

ATTACHMENT C
APPLICATION FORMS

RESOLUTION R5-2015-XXXX

WAIVER OF WASTE DISCHARGE REQUIREMENTS
FOR
SMALL FOOD PROCESSORS, WINERIES AND
RELATED AGRICULTURAL PROCESSORS
WITHIN THE CENTRAL VALLEY REGION

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TIER 1 NOTICE OF INTENT

RESOLUTION R5-2015-XXXX

WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR
SMALL FOOD PROCESSORS AND SMALL WINERIES

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, CENTRAL VALLEY REGION

Facility Name

Facility Owner

I am hereby submitting to the Central Valley Water Board the following information:

Discharge Description

I am applying for coverage under Tier 1 of Resolution R5-2015-XXXX (Waiver). I have read the Waiver and understand the discharge requirements and tier structure applicability of the Waiver. I will comply with all conditions of the Waiver as set forth in Waiver Attachment A. I operate the facility that generates the waste that will be discharged and I own the land where the discharge will occur. In order to show compliance with NPDES General Permit CAS000001, which specifies waste discharge requirements for discharges of storm water associated with industrial activities, I am submitting (*check one*):

- A copy of the Notice of Intent that has been submitted to apply for coverage under Order 97-03-DWQ or subsequent revision thereto; or
- A Notice of Non-Applicability (NONA); or
- A No Exposure Certification (NEC).

In accordance with the Tier 1 requirements of the Waiver, I will (*check all that apply*):

- Land apply no more than 10,000 gallons of wastewater to my land application area per year.
- Use storage tanks and dispose of wastewater at a permitted treatment facility (tank and haul) for any wastewater in excess of 10,000 gallons per year.
- Land apply residual solids associated with the generation of no more than 10,000 gallons of wastewater to my land application area per year.
- Dispose of any excess residual solids off-site in compliance with the Waiver and applicable regulations.

Certification Statement

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Signature: _____ Phone: _____

Printed Name: _____ Date: _____

**REPORT OF WASTE DISCHARGE TECHNICAL INFORMATION FORM
FOR TIER 2 AND TIER 3 FACILITIES**

RESOLUTION R5-2015-XXXX
WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR
SMALL FOOD PROCESSORS AND SMALL WINERIES

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, CENTRAL VALLEY REGION

Complete all applicable sections of this form. The Executive Officer will not issue a Notice of Applicability unless the Report of Waste Discharge is complete and demonstrates that the Waiver (Resolution R5-2015-XXXX) is applicable to the proposed discharge.

Facility Name

Facility Owner

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine.

(signature)

(date)

(printed name)

(phone)

A. FACILITY MAPS/PLANS

1. Site Location Map: provide a scaled topographical map that depicts the location of the facility, property lines, land application area, on-site wells, streets, and nearby surface waters and wetlands.
2. Processing Facility and Discharge Area Plan: provide a scaled plan that depicts the processing facility, wastewater pipelines, wastewater storage structures, residual solids storage areas, storm water drainage features, and all land application areas.
3. Other Maps or Plans (Optional): provide other maps, plans, or sketches as desired to illustrate typical design features to supplement your response to the questions below.

There are several online tools that are useful to develop the required maps and plans:

- Many Internet search engines provide scaled street maps and/or aerial photos that can be adapted for use.
- TopoQuest (<http://www.topoquest.com/find.php>) allows you to download portions of United States Geological Survey topographic maps that show topography and surface waters. These can be printed directly or imported into most software applications.
- Legible hand drawn maps are acceptable.

B. TYPE OF OPERATION (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Winery | <input type="checkbox"/> Cannery |
| <input type="checkbox"/> Brewery | <input type="checkbox"/> Nut Huller |
| <input type="checkbox"/> Olive Oil Processing | <input type="checkbox"/> Seed Washing |
| <input type="checkbox"/> Seed Oil Processing | <input type="checkbox"/> Meat processing |
| <input type="checkbox"/> OTHER - Describe and Provide SIC Code _____ | |

Standard Industrial Classification (SIC) codes for all industries can be found on the Internet at <http://www.osha.gov/pls/imis/sicsearch.html>

C. FACILITY HISTORY (check the appropriate box and the answer the associated questions)

1. New facility (no operations to date by current owner)

- a. _____ Planned or Actual (select one) construction completion date.
- b. _____ Planned operations start date
- c. _____ Planned date of first discharge to land
- d. _____ Has the local planning department determined whether the project requires an environmental review to comply with the California Environmental Quality Act (CEQA)?

If YES, include a copy of either (check the submitted item):

- A Notice of Exemption or letter stating the project is not subject to CEQA review, or
- A copy of the certified CEQA document (Negative Declaration, Mitigated Negative Declaration or Final Environmental Impact Report, as applicable)

2. Existing facility covered under the previous waiver (Resolution R5-2009-0097)

- a. _____ Date of Notice of Applicability
- b. _____ Did you discharge process wastewater to land under the previous waiver?
- c. _____ Did you discharge residual solids to land under the previous waiver?
- d. _____ Did you comply with all of the requirements of the previous waiver?
- e. _____ Has this facility expanded since the Notice of Applicability was issued?
- f. _____ Do you plan to expand within the next five years?
- g. _____ Do you plan to discharge process wastewater to land under the current waiver?
- h. _____ Do you plan to discharge residual solids to land under the current waiver?
- i. _____ Will you be able to comply with the conditions of the current waiver, including after any planned expansion in the next five years?
- j. _____ If not, when do you plan to submit a Report of Waste Discharge to apply for individual Waste Discharge Requirements?

3. Existing facility not covered under the previous waiver (Resolution R5-2009-0097)

- a. _____ How long have you operated this facility?
- b. _____ Do you plan to expand within the next five years?
- c. _____ Will you be able to comply with the conditions of the current waiver, including after any planned expansion?
If NO, when do you plan to submit a Report of Waste Discharge to apply for individual Waste Discharge Requirements? _____
- d. How do you currently manage the disposal of process wastewater and residual solids? (A brief description is sufficient).

D. STORM WATER PERMIT COVERAGE

- Is the facility covered under NPDES General Permit CAS000001 specifying waste discharge requirements for discharges of storm water associated with industrial activities (either State Water Resources Control Board Order 97-03-DWQ or 2014-0057-DWQ, whichever is in effect on the date of the Report of Waste Discharge)?
1. _____

If YES, provide the WDID number assigned to the facility (from the acknowledgment letter issued by the State Water Board). _____

If NO, include a copy of either (check the item included with your application):

- A copy of the Notice of Intent that has been submitted to apply for coverage under Order 97-03-DWQ or subsequent revision thereto.
- A copy of the submitted Notice of Non-Applicability (NONA).
- A copy of the submitted No Exposure Certification (NEC).

E. OPERATIONAL INFORMATION

1. How many tons of produce or commodity will be processed per year? (Estimates are acceptable)

_____ tons in 2015	_____ tons in 2018
_____ tons in 2016	_____ tons in 2019
_____ tons in 2017	_____ tons in 2020

2. When is the primary processing season for this facility? (Example: June through October)

3. _____ Does this facility have operations that generate process wastewater or residual solids at other times of the year?

If YES, describe: _____

4. Describe all operations and activities that generate process wastewater.

F. WASTEWATER INFORMATION

- 1. _____ Does this facility have a self-regenerating water softener (one that you add salt to)?
- 2. _____ Does this facility have a boiler?
- 3. _____ Does this facility have evaporative cooling systems that are periodically flushed and refreshed with fresh water?
- 4. _____ Does this facility discharge stillage wastes?

5. If you answered YES to any of the above questions (F.1 – 4), describe how you will segregate these high strength/high salinity wastes and dispose of them off-site.

6. _____ Does this facility utilize acid or caustic cleaning solutions or sanitizing solutions such as sodium hypochlorite (bleach)?

If YES, list by chemical formulation, concentration, and volume used per year.

<u>Chemical Formulation</u>	<u>Concentration and Units</u>	<u>Volume (gallons per year)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. _____ Does this facility use other chemicals that will be present in the wastewater?

If YES, list by chemical formulation, concentration, and volume used per year.

<u>Chemical Formulation</u>	<u>Concentration and Units</u>	<u>Volume (gallons per year)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. Provide estimated monthly wastewater flows for each month of the year. (Exclude saline waste streams that will be segregated for separate disposal.)

Volume (gallons)	Month	Volume (gallons)	Month
_____	January	_____	July
_____	February	_____	August
_____	March	_____	September
_____	April	_____	October
_____	May	_____	November
_____	June	_____	December
Annual Total			

9. _____ Do you expect that your wastewater flows will increase over the next five years?
 If YES, what is the expected maximum annual volume in gallons? _____

10. _____ Is the total volume of wastewater in F.8 or F.9 greater than 100,000 gallons?
 If YES, the facility will be enrolled under Tier 3 or have a means to measure generated wastewater volume (excluding saline waste streams that will be segregated for separate disposal) and discharge no more than 100,000 gallons per year.

_____ Will the facility use a flow meter?
 If YES, describe the type and location of the flow meter that will be used:

 If NO, describe method to estimate the volume generated per month (e.g., monitoring tank levels or other means):

11. _____ Is your process area covered in a way that prevents storm water from commingling with wastewater?

12. Describe the wastewater collection system and how it is routed to the storage system (runoff protection, floor drains, pumps, gravity flow pipe, etc.)

13. Describe the wastewater storage system (number, size, and type of tanks; secondary containment systems; pump systems; spillage/overflow prevention features, etc.)

G. RESIDUAL SOLIDS INFORMATION

1. _____ Does the facility generate residual organic solids, such as pulp, skins, stems, and/or seeds?

If NO, move to Section H.

2. Describe the types of solids generated:

3. Provide an estimate of the weight of residual solids generated each month

Weight (tons)	Month	Weight (tons)	Month
_____	January	_____	July
_____	February	_____	August
_____	March	_____	September
_____	April	_____	October
_____	May	_____	November
_____	June	_____	December
Annual Total			

4. How do you propose to dispose of the residual solids? (check all that apply and provide required information)

a. Waste landfill

Disposal Site - name: _____

contact info: _____

Hauler - name: _____

contact info: _____

b. Animal feed

Disposal Site - name: _____

contact info: _____

Hauler - name: _____

contact info: _____

c. Off-site composting or other recycling

Disposal Site - name: _____

contact info: _____

Hauler - name: _____

contact info: _____

d. On-site land application as a soil amendment

5. Describe how residual solids will be collected and stored prior to off-site disposal or on-site land application.

6. Describe the measures used to prevent nuisance conditions (odor and flies) during storage of residual solids.

H. LAND APPLICATION AREA INFORMATION

- 1. _____ What is the size of the land application area? acres or square feet
- 2. _____ Will wastewater and residual solids be applied to the same area?

If NO, provide the size of the area used to apply wastewater and the size of the area used to apply residual solids.

_____ Size of wastewater land application area. acres or square feet

_____ Size of residual solids land application area. acres or square feet

For questions 3 & 4, distinguish between the wastewater land application area and residual solids land application area.

3. Describe the crops or type of vegetation grown on the land application area(s), the growing season, and harvesting practices.

4. Describe how the land application area(s) will be designed, operated and maintained to prevent off-site discharge of process wastewater.

Information about wastewater applied to land

5. Provide estimated volume of wastewater applied to land for each month of the year. (Saline waste streams are not allowed to be discharged to land.)

Volume (gallons)	Month	Volume (gallons)	Month
_____	January	_____	July
_____	February	_____	August
_____	March	_____	September
_____	April	_____	October
_____	May	_____	November
_____	June	_____	December
Annual Total			

6. _____ What is the estimated average total nitrogen content of the wastewater in mg/L?

Winery and food processing industry associations typically provide characteristic nitrogen values based on the processed commodity.

Examples of such organizations are:
 The Wine Institute (<http://www.wineinstitute.org>), and
 The California League of Food Processors (<http://www.clfp.com>)

7. Describe how the salinity of the wastewater applied to land will be minimized.

8. Describe the irrigation system and how wastewater will be applied evenly over the land application area.

Answer the remaining questions only if residual solids will be applied to land

9. Provide the amount of residual solids applied to land for each month of the year.

Amount	Month	Amount	Month
<input type="checkbox"/> tons/acre or		<input type="checkbox"/> tons/acre or	
<input type="checkbox"/> inches		<input type="checkbox"/> inches	
_____	January	_____	July
_____	February	_____	August
_____	March	_____	September
_____	April	_____	October
_____	May	_____	November
_____	June	_____	December
Annual Total			

10. _____ What is the moisture content of the solids? weight percent

11. _____ What is the nitrogen content of the solids? percent or mg/Kg as dry weight basis

12. Describe how the solids will be transported to the land application area and evenly spread out.

I. WASTEWATER POND INFORMATION (nut hullers only)

1. _____ Is the groundwater water table greater than 5 feet below the base of all ponds?

2. _____ What is the maximum water depth that will be in any pond at any time? (feet)

3. _____ Will the freeboard, as measured from the water surface in the ponds to the surrounding grade, be less than one foot at any time?

4. _____ Will the pond be completely drained, including removal of visible residual solids and organic matter, by December 31st of each year?

5. Describe the controls that will be in place to prevent storm water runoff from entering the pond between January 1st and June 30th of the following year.
