



## Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Instructions and Supporting Materials

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### Table of Contents

- introduction
- guidance
- permit application fact sheet
- completeness checklist

### Introduction

MassDEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the MassDEP Web site at [mass.gov/dep](http://mass.gov/dep) in two file formats: Microsoft Word™ and Adobe Acrobat PDF™. Either format allows documents to be printed.

*Instructions & Support Materials* files in Microsoft Word™ format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

*Permit Applications* in Microsoft Word™ format must be downloaded separately. Users with Microsoft Word™ 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF™ format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF™ files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



## Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

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**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Guidance

---

### Engineering Report Requirements

*All industrial wastewater groundwater discharge permit applications for which a treatment system is proposed or for which an existing treatment system is modified must include an engineering report and plans & specifications with a Certification Statement. The engineering report and plans & specifications shall be **stamped and signed** by a Massachusetts Registered Professional Engineer.*

*A Certification Statement for the Hydrogeologic Report will also be submitted with the application, as required.*

The engineering report shall include, at a minimum, the following items:

- a. a general description of the facility;
- b. a description of the rated and actual production levels of the facility;
- c. a description of the number of employees, shifts and days of operation per week;
- d. a listing of raw materials used, such as but not limited to, chemicals, cleaning product, petroleum products, etc.;
- e. a description of the principal wet processes;
- f. a description of the sources of water supply including quantity and quality requirements;
- g. an identification of the sources of all sanitary and industrial wastes streams together with the quantity of flow and waste stream characteristics, including seasonal flow fluctuations, if any. In accordance with 310 CMR 30.302, a determination of whether the industrial waste stream is a hazardous waste stream shall be made for each industrial waste stream;
- h. a description of any by-product recovery systems;
- i. a listing and description of wastewater treatment studies performed;
- j. a description of liquid waste flow control measures;
- k. a description of any existing wastewater treatment system, including all design parameters;
- l. a flow and material balance diagram;
- m. a description of any anticipated new processes;
- n. a description of the proposed effluent quality;
- o. a listing and evaluation of wastewater treatment alternatives capable of meeting applicable effluent quality;
- p. a narrative description of the recommended plan for a wastewater treatment facility, based upon the preceding evaluation, including the basis of design of major unit processes and a preliminary layout;



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**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## **Guidance**

---

- q. a flow schematic, on a sheet no larger than 11 inches by 17 inches, including return lines, chemical feed lines, and sampling points;
- r. treatability and pilot study data on the ability of the proposed treatment system to treat the proposed discharge and meet applicable federal, state, and local requirements;
- s. a description of odor control provisions, as necessary;
- t. a description of safety provisions;
- u. a description and location of all chemical stored, including spill containment provisions;
- v. an implementation schedule for the recommended plan;
- w. an examination of the potential impact of any proposed discharge on municipal and private water supply wells, or POTW's, or surface water, whichever is applicable.

The engineering plans and specifications of a proposed wastewater treatment facility shall include, at a minimum, the following:

- a. materials of construction and specifications for all wastewater treatment system components;
- b. materials of construction and specifications for all wastewater collection system components;
- c. specifications for all instrumentation and alarms;
- d. a site plan and general plant layout;
- e. plan views and profile views, including dimensions showing existing and proposed piping and processing units related to industrial wastewater collection, treatment, and disposal.



**Massachusetts Department of Environmental Protection**

Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

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**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Guidance

---

### Treatment Facility Rating Worksheet

This worksheet is used to guide the applicant in choosing the correct fees category, pursuant to 310 CMR 4.00. The system described here is the only method of determining categories for Type I and Type II facilities.

#### Rating System

"Unit Operations" is defined as any component of a process that could be utilized solely, or combined, to obtain a specific objective. They are listed in bold-faced type following the example. The rating system is based on the number of specified unit operations in a proposed wastewater treatment facility and the total number of points assigned to each unit operation.

**Type II Facility** - This is defined as any facility that has three or more unit operations as listed in bold-faced type on the next page, **OR** has a rating of greater than 20 points.

**Type I Facility** - This is defined as any facility that has less than three unit operations listed in bold-faced type on the next page, **AND** has a rating of less than or equal to 20 points.

Example:

<b>Unit Operation</b>	<b>Points</b>
Equalization	2
Neutralization (single)	3
Cyanide Destruction	5
Chrome Reduction	5
<b>4 Unit Operations</b>	<b>15 Points</b>

Since this facility has four unit operations, it is considered a Type II facility, even though it has a rating of less than 20 points.

#### Unit Operations in Industrial Wastewater Treatment Systems

Refer to 257 CMR 2.00 for any other unit operations not listed here.

<b>Unit Operation</b>	<b>Points</b>
<b>Absorption/Adsorption</b>	
Carbon	5
Ion Exchange	5



## Massachusetts Department of Environmental Protection

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**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Guidance

---

### Biological Wastewater Treatment

Activated Sludge	6
Contact Beds (anaerobic)	5
RBC	5
Sand Filters	4
Trickling Filters	4

### Chemical Precipitation (reaction vessel) Clarification

Primary	5
Secondary	5
Tertiary	5

### Chrome Reduction 5

### Cyanide Destruction 5

### Disinfection 5

### Electrolytic Recovery

Electrodialysis	5
Silver Recovery Unit	5

### Equalization 2

### Evaporation

Single	2
Multiple	5

### Filtration/Sludge Dewatering

Cartridge	3
Centrifuge	8
Filter Press	8
Membrane	5
Reverse Osmosis	5
Vacuum Filter	10

### Flocculation/Mixing/Coagulation 5

### Flotation 5

### Neutralization/pH Adjust



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**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Guidance

---

Single	3
Multiple	5
<b>Oil/Water Separation</b>	
Gravity Fed	2
Baffled	5
<b>Settling</b>	
With Manual Sludge Removal	3
With Mechanical Sludge Removal	5
<b>Sludge Blending/Thickening</b>	5
<b>Sludge Drying (mechanical dryers)</b>	5
<b>Stripping (Air/Steam)</b>	5



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Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Permit Application Fact Sheet

---

### 1. What is the purpose of these permits, plan approvals, renewals and modifications?

These permits and approvals serve to protect the public health, welfare, and the environment through the control of industrial wastewater discharges to the ground.

Statutory authority for these permits is stated in MGL Chapter 21, sections 26 to 53. Regulatory authority for these permits is stated in 314 CMR 5.00.

### 2. Who must apply?

a. These facilities must apply:

Any facility with a discharge requiring a permit in accordance with MGL Chapter 21, sections 27 or 43 and the regulations issued under that law which also is classified by the following Standard Industrial Classification (SIC) codes:

1000 - 1399	Metal Mining, Coal Mining, Oil and Gas Exploration
1474 - 1499	Chemical/Fertilizer Mining, Nonmetallic Minerals
2000 - 3999	Manufacturing
4231	Maintenance Facilities for Motor Freight Transport
4581	Airports, Flying Fields, and Airport Terminal Services
4911 - 4939	Electric and Gas Production
4953	Refuse Systems
7216	Drycleaning (except rug cleaning)
7217	Carpet and Upholstery Cleaning
7218	Industrial Laundries
7384	Photofinishing Laboratories
7532 - 7539	Automotive Repair Shops and Paint Shops
7549	Automotive Services
7819	Motion Picture Developing/Printing/Film Processing
8062 - 8069	Hospitals
8071	Medical Laboratories
8072	Dental Laboratories
8731	Commercial Physical and Biological Research

Any facility without remediation discharges outside of the SIC codes listed above must apply for other groundwater discharge permits. Please consult regulations 310 CMR 4.00 and 314 CMR 5.00 to determine whether another category may apply to you.

b. Options:

Facilities classified above with remediation discharges in accordance with MGL Chapter 21E, are no longer required to obtain an Industrial Wastewater Permit. Applicants may comply under the Massachusetts Contingency Plan, 310 CMR 40.0000.



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Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Permit Application Fact Sheet

---

### 3. What other requirements should be considered when applying for these permits?

#### a. What prerequisites should be considered before applying for these permits?

- Permits of this type may require MEPA review. Please carefully examine 301 CMR 11.00, the MEPA Regulations, to determine if your project exceeds the MEPA review thresholds, or for more information contact the MEPA Unit of the Executive Office of Environmental Affairs (100 Cambridge Street, Boston, MA 02202; 617-727-5830). **MassDEP cannot complete technical review of the permit application until the MEPA process has been concluded.** Copies of MEPA filings (with reference to any applicable Transmittal numbers) should be sent to the appropriate program offices in Boston and the MEPA Coordinator in the appropriate Regional Office.
- Engineering report, plans and specifications must be submitted for: BRP WP 86, BRP WP 87, BRP WP 88 and BRP WP 90.

#### b. What concurrent applications are related to these permits?

- Local Board of Health regulations may apply.
- Application for operator certification/facility rating in accordance with 257 CMR 2.00 may be required.

**Note:** These additional requirements are intended to serve as a guide to the applicant. It does not necessarily include all additional requirements.

### 4. Where should the application be sent?

The **application form with an original signature** in ink should be sent to the DEP Boston Office (Primary Permit Location):

Department of Environmental Protection  
Wastewater Management Program  
1 Winter Street  
Boston, MA 02108

A **copy of the application** should be sent to the DEP Regional Office (Reserve Copy Location). Find your region at: <http://www.mass.gov/dep/about/region/findyour.htm>

A **copy of the MassDEP Transmittal Form and the Fee** for the application should be sent to:

Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02211



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Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

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**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

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## Permit Application Fact Sheet

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### 5. What is the application fee?

BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility	\$5,725
BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility	\$2,945
BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87	\$1,340
BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87	\$600
BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87	\$870

### 6. Where can I get a copy of the timelines?

The timelines are available on the MassDEP Website: [www.mass.gov/dep/service/online/fees.htm](http://www.mass.gov/dep/service/online/fees.htm)

### 7. What is the annual compliance fee?

Current annual compliance fees can be found on the MassDEP Website at [www.mass.gov/dep/service/online/fees.htm](http://www.mass.gov/dep/service/online/fees.htm). In cases where extraordinary compliance work is required, a higher fee may be developed.

If you fail to pay the annual compliance fee your permit could be suspended or revoked.

### 8. How long are these permits in effect?

Permit shall be effective for a fixed term, which will not exceed five years. Department may issue a permit for a lesser duration.

### 9. How can I avoid the most common mistakes made in applying for these permits?

- a. Submit a proper topographic map. Applicant must include map scale, meridian arrow showing north, latitude and longitude to the nearest whole second.
- b. Answer all questions on the application form and indicate "N/A" (not applicable) where appropriate. One copy of all application forms must have an original signature in ink.
- c. A complete engineering report and plans and specifications stamped and signed by a Massachusetts Registered Professional Engineer.(not required for BRP WP 89).
- d. Certification Statement for engineering report,plans and specifications, and hydrogeologic report signed by a Massachusetts Registered Professional Engineer, as required.
- e. Documents clearly identifying the legal entity responsible for the ownership, proper operation, and maintenance of the proposed facility.
- f. Submit fee and one copy of the MassDEP Transmittal Form to: Department of Environmental Protection, P. O. Box 4062, Boston, MA 02211.



**Massachusetts Department of Environmental Protection**

Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## Permit Application Fact Sheet

---

**10. What are the regulations that apply to these permits? Where can I get copies?**

These regulations include, but are not limited to:

- a. Water Pollution Control Regulations, 314 CMR 2.00, 314 CMR 5.00, and 314 CMR 12.00.
- b. Wastewater Treatment Operator Certification Regulations, 257 CMR 2.00.
- c. Timely Action Schedule and Fee Provisions, 310 CMR 4.00.

These may be purchased at:

**State Bookstore (in State House)**  
Room 116  
Boston, MA 02133  
617-727-2834

**State House West Bookstore**  
436 Dwight Street, Room 102  
Springfield, MA 01103  
413-784-1376



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Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

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## Application Completeness Checklist

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- The MassDEP Transmittal Form is completed: <http://mass.gov/dep/service/online/trasmfrm.shtml>
- All applicable questions have been completed and N/A has been inserted where appropriate.
- The Industrial Groundwater Discharge Permit Application Form is properly filled out by the applicant and the consultant engineer and signed in ink.
- An Engineering Report and Plans & Specifications have been completed and submitted.
- Certification statement for the engineering report, plans and specifications, and the hydrogeologic report is included with this application.
- Groundwater Monitoring Well Plan has been submitted.
- Legal Ownership Documents have been submitted
  - Articles of Incorporation       Master Deed
  - Declaration of Trust             Other

To submit the application package:

- Checklist items have been completed.
- Send original application along with fee and the MassDEP Transmittal Form to:

Department of Environmental Protection  
 Wastewater Management Program – Industrial Wastewater  
 1 Winter Street  
 Boston, MA 02108

- Send a copy of the application a copy of the Transmittal Form to:

Department of Environmental Protection  
 \_\_\_\_\_\* Regional Office  
 Industrial Wastewater Management Program

\*Find your region: <http://mass.gov/dep/about/region/findyour.htm>

- Send fee of:

<b>BRP WP 86</b> .....	\$5,725
<b>BRP WP 87</b> .....	\$2,945
<b>BRP WP 88</b> .....	\$1,340
<b>BRP WP 89</b> .....	\$600
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Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

## **Application Completeness Checklist**

---

in the form of a check or money order made payable to **Commonwealth of Massachusetts**, along with one copy of the MassDEP Transmittal Form to:

: Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02211





- BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility
- BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility
- BRP WP 88 Permit Renewal or Modification, with Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87
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Wastewater Treatment Facility for BRP WP 86 or BRP WP 87
- BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87

**A. General Information (cont.)**

4. The legal entity which owns this facility is:

- Individual     
  Private     
  Corporation     
  Federal  
 State/County   
  Municipality  
  Other: \_\_\_\_\_

**Please provide legal ownership documents with this application.**

5. Facility Information:

\_\_\_\_\_  
Name of Facility

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
email

6. Facility Operator Information: Give the name, as it is legally referred to, of the person, firm, public organization or other entity that operates the treatment facility described in this application. If the facility owner is also the operator, write owner and list mailing address only if different from that listed in number 1 above.

\_\_\_\_\_  
Operator Name

\_\_\_\_\_  
Operator Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
email

\_\_\_\_\_  
Operator's License Number and Grade

**B. Project Information**

1. Does the project affect a site of historic or archeological significance, as defined in regulations of the Massachusetts Historical Commission, 950 CMR 71.00?

- Yes     No

2. Does this project require a filing under 301 CMR 11.00, the Massachusetts Environmental Policy Act?

- Yes     No

If yes, had a filing been made?  Yes     No

\_\_\_\_\_  
EOEA File Number



**Massachusetts Department of Environmental Protection**

Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

Transmittal Number # \_\_\_\_\_

Facility ID (if known) \_\_\_\_\_

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

**B. Project Information (cont)**

- 3. Is this a RCRA facility as defined in 314 CMR 8.03?  
 Yes                       No

If yes, submit the information on Form HW contained in 314 CMR 8.20 in accordance with the provisions of 314 CMR 8.08.

- 4. Is the discharge for this facility within:

- a. The Zone I, Zone A, Zone II or Interim Wellhead Protection Area of a public water supply?  
 Yes                       No

**STOP! The discharge of industrial wastewaters is prohibited in these areas.**

- b. A private water supply area?  
 Yes                       No

- c. A sole source aquifer?  
 Yes                       No

- d. 100 feet of an outstanding Resource Water designated in 314 CMR 4.00, a Special Resource Water designated in 314 CMR 4.00, a cold-water fishery as defined in 314 CMR 9.02, a bathing beach as defined in 104 CMR 445.000, or a shellfish growing area as defined in 314 CMR 9.02?  
 Yes                       No

Specify

- e. A nitrogen-sensitive area as designated by the Department in accordance with 310 CMR 15.215?  
 Yes                       No

- f. An area where the Department has determined based on a Total Maximum Daily Load or other technical report that more stringent effluent limits than those set forth in the General Permit are required to achieve or maintain compliance with the Massachusetts Surface Water Quality Standards, 314 CMR 4.00?  
 Yes                       No

- 5. Improvements - Are you required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes but is not limited to; permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.  
 Yes                       No

- a. Description of the order or agreement (include enforcement document number if applicable):



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Wastewater Treatment Facility for BRP WP 86 or BRP WP 87
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**B. Project Information (cont)**

b. List Identification No. of Affected treatment facility, description of project, and final compliance date:

Identification Number	Description of Project	Final compliance Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Has a hydrogeologic study been performed to determine the potential impact on the groundwater of the discharge or activity?

Yes: \_\_\_\_\_  
BRP WP 83 Application Transmittal Number      Date of Approval

*Please attach copy of the DEP Hydrogeologic Approval letter.*

No

**STOP! Please Note:** In accordance with 314 CMR 5.09, these permit categories may require that a Hydrogeologic Evaluation be submitted to the Department prior to the submittal of the permit application. Please see the BRP WP 83 permit application form and instructions.

7. Are there any ground water monitoring wells currently in place in the vicinity of the discharge or proposed discharge?

Yes *If yes, please attach information on the type and location of the wells and available monitoring data.*

No

8. Have plans and specifications for the treatment works been approved by the Department or, if approved prior to July 1975, by the Department of Public Health?

Yes *If yes, please attach copy of plans and specifications and approval letter*       No

9. Is there a local regulation governing the construction of wastewater treatment facilities?

Yes *Please attach a copy of the local approval*       No

10. Have opportunities for reclaimed water been evaluated?

Yes       No



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Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

Transmittal Number # \_\_\_\_\_

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

Facility ID (if known) \_\_\_\_\_

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### C. Facility Information

1. Facility Status:

Existing    Proposed    Industrial Wastewater Treatment System (IWTS) Modification

**Please Note:** If Proposed or IWTS modified, include the Certification Statement with the application.

2. Location of Facility:

a. For permit renewal only: Are conditions in 2b & 2c the same in the last 5 years?

Yes - If yes, then skip to 2d    No

b. GPS Coordinates:

1. Enter Latitude and Longitude to the nearest whole second for both the wastewater treatment facility and the effluent disposal area.

2. Provide a narrative description of the site and the feature to be permitted. As an example: "The site is on the west side of Main Street, the third building north of High Street. The disposal field lies 100 feet off the southwest corner of the building."

3. Attach a site map based on the MassGIS Coordinate Information Tool that clearly indicates the site. The Coordinate Information Tool is available at

[http://maps.massgis.state.ma.us/images/dep/xyinfo/get\\_xy.html](http://maps.massgis.state.ma.us/images/dep/xyinfo/get_xy.html).

c. Provide a topographic map or maps of the area extending at least to one mile beyond the property boundaries of the facility which clearly show the following:

1. The legal boundaries of the facility;

2. The location and serial number of each of your existing and proposed intake and discharge structures;

3. All hazardous waste management facilities;

4. All springs and surface water bodies in the area, plus all drinking water wells within one mile of the facility which are identified in the public record or otherwise known to you.

5. All Zone II's or IWPA's.

If an intake or discharge structure, hazardous waste disposal site, or injection well associated with the facility is located more than one mile from the plant, include it on the map, if possible. If not, attach additional sheets describing the location of the structure, disposal site, or well, and identify the U.S. Geological Survey (or other) map corresponding to the location.



**Massachusetts Department of Environmental Protection**

Bureau of Resource Protection - Industrial Wastewater Groundwater Discharge Permits

Transmittal Number # \_\_\_\_\_

**BRP WP 86 Permit and Plan Approval for Type II Wastewater Treatment Facility**

Facility ID (if known) \_\_\_\_\_

**BRP WP 87 Permit and Plan Approval for Type I Wastewater Treatment Facility**

**BRP WP 88 Permit Renewal or Modification, with Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 89 Permit Renewal or Modification, without Plan Modification of  
Wastewater Treatment Facility for BRP WP 86 or BRP WP 87**

**BRP WP 90 Plan Approval Modification for BRP WP 86 or BRP WP 87**

**C. Facility Information (cont)**

d. Please list any public or private drinking water supply wells within 2,500 feet of the discharge area:

Well Location	Type of Well (Public/Private)	Status (Active/Inactive)	Safe Yield
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Water Supply Data:

a. List sources of water supply and annual water consumption for the past five years.

Water Sources	Year 1	Year 2.	Year 3.	Year 4.	Year 5.
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Total:	_____	_____	_____	_____	_____

b. Please show the location of your water sources on the map described in question 2c.  
*Please note: This does not apply if answer to question 2a was "Yes".*

4. Nature of business:

a. Briefly describe the nature of your business. Include product produced or services provided.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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**C. Facility Information (cont)**

b. Industrial Classifications:

List, in descending order of significance, the four (4) digit standard industrial classification (SIC) codes that best describe your facility in terms of the principal products or services you produce or provide. Also, specify each classification in words.

Please Note: Applications without SIC Codes will NOT be accepted.

SIC Code	Description
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

5. Provide location and method of wastewater treatment solids disposal?

\_\_\_\_\_

\_\_\_\_\_

6. Flow:

For each IWTS, provide an identification number, total design flow, average daily flow, maximum daily flow, and treatment technology (attach a flow schematic with all details listed in Engineering Report Requirements guidance) :

Identification Number for each IWTS	Total design flow	Ave. daily flow (estimate if it is new facility)	Max. daily flow (estimate if it is new facility)	Treatment technology
_____	_____ gpd	_____ gpd	_____ gpd	_____
_____	_____ gpd	_____ gpd	_____ gpd	_____
_____	_____ gpd	_____ gpd	_____ gpd	_____



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**C. Facility Information (cont.)**

7. Discharge point:

For each discharge point, list the average flow for each source in the following table:

<b>Sources:</b>	Discharge #	Discharge #	Discharge #	Discharge #
Treated water from IWTS	gpd	gpd	gpd	gpd
Non-contact cooling water	gpd	gpd	gpd	gpd
Sanitary wastewater	gpd	gpd	gpd	gpd
Other, please explain:	gpd	gpd	gpd	gpd
<b>Total:</b>	gpd	gpd	gpd	gpd

8. Effluent Limitations:

a. List any pollutant you know or have reason to believe is discharged or may be discharged from the IWTS, or other operation facilities. For every pollutant you list, briefly describe the reason you believe it to be present, its approximate concentration in the discharge and any analytical data in your possession which will support your statement. Additional wastewater analysis may be required as part of this application. (Attach additional sheets if necessary):

<b>Discharge #</b>	<b>Pollutant</b>	<b>Concentration</b>	<b>Source</b>	<b>Available Data</b>

b. Are your operations such that your raw materials, processes, or products can reasonably be expected to vary so that your discharges of pollutants may during the next five years exceed three times the approximate concentrations reported in question 8a?

- Yes       No

If Yes, explain below:

\_\_\_\_\_

\_\_\_\_\_



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- Facility ID (if known) \_\_\_\_\_

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**C. Facility Information (cont.)**

c. Are you planning on adding any new processes over the next five years?

Yes       No

If Yes, explain below:

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d. Are hazardous wastes generated at your facility?

Yes       No

If Yes, explain below:

---

---

e. Are organic compounds used at your facility?

Yes       No

If Yes, explain below

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9. Biological Toxicity Testing Data:

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of the discharges within the last three years?

Yes       No

If Yes, explain below:

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**C. Facility Information (cont.)**

10. Contract Analysis Information:

Were any of the analyses or testing reported in questions 8 or 9 performed by a contract laboratory or consulting firm?

Yes                       No

If Yes, please provide the laboratory information requested below:

\_\_\_\_\_  
Name of Laboratory

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/town                                      State                                      Zip code

\_\_\_\_\_  
Telephone                                      email

**D. Certification**

"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 submitted 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. I will be responsible for publication of public notice of the applicable permit proceedings identified under 314 CMR 2.06(1)(a) through (d)."

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Name of Preparer

\_\_\_\_\_  
Title of Preparer

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
email