

**CITY OF SAN MATEO / ESTERO MUNICIPAL IMPROVEMENT DISTRICT**

DEPARTMENT OF PUBLIC WORKS, REGULATORY COMPLIANCE DIVISION

1949 PACIFIC BLVD, SAN MATEO, CA 94403 TELEPHONE (650) 522-7300

**APPLICATION FOR GROUNDWATER WASTE DISCHARGE PERMIT**

**Please see instructions included on a separate page. Type or print all applicable information.
Please return completed application not less than 30 days prior to commencing discharge.**

PART A. SEWER USER INFORMATION

1. Discharge Requested By:	1a. Name of Facility:		
2. Street Address (Discharge Location):			
City:	State:	ZIP:	Bus. Phone:
3. Mailing Address (if different from above):			
City:	State:	ZIP:	Email:
4. Owner/Chief Executive Officer:		Title:	
Mailing Address (if different from above):			
5. On-Site Primary Contact Person (if different from above):		Title:	
Day Phone (if different from bus. phone):		Emergency Phone:	

PART B. FACILITY INFORMATION

6. Description of Facility:			
7. Type of Discharge:	<input type="checkbox"/> Temporary	<input type="checkbox"/> Continuous	8. Dates / Frequency / Duration of Operation:
9. Source of Discharge:	<input type="checkbox"/> Construction Dewatering	<input type="checkbox"/> Well Purge Water	
	<input type="checkbox"/> Sub-floor/Basement Dewatering	<input type="checkbox"/> Other (specify):	
10. Proposed Discharge Point to Sewer (Include a map/construction drawing depicting sewer line(s) and point of discharge):			
11. List Source(s) and Est. Discharge Volume		12. List Contaminants (if any) and Expected Concentrations	
Source	Flow (gpd)	Contaminant	Concentration
13. Pretreatment System (if any):			

PART C. SIGNATORY

Note to Signing Official: Information provided in this application is public information and shall be available to the public without restriction. **Signature indicates agreement to comply with conditions on the reverse side.**

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, 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 or both.

Name:	Signature:
Title:	Date:

Official Use Only

Approved by:

Date:

APPLICANT FOR GROUNDWATER WASTE DISCHARGE PERMIT MUST READ THIS MATERIAL

BY SIGNING THE PERMIT APPLICATION ON THE REVERSE, the applicant agrees:

1. To furnish any additional information on groundwater discharges as required by the City of San Mateo (City)/City of Foster City(EMID);
2. To accept and abide by all provisions of ordinances, policies and guidelines of the City, including the Sanitary Sewer Use Ordinance (San Mateo Municipal Code Section 7.38)/City of Foster City (EMID) Code Section 8.37 and prohibitions against illegal discharges of non-stormwater and other wastes to the City's storm drain system as specified in the Stormwater Ordinance (San Mateo Municipal Code Section 7.39)/City of Foster City (EMID) Code Section 8.04;
3. To train employees to abide by all provisions of ordinances, policies and guidelines of the City as specified in (2.) above;
4. To operate and maintain any required groundwater treatment devices in a satisfactory manner as approved by the City;
5. To keep records of groundwater discharge and/or treatment system operation and maintenance **on-site** and make these records available upon request by City personnel;
6. To cooperate at all times with City personnel, or their representatives, in the inspection, sampling and study of groundwater discharge facilities and discharges;
7. To immediately notify the City at [650]-522-7300 (during normal working hours or after hours/on weekends and holidays) in the event of any accident, negligence or other occurrence that causes the discharge to the sewer or storm drain system of any material whose nature and quantity might be reasonably judged to constitute a hazard to the public health, environment, City personnel or wastewater treatment facilities;
8. To pay to the City annually the required Waste Discharge Permit annual fee;
9. To submit, as required by the City, accurate data on groundwater discharge flows and groundwater quality (contaminants);
10. To submit additional pages as required to furnish the necessary information if there is inadequate room on the reverse side of this permit form to complete the submittal of requested information;
11. To apply for a revised Waste Discharge Permit if any change in production, method of groundwater treatment or operations creates a significant change in groundwater quantity or quality, or, if the quantity or quality of groundwater discharged changes by more than 25%, or changes above any other threshold level specified in Waste Discharge Permit requirements;
12. To provide immediate access to authorized City personnel to any facility directly or indirectly connected to the City's sanitary sewer system under emergency conditions and at all other reasonable times;
13. To apply for a renewed Waste Discharge Permit at least 30 days prior to the expiration date specified on the Permit.
14. To notify the Regulatory Compliance Division at [650] 522-7300 within 30 days of an owner name change or business name change.
15. To comply with all requirements and conditions of approval specified by City personnel in accordance with San Mateo Municipal Code section 7.38/City of Foster City (EMID) Code Section 8.37. Failure to do so invalidates the permit approval.

CITY OF SAN MATEO / ESTERO MUNICIPAL IMPROVEMENT DISTRICT

INSTRUCTIONS FOR COMPLETING APPLICATION FOR GROUNDWATER WASTE DISCHARGE PERMIT

Part A. Sewer User Information

1. **Discharge Requested By:** Approval to discharge may be requested by: a consultant, coordinating party, or individual company. The person or party requesting the discharge holds all liability. Name of the Facility (1a. should reflect the name of the business or location where the discharge is proposed to occur)
2. **Street Address:** The discharge location is the street addresses where the discharge will occur. Include building numbers, if any.
3. **Mailing Address:** Complete if different from the address specified in Number 2 above. *Please include a valid email address.*
4. **Owner/Chief Executive Officer:** Name and title of person in charge of total operation; mailing address if different from above.
5. **On-Site Primary Contact Person:** Best person to contact about this application, or in case of an emergency. Name of *local* manager of the business is preferable.

Part B. Facility Information

6. **Description of Facility:** Describe the facility where the discharge is proposed.
7. **Type of Discharge:** A discharge is considered a temporary discharge if it occurs over a short period of time and is related to one activity. For example, a discharge from a construction project/excavation, dewatering a utility vault, or discharge of a known volume of collected groundwater is considered a temporary discharge. A continuous discharge would occur over an unspecified time period (not to exceed one year) such as discharge of a groundwater treatment system or extended de-watering at a larger construction site. Either type of discharge will be subject to specific monitoring conditions.
8. **Dates / Frequency / Duration of Operation:** Specify when groundwater discharge will commence. Whether the groundwater discharge will occur at all hours of the day (pumping continuously for 24 hours or intermittently during days of operation). And the length of time for the discharge to be completed.
9. **Source of Discharge:** Choose one that best describes the nature of groundwater extraction activities that produce groundwater discharged to the sewer system.
Construction Dewatering – Includes all projects requiring dewatering prior to excavation/backfill.
Sub-floor/Basement Dewatering – Locations where collection systems/passive drains are used to reduce groundwater presence in below ground structures.
Well Purge Water – Includes groundwater produced from monitoring well sampling events (well development and purging) as well as aquifer pump testing.
Other – Provide a brief description of the activities that will generate groundwater for discharge.
10. **Proposed Discharge Point to Sewer:** Specify the precise location where the connection will be made to the sanitary sewer for discharge (cleanout, manhole, etc.). Include a site map/drawing depicting the locations of the discharge point and any piping installed to convey the groundwater from the extraction point(s). If the discharge point is to a manhole, specify the manhole identification number.
11. **List Source(s) and Estimated Discharge Volume:** Identify each source of groundwater being discharged and the estimated volume of groundwater to be discharged daily in gallons per day (gpd). If discharge is of a known volume (temporary storage tank, etc.) specify actual volume in gallons.
12. **List Contaminants (if any) and Expected Concentrations:** If groundwater is known to contain contaminants from commercial/industrial activities (such as petroleum hydrocarbons, solvents, etc.) or is a discharge from a groundwater treatment/remediation system, specify each contaminant and concentration expected in the discharge. **If unknown, specify “unknown.”** Depending on the nature and location of the groundwater extraction activities, the applicant may be required to collect groundwater samples representative of the water quality anticipated in the expected discharge. Discharge may not be permitted pending the analytical results of the samples.
13. **Pretreatment System (if any):** Describe any devices or equipment designed to “treat” (remediate) groundwater quality prior to discharge to the sewer. Equipment may include devices for sediment removal, filtration, activated carbon, etc.

Part C. Signatory

The application must be signed by the most responsible person of the organization applying for the Waste Discharge Permit. This may include the owner, general partner, corporate officer, or other duly authorized representative of the organization in a decision-making capacity. The person signing the document is legally responsible for all information contained therein, and becomes liable for any and all future enforcement actions.

Note: The person that signs the application must first read the read the reverse side of the application prior to signing it, as the signature indicates agreement to comply with the terms stated on the reverse side of the application.

Please return the completed application not later than 30 days prior to commencing discharge. Thank you.