



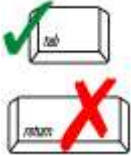
**Massachusetts Department of Environmental Protection**  
**Environmental Results Program**  
**Photo Processor Compliance Certification for 20**

Facility ID Number \_\_\_\_\_

**Complete Year  
Field Above**

**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.



Facility Name _____		Facility SIC Code _____	Facility ID Number _____
Facility Street Address _____			
City _____	MA State _____	Zip Code _____	
Phone Number _____	Fax Number _____	Federal Employer Identification Number – FEIN/TIN* _____	
Contact Person Name _____		Title _____	Phone Number _____
Contact Person Email Address _____			

- This is a **New Facility** since last year's filing deadline of September 15. \_\_\_\_\_ Date Opened (mm/dd/yyyy)
- This is a **Pre-Existing Facility** under **New Ownership**. \_\_\_\_\_ New Owner as of Date (mm/dd/yyyy)
- \*I certify that the FEIN/TIN above is not a Social Security number.

*If you don't have a TIN or have a question about this checkbox, email: [baw.edep@state.ma.us](mailto:baw.edep@state.ma.us)*

**DEP USE ONLY**

Date Received  
(mm/dd/yyyy)

**B. Compliance Questions**

Answer all questions, unless you are directed to skip a question. Do not answer questions that you are directed to skip.

- Section I applies to all photo processors.
- **Section II has been deleted.**
- Section III applies to all photo processors that use a Publicly Owned Treatment Works (POTW) other than MWRA.
- Section IV applies to all photo processors that haul or ship hazardous photo processing wastewater to a treatment, recycling, or disposal facility.
- The Certification Statement (Part C) applies to all photo processors.

**Section I: Questions For All Photo Processors**

- Do you discharge photo processing wastewater to a septic system, leachfield, or cesspool? *(Refer to Section 4.0 [4.0b] in the WORKBOOK)*

yes - you must cease your discharging and submit a *Return to Compliance Plan*.

no
- Do you discharge photo processing wastewater to the ground or surface? *(Refer to Section 4.0 [4.0b] in the WORKBOOK)*

yes - you must cease your discharging and submit a *Return to Compliance Plan*.

no
- Did you have any spills or releases that were required to be reported to the DEP? *(Refer to Appendix K [8.0 - 8.3] in the WORKBOOK)*

yes - submit a *Spill or Release Report Summary*

no



**B. Compliance Information (cont.)**

**Section II: Questions #4 to 6 have been deleted**

Note: Photo processors discharging photo processing wastewater into a sewer in the MWRA service area do not have to submit an ERP Compliance Certification form to DEP. However; if photo processors haul / ship untreated photo processing wastewater to Treatment, Storage, Disposal facility (TSDF), then they must continue to certify to DEP. Excluded from submitting an ERP Certification are photo processors who haul / ship their silver solution from a cartridge system or their filter column from the small-scale precipitation system.

- Do you haul or ship hazardous photo processing wastewater to a treatment, recycling or disposal facility.
- yes - skip to section IV on page 6
- no

**Section III: Questions For Photo Processors that Use Publicly Owned Treatment Works (POTW) outside of the MWRA Service Area**

7. Fill in the number of:

7a. Photo processing machines typically used at your facility. \_\_\_\_\_  
 Number of Machines

7b. Hours per typical week your facility operates these machines. \_\_\_\_\_  
 Number of Hours Per Week

8. What is the average volume discharged from your photo processing operation, including rinse water? (*Refer to Appendix L in the WORKBOOK*) \_\_\_\_\_  
 Gallons Per Day

- 8a. How did you determine the flow?
- water supply meter readings
- wastewater flow meter readings
- manufacturer's processing specifications
- estimated (describe method)

\_\_\_\_\_  
 Describe Method

9. Are you in compliance with the 2 parts per million silver discharge limit set by DEP for photo processing wastewater? (*Refer to Section 3.0: 3.5: [3.5a, 3.5b] in the WORKBOOK*)
- yes
- no - submit a *Return to Compliance Plan*
- Note: You must sample your wastewater before answering this question. Refer to section 3.5 in the Workbook)*



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## B. Compliance Information (cont.)

10. Do you have a permit from a local sewer authority with a silver discharge limit of 2 parts per million or less? (*Refer to Section 3.1: [3.1b] in the WORKBOOK*)  yes  
 no - skip to question 11
- 10a. Are you in compliance with the terms of that permit?  yes  
 no - you must meet the requirements of your local permit and submit a *Return to Compliance Plan*
- 10b. Fill in the permit expiration date: \_\_\_\_\_  
mm/dd/yyyy
11. Are you in compliance with the industrial wastewater requirements defined in the workbook for the operation and maintenance of your silver recovery system? (*Refer to Section 3.4: [3.4a] in the WORKBOOK*)  yes  
 no - submit a *Return to Compliance Plan*
12. Are you subject to the requirements of the Massachusetts Board of Certified Wastewater Treatment Plant Operators? (*Answer **No** if you are using cartridge system or small scale precipitation*)  yes  
 no – skip to question 13
- 12a. If Yes, are you in compliance with the Board's requirements? (*Refer to Section 3.4: [3.4b] in the WORKBOOK*)  yes  
 no - submit a *Return to Compliance Plan*
13. Is your photo processing operation directly piped to the silver recovery system? (*Refer to Section 5.3 in the WORKBOOK*)  yes - skip to question 14  
 no - answer 13a & 13b
- 13a. Are you in compliance with the requirements for storing untreated wastewater in appropriate tanks and containers as defined in the workbook? (*Refer to Section 5.3: [5.3a - 5.3g] in the WORKBOOK*)  yes  
 no - submit a *Return to Compliance Plan*
- 13b. How many gallons of silver bearing wastewater did you treat through your silver recovery system? (*Refer to Appendix L in the WORKBOOK*) \_\_\_\_\_  
Gallons Per Year



**B. Compliance Information (cont.)**

14. Do you haul / ship treated photo processing wastewater to a POTW?  yes  
 no - skip to question 15
- 14a. If Yes, are you in compliance with the requirements for storing non-hazardous (i.e. treated) photo processing wastewater as defined in the workbook? (*Refer to Sections 5.2: [5.2a - 5.2e] & 5.4: [5.4a - 5.4g] in the WORKBOOK*)  yes  
 no - submit a *Return to Compliance Plan*

**Complete a separate log for each silver recovery system.** A silver recovery “system” may be composed of one or more units such as cartridge and electrolytic units used in tandem. Fill in the maintenance record that applies to the types of silver recovery system used at your facility. If the type of silver recovery system you use is not listed below, complete sections 15a, 15b, and 15c only.

15. Complete the following Maintenance and Sampling Log Summary. (*Refer to Sections 3.5, 3.6 & Appendix D in the WORKBOOK*)

15a. Total capacity of the silver recovery system: \_\_\_\_\_  
 Gallons Per Day

15b. Average daily flow: \_\_\_\_\_  
 Gallons Per Day

15c. Yearly sampling and analysis results for the 12-month period ending the day you completed this certification

- Cartridge silver recovery systems, electrolytic silver recovery systems and small-scale precipitation systems must be sampled at least once per year.
- All other systems must be sampled monthly.

Sample Date	Silver Concentration
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)
_____ mm/dd/yyyy	_____ mg/l (Parts Per Million)



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**B. Compliance Information (cont.)**

15d. Maintenance record for silver recovery unit or system for past year.

**Cartridge Unit or System**

Dates you replaced cartridges:

Number of Cartridges In Series \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

**Electrolytic silver recovery unit**

Cleaning and service dates:

mm/dd/yyyy \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

mm/dd/yyyy \_\_\_\_\_

**Small-scale precipitation system**

How many times over past year did you change the filter cartridge?

Number of Changes \_\_\_\_\_

List the chemical names and the amounts used for precipitation:

Chemical Name \_\_\_\_\_

Gallons Per Year \_\_\_\_\_

Chemical Name \_\_\_\_\_

Gallons Per Year \_\_\_\_\_

Chemical Name \_\_\_\_\_

Gallons Per Year \_\_\_\_\_



**B. Compliance Information (cont.)**

Do you haul or ship untreated photo processing wastewater to a treatment, recycling, or disposal facility?

yes - fill out Section IV below

no - skip to the Certification Statement on the next page

**Section IV: Questions For Photo Processors that Haul or Ship untreated Photo Processing Wastewater to a Treatment, Recycling or Disposal Facility** (Do not answer this section if you ship silver solution in the cartridge system or in the filter column from the small scale precipitation only)

16. Are you in compliance with the standards for handling hazardous waste described in the workbook? (Refer to Section 6.0: [6.1 - 6.4] in the WORKBOOK)

yes

no - submit a Return to Compliance Plan

Workbook Appendix E contains a formula for converting pounds into gallons.

17. How much hazardous waste did you haul or ship from your facility during the previous calendar year? (Refer to Appendix E in the WORKBOOK)

\_\_\_\_\_ Gallons

17a. Please provide the following information describing the destination of your waste:

\_\_\_\_\_ Name

\_\_\_\_\_ Street Address

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

\_\_\_\_\_ State

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

17b. Second destination (if applicable):

\_\_\_\_\_ Name

\_\_\_\_\_ Street Address

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

\_\_\_\_\_ State

\_\_\_\_\_ Zip code

18. Do you have a hazardous waste generator ID number? (Refer to Section 6.2: [6.2a] in the WORKBOOK)

yes

no - submit a Return to Compliance Plan and go to Section C

18a. Please provide your hazardous waste generator ID number:

\_\_\_\_\_ Hazardous Waste ID Number (12 Characters)



Massachusetts Department of Environmental Protection  
Environmental Results Program  
**Photo Processor Compliance Certification for 20**

Facility ID Number \_\_\_\_\_

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### C. Certification Statement

**Note:** Complete all required Return to Compliance Plans (RTC) and Spill or Release Report Summary forms (if any), attach to this document before signing this statement.

"I attest under the pains and penalties of perjury:

- (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement;
- (ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge, true, accurate, and complete;
- (iii) that systems to maintain compliance are in place at the facility and will be maintained for the coming year even if processes or operating procedures are changed over the course of the year; and
- (iv) that I am fully authorized to make this attestation on behalf of this facility.

I am aware that there are significant penalties including, but not limited to, possible fines and imprisonment for submitting false, inaccurate, or incomplete information."

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date (mm/dd/yyyy)

Source of Signatory Authority:

If a Corporation:

- President
- Secretary
- Treasurer
- Vice President (if authorized by corporate vote)
- Representative of the above (if authorized by corporate vote and if responsible for overall operation of the facility)

If a Partnership:

- General Partner

If a Sole Proprietorship:

- Proprietor

\_\_\_\_\_  
Signature