utilities Bylaw or the Sewer Use/Utility Bylaw of an ARROW Utilities member municipality, no water shall be discharged before a permit is issued.
- A submitted application does not guarantee a permit.

The information submitted in this form may be subject to verification by ARROW Utilities.



1: Name of Company

2: Site Information

Discharge Site Address: Town/City/County: Postal Code:

3: Owner of property (if different from Company listed above)

Company Name (if applicable): Telephone: Email:

4: General Site Operation Information

Number of staff: Number of shifts per day: Number of operating days per week:

5: Description of Product(s) or Service

Include North American Industry Classification System (NAICS)



<u>6: Description of the Process(es) used in the Manufacturing or Servicing</u>

Include:

- raw materials used
- products produced
- processes that generate the wastewater
- characteristics such as Batch (how many per time period), Continuous, or Both (explanation to be provided)
- Seasonal Production Cycles
- Specific Clean-up Periods and Clean-up Activities
- Production Rates

Please specify the operating period for your operation (when process wastewater is/will be discharged to the sewer);

Hours/Day: Days/Week: Weeks/Year:

Specify the typical number of hours of discharge of process wastewater discharge to the sewer during the following shifts:

08:00 to 16:00 16:00 - 24:00 00:00 - 08:00



7: Average Daily Water Consumption and Sources

Source			Volume (m3/day)	Measurement (Estimated or Measured)
Municipal Supply	Yes	No		
Surface Water**	Yes	No		
Groundwater*	Yes	No		
Other sources**	Yes	No		

If flow rate varies significantly provide peak flow rates per day and month and explanation.

*Provide copy of the Permit to Take Water (or other documentation per relevant jurisdictional Requirements)

** If 'Yes' - provide explanation as an attachment.

8: Discharge Points from Site

List all liquid effluent discharge points from the site and average daily flow for each point in cubic metres per day of sanitary, noncontact cooling water, process wastewater, contact cooling water and other discharge water to the sanitary sewer, combined sewer, storm sewer, groundwater, surface water, evaporation losses (if applicable), and percent of water in final manufactured product (if significant and applicable to the site).

For example: process wastewater from manufacturing line to sanitary sewer at an average daily flow of 200 m3/day (measured)

Identify each source on a schematic flow diagram (refer to section 10) and site layout, if necessary.

Source (#)	Wastewater Source Description	Volume (m3/day)	Measurement (Estimated or Measured)



9: Known Characteristics of Discharges

Provide existing data on the chemical composition and constituent concentrations of the discharges listed in Section 8. Attach relevant laboratory sample analysis.

10: Site Physical Layout

Provide the following items as attachments to this application:

- Sketch of property (to scale or approximate) with directional north arrow, showing buildings, pretreatment works, property boundaries, effluent lines, and connections to sanitary, combined and storm sewers.
- A flow diagram of the site flows/processes is also required for each process that generates wastewater.

<u>11: Pretreatment of Discharges Prior to Discharge</u>

Provide a description of the pretreatment systems and associated processes, design capacities, contaminants removed, performance objectives, provisions to bypass the pretreatment facilities, collection and disposal of any treatment byproducts (i.e. solid wastes/sludge) and operational procedures for the devices.



12: Related information

Does the site have any of the following programs addressing discharges to the sewer system in place?

Pollution Prevention:	Yes	No
Best Management Plan:	Yes	No
Environmental Management System:	Yes	No
Other program / practices:	Yes	No

If yes - attach copy of each to the form and explanation for implementation.

<u>13: Spill Prevention and Emergency Storage</u>

Please summarize any storage or provision to prevent spills/wastewater from entering the sewer system without pretreatment.

Documents can be provided as attachments.

14: Alberta Environmental Protection & Enhancement Act Approval Information

Provide the Alberta Environmental Protection & Enhancement Act Approval # for any Approval that the site may have under the requirements of the Province of Alberta (Alberta Environment & Protected Areas).

15: Flow Information

Requested Total Discharge Flow Rates:

Total discharge:	m3
Maximum daily discharge rate:	m3/day
Average daily discharge rate:	m3/day
Maximum hourly discharge rate:	m3/hour

Discharge duration (if different from Section 6):

Hours/day		
Days/week		
Weeks/year		



16: Requested Permit Term

Please indicate in the appropriate box below the length of time that you will require a Wastewater	r
Discharge Permit.	

One time discharge	
Less than 7 days:	
Less than 1 year:	
Ongoing/permaner	nt:
*Expected start dat	e when wastewater will be discharged:
17: Method of Disc	harge
Please indicate in th application is approv	e appropriate box below how the wastewater will be discharged, if the ved.
Through existin	ng sewer connection
Through sanita	ry manhole (attach location, photo, or map)
By a new sewer	· connection
Through a regional through a reg	onal hauled wastewater transfer station. (Please check below)
o Loc	ity Nisku Sewage Transfer Station: ated near the intersection of 20th Avenue (Township Rd. 504) and 9th Street nge Rd. 250)
	ounty Sewage Transfer Station #1: ated near Highway16 and Highway 799
	ounty Sewage Transfer Station #2: ated near the intersection of Highway 16 and Highway 44

Strath	cona County Cloverbar Transfer Station:
0	Located on Range Road 232

Sturge	on County Sewage Transfer Station:
 0	Located in the Sturgeon County Industrial Park

Name of Hauled Waste Trucking Company to be used:

ARROW Utilities must issue a Wastewater Discharge Permit related to this application prior to discharge at any of the transfer stations. The applicable municipality must also be contacted to gain access to the transfer station(s) of choice.



18: Contact Information/Declaration

Contact Person:

Company Name (if different from Company listed above):

Address:

Town/City/County:

Telephone:

Email:

I declare that the information provided on this form is correct and accurate to the best of my knowledge.

Authorized Company Representative

Print Name:		
Signature:		
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Title:		
Date:		