



BRP WP 62

BRPWP 62a Determination of Acceptability for the Use of Septic System Additives or Soil Absorption System Conditioners/ Restoratives

BRPWP 62b Approval of Septic Tank Effluent Tee Filters

BRPWP 62c Approval of Alternative Devices for Grease Removal

A. General Information

1. Type of approval:

BRPWP 62a: Septic System Additive or Soil Absorption System Conditioners/Restorative

BRPWP62b: Septic Tank Effluent Tee Filter

BRPWP62c: Grease Removal Device

2. Applicant Information:

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



Legally Responsible Official	Company Name
Organizational Structure, i.e. corporation, partnership, etc.	If corporation, state where incorporated
Street/PO Box	City/town
State	Zip code
e-mail address	Telephone Number
	Fax Number

3. Contact Information:

Contact person	Company name
Street Address/PO Box	City/town
State	Zip code
e-mail address	Telephone Number
	Fax Number

B. Product Seeking DEP Approval

1. Name: _____
Name of Additive, Conditioner/Restorative, Septic Tank Effluent Tee Filter, or Grease Removal Device

On the following pages:

Complete questions 2 – 9 only if seeking approval for additives, conditioners or restoratives, then skip to part C Certification.

Complete questions 10 – 15 only if seeking approval for effluent tee filters, then skip to part C Certification.

Complete questions 16 - 21 only if seeking approval for grease removal devices, then skip to part C Certification.



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B. Product Seeking DEP Approval (continued)

I. For additives, conditioners, or restoratives

2. Additive/Conditioner/Restorative – physical, chemical, biological agents:

For additives, conditioners/restoratives list all physical, chemical, biological, or other agents which make up the additive or conditioner/restorative and provide toxicity information for each component (provide MSDS if possible).

Check if MSDS is provided

3. Additive/Conditioner/Restorative – Anticipated Use:

Describe the anticipated use of the additive or conditioner/restorative in system. Include in the description where and how the product is to be applied, the frequency of applications, who will perform the applications, and the amount/concentration of product per application (attach documents as needed).

4. Additive/Conditioner/Restorative – Chemical action:

Describe how the additive, conditioner or restorative works to benefit the system (attach documents as needed).



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B. Product Seeking DEP Approval (continued)

5. Additive/Conditioner/Restorative – Reactions and Byproducts:

List all known reactions and byproducts produced by the use of the additive or conditioner/restorative including the product's effect on bacteria (attach documents as needed).

6. Additive/Conditioner/Restorative – Projected Limitations:

Provide any known or projected limitations on the use of the additive, conditioner, or restorative (attach documents as needed).

7. Additive/Conditioner/Restorative – Evidence of Performance:

Provide evidence which demonstrates that use of the additive or conditioner/restorative as proposed in Question #3, will not result in violations of 314 CMR 4.00, Surface Water Quality Standards, and/or 314 CMR 5.00, which includes Ground Water Quality Standards.

8. Additive/Conditioner/Restorative – Studies:

Provide any studies done on the use of the additive or conditioner/restorative to support the responses provided above.



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B. Product Seeking DEP Approval (continued)

9. Additive/Conditioner/Restorative – Approvals or Acceptances:

Attach any formal approvals or other acceptances from other jurisdictions for use of the additive or conditioner/restorative in on-site systems. Attach copies of any disapprovals or denials.

II. For effluent tee filters

10. Effluent Tee Filter, Anticipated Use:

For effluent tee filters, describe their anticipated use in a system. Include in the description the different models of effluent tee filters for which approval is requested, where and how the effluent tee filter is to be installed and who would perform installation.

11. Effluent Tee Filter – Operation:

Describe how the effluent tee filter works to benefit the system (attach documents as needed).

12. Effluent Tee Filter – Limitations:

Provide any known or projected limitations on the use of the effluent tee filter (attach documents as needed).



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B. Product Seeking DEP Approval (continued)

13. Effluent Tee Filter Studies:

Provide any studies done on the use of the effluent tee filter to support the responses provided above and to demonstrate the product's safety (lack of harm) to the system components and functioning. Include monitoring reports/data from systems in use (if available).

Is testing or performance data available for the filter? Yes No

If yes, indicate source of data and attach copies

Other states Independent third parties Other

14. Effluent Tee Filter Approvals/Denials

Has your effluent tee filter been approved or denied in other states?

Yes - Please attach copies of state approval or denial letters No

15. Effluent Tee Filter Operation & Maintenance Requirements – Attach appropriate plans and manuals. Use additional sheets if necessary.

III. For grease removal devices

16. Grease removal devices- Anticipated Use

For grease removal devices, describe their anticipated use in a system. Include in the description the different models of grease removal devices for which approval is requested, where and how the grease removal device is to be installed and who would perform installation.

17. Grease removal device – Operation

Describe how the Grease removal device works to benefit the system (attach documents as needed).



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B. Product Seeking DEP Approval (continued)

18. Grease removal device – Limitations

Provide any known or projected limitations on the use of the effluent tee filter (attach documents as needed).

19. Grease removal device - Studies

Provide any studies done on the use of the Grease removal device to support the responses provided above and to demonstrate the product's safety (lack of harm) to the system components and functioning.

Include monitoring reports/data from systems in use (if available).

Is testing or performance data available for the grease removal device? Yes No

If yes, indicate source of data and attach copies.

Other states Independent third parties Other

20. Grease Removal Device- Approvals/Denials

Has your grease removal device been approved or denied in other states?

Yes - Please attach copies of state approval or denial letters No

21. Grease Removal Device - Operation & Maintenance Requirements – Attach appropriate plans and manuals. Use additional sheets if necessary.

C. Certification

"I certify under penalty of law that this document and all attachments, to the best of my knowledge and belief, are 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."

Signature of Applicant

Date

Name of Applicant

Name of Preparer