Massachusetts Department of Environmental Protection
Bureau of Resource Protection • Watershed Permitting Program
Surface Water Discharge (NPDES) • Non-Industrial Wastewaters

BRP WM 05 Permit and Plan Approval for Type II Discharge (Non-Industrial)

Instructions and Supporting Materials

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Introduction

MassDEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the MassDEP Web site at 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.

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BRP WM 05
Treatment Facility Rating Worksheet

1. What is the purpose of NPDES Permits?

These permits protect public health and the environment by controlling pollutant discharges to surface waters and ensuring that the water quality criteria and receiving water use prescribed in the Massachusetts Surface Water Quality Standards (314 CMR 4.00) are met.

2. Who must apply?

In general, NPDES permits must be applied for and obtained by:

- Any agency or political subdivision of the Commonwealth
- Any federal agency
- Any public or private:
  - corporation
  - authority
  - individual
  - partnership
  - association, or
  - other entity

proposing to discharge non-industrial wastewater from a point source to surface waters.

Any facility without remediation discharges and outside the SIC Codes listed below must apply.

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

Any facility whose SIC Codes is listed above proposing to discharge industrial wastewater from a point source to surface waters must apply for NPDES permits listed under BWP IW 16, 18, 26, 27, 35, 36, or 37.

Form BRP WM 05 is designed to collect general information that applies to Type II discharges to surface waters. In addition, public wastewater treatment facilities must fill out Form BRP WM 2A, “Application for Permit to Discharge Municipal Wastewater,” and all other facilities must fill out Federal Form 2C, 2D, 2E, or 2F, whichever is appropriate. Forms 2C, 2D, 2E and 2F may be obtained by calling the EPA at 617-565-3529.

3. What other requirements should be considered?

- In addition to filing the appropriate application forms with MassDEP, an applicant must contact the U.S. EPA to obtain and file the appropriate federal NPDES permit application forms. It is not necessary to submit engineering designs or final plans to EPA for approval.

- Application for operator certification and facility rating in accordance with 257 CMR 2.00 is required for operation of treatment works.

- Permits of this type may require MEPA review. Please carefully examine the MEPA Regulations (301 CMR 11.00) to determine if your project exceeds the MEPA review thresholds. For more information contact the MEPA Unit of the Executive Office of Environmental Affairs at 617-727-5830.

MassDEP cannot begin technical review of the permit application until the MEPA process has been completed, unless otherwise agreed to in writing. Copies of MEPA filings (with reference to any applicable Transmittal numbers) should be sent to the appropriate program offices in Boston and the MassDEP MEPA Coordinator in the region where the facility is located.

Find your region: http://www.mass.gov/eea/agencies/massdep/about/contacts/

4. What is the application fee?

BRP WM 05 Type II Discharge $ 6,785

5. What is the Primary Permit Location?

Completed permit applications should be submitted to:

Department of Environmental Protection
Surface Water Discharge Program
1 Winter Street, 5th Floor
Boston, MA 02108

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

The timelines are available on the MassDEP Website:
http://www.mass.gov/eea/agencies/massdep/service/approvals/timely-action-fees-and-payments.html

Because NPDES permits are issued jointly by the state and federal governments, MassDEP cannot begin its technical review until EPA issues a draft permit.

7. What are annual compliance fees?

Current fees are available on the MassDEP Website:
http://www.mass.gov/eea/agencies/massdep/service/approvals/timely-action-fees-and-payments.html

Discharges from the following entities are exempt from Annual Compliance Fees:

- Massachusetts state agencies.
- Massachusetts cities, towns, counties, districts.
- Municipal housing authorities, and federally recognized Indian tribe housing authorities.

8. How long is the notice of intent in effect?

Federal and state regulations each stipulate that NPDES permits be issued for a period, "not to exceed 5 years". Permits may be issued for less than 5 years.

9. How can I avoid the most common mistakes made in submitting an application?

- Use appropriate state and federal forms. The state forms are included in the Forms Section to this application package.
- Answer all application questions. Follow the accompanying instructions carefully when answering.
- Submit complete and thorough engineering reports, plans and specifications. Make sure they are stamped and signed by a Massachusetts Registered Professional Engineer.
- Make sure the application is signed and dated in ink by a legally responsible official.
- Submit a copy of the MassDEP Transmittal Form and the completed application forms to the MassDEP Surface Water Discharge Program in Boston.
- Submit fee and a copy of the MassDEP Transmittal Form http://www.mass.gov/eea/agencies/massdep/service/approvals/transmittal-form-for-payment.html to:

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

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

These regulations include, but are not limited to:

- Surface Water Discharge Regulations, 314 CMR 3.00.
- Surface Water Quality Standards, 314 CMR 4.00.
- Wastewater Treatment Plant Operators, 257 CMR 2.00.
- 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 Bookstore
436 Dwight Street
Springfield, MA 01103
413-784-1376

Massachusetts Department of Environmental Protection
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BRP WM 05
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 systems described here are the only method of determining categories for Type I and Type II facilities.

Rating system for proposed discharges

"Unit Operations" is defined as processes used to treat any surface water discharge. They are listed in bold-faced type on the next page. The rating system is based on the number of specific 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. This would be category BRP WM 05.

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. This would be category BRP WM 06.

Example:

Unit Operation	**Points**
Equalization	2
Sludge Blending/Thickening	5
Chrome Reduction	3
Flotation	5
4 Unit Operations	**15 Points**

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.

Unit Operation	**Points**
Absorption/Adsorption	
Carbon ……	5
Ion Exchange ……	5
Biological Wastewater Treatment	
Activated Sludge ……	6
Contact Beds (anaerobic) ……	5
RBC ……	5
Sand Filters ……	4
Trickling Filters ……..	4
Chemical Precipitation (reaction vessel) Clarification ……	5
Chrome Reduction ……	5

BRP WM 05
Treatment Facility Rating Worksheet

Cyanide Destruction ……..	5
Detention Basins, Swales, Infiltration Trenches ……	2
Disinfection ……..	5
Equalization ……	2
Evaporation	
Single ……..	2
Multiple ……	5
Filtration/Sludge Dewatering	
Cartridge ……	3
Centrifuge ……	8
Filter Press ……..	8
Membrane ……...	5
Vacuum Filter ……	10
Flocculation/Mixing/Coagulation ……	5
Flotation ……	5
Neutralization/pH Adjust	
Single ……..	3
Multiple ……	5
Oil/Water Separation	
Gravity Fed ……	2
Baffled ……	5
Settling	
With Manual Sludge Removal ……	3
With Mechanical Sludge Removal ……..	5
Sludge Blending/Thickening ……...	5
Sludge Drying (mechanical dryers) ……...	5

Note: This worksheet is used to determine permit application fees only, not certification grades for wastewater treatment.

Massachusetts Department of Environmental Protection
Bureau of Resource Protection – Watershed Permitting Program

BRP WM 05 – Permit and Plan Approval for Type II Discharge (Non-Industrial)

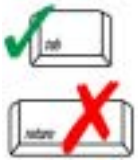
Application for Individual Discharge Permit to Surface Waters of the Commonwealth

Transmittal Number

Date Received

A. Facility Information

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Name, address, and telephone number of facility producing the discharge

Name

Street address

City | State | Zip Code

Telephone number (including extension) | E-mail address (optional)

Billing address (if different)

Street/PO Box

City | State | Zip Code

Discharge Site

Street address

City | State | Zip Code

Ownership

- ☐ Individual
- ☐ Corporation
- ☐ Partnership
- ☐ Other

If other, please specify:

Status

- ☐ Private
- ☐ Public
- ☐ Other

If other, please specify:

2. Contact Person

Name | Title

Telephone Number (including extension)

3. Facility Status: ☐ Existing ☐ Proposed

A. Facility Information (continued)

4. 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

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

   ☐ Yes ☐ No

   If yes, has a filing been made?

   ☐ Yes ☐ No

6. Application Forms Needed

   Answer questions A through F to determine which additional application forms you need to submit to the Department of Environmental Protection. If you answer "Yes" to any question, you must submit this form and the supplemental form listed in the parentheses following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "No" to each question, you need not submit any of these forms.

   A. Is this facility an existing or proposed publicly owned treatment works which is a discharge to surface waters of the Commonwealth? (Form BRP WM 2A)

      ☐ Yes ☐ No ☐ Form Attached?

   B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to the surface waters of the Commonwealth? (Federal Form 2B)

      ☐ Yes ☐ No ☐ Form Attached?

   C. Does or will this facility result in a discharge to surface waters of the Commonwealth other than those described in A or B? (Federal Form 2C)

      ☐ Yes ☐ No ☐ Form Attached?

   D. Is this facility an existing or proposed treatment works which results in a discharge only of treated sewage to the land surface or to the ground waters of the Commonwealth? (Form BRP WP06)

      ☐ Yes ☐ No ☐ Form Attached?

   E. Does or will this facility include a concentrated animal feeding operation or aquatic animal production facility that results in a discharge to the land surface or ground waters of the Commonwealth? (Form BRP WP08)

      ☐ Yes ☐ No ☐ Form Attached?

   F. Does or will these facility result in a discharge to the land surface or ground waters of the Commonwealth other than those described in D or E above? (Form BRP WP10)

      ☐ Yes ☐ No ☐ Form Attached?

A. Facility Information (continued)

7. Is this a RCRA facility as defined in 314 CMR 8.03? ☐ Yes ☐ No
   If yes, submit the information on Form HW contained in 310 CMR 8.20 in accordance with the provisions of 314 CMR 8.08.

8. 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.

SIC Code	Specify
A.	
B.	
C.	
D.	

Note: No application will be accepted without the SIC code number.

9. Facility Operator

Name

Telephone Number (including extension) | E-mail address (optional)

Mailing Address

City | State | Zip Code

Ownership

☐ Individual
☐ Partnership
☐ Corporation
☐ Other

If other, please specify:

Status

☐ Private
☐ Public
☐ Other

If other, please specify:

A. Facility Information (continued)

10. Location of Facility

    A. Is this facility located on Indian Lands? ☐ Yes ☐ No

    B. Provide a topographic map (USGS 1:25,000 scale 7 ½ Minute Topographic Series, quadrangle sheet) or maps of the area extending at least to one mile beyond the property boundaries of the facility that clearly show the following:

    - The legal boundaries of the facility;
    - The location and serial number of each of your existing and proposed intake and discharge structures;
    - All hazardous waste management facilities;
    - 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. 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) maps corresponding to the location.
    - On each map, include the map scale, meridian arrow showing north, and latitude and longitude to the nearest whole second. On all maps of rivers, show the direction of the current, and in tidal waters, show the directions of the ebb and flow tides. Use a 7 ½ minute series map published by the U.S. Geologic Survey.

11. Nature of Business

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

    _____

    _____

12. Water Supply Data

    A. List sources of water supply and annual water consumption for the past 5 years (last year first).

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

    B. Please show the location of your water sources on the topographic map described in paragraph 10B.

B. 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

Date Signed

Printed name of applicant

Title

Telephone Number (including extension)

Name of Preparer

Title

Telephone Number (including extension)