

*Refer to Appropriate Completeness Checklist and Instructions. Provide All Applicable Information.
Please Print or Type. (Attach additional sheets if necessary)*

SUPPLEMENTAL APPLICATION FORM TO NJPDES-1 FOR INDUSTRIAL NJPDES/DSW PERMITS

1. FACILITY NAME:			2. NJPDES NO. (NEW APPLICANTS LEAVE BLANK) NJ		
3. THE PERMIT APPLICATION SHALL INCLUDE:			A. FACILITY DIAGRAM B. LINE DRAWING C. USGS MAP		
4. OUTFALL LOCATION					
For each outfall, list the latitude, longitude and the name of the receiving water.					
OUTFALL NUMBER	LATITUDE (deg, min, sec)	LONGITUDE (deg, min, sec)	RECEIVING WATER (name)	USEPA REACH No.	WATERSHED MANAGEMENT AREA
PROPOSED DISCHARGE DATE:				For Department Use Only	
5. FLOWS, POLLUTANT SOURCES, AND TREATMENT TECHNOLOGIES					
OUTFALL NUMBER (DSN)	OPERATION CONTRIBUTING FLOW		TREATMENT TECHNOLOGIES		
	NAME OF OPERATION OR PROCESS (LIST)	AVERAGE FLOW (INCLUDE UNITS)	DESCRIPTION	CODES FROM TABLE 1	

FACILITY NAME:

6. INTERMITTENT OR SEASONAL DISCHARGES

Except for stormwater runoff, leaks, or spills, are any of the discharge(s) described in Item 5 intermittent or seasonal?

YES (complete the following table) NO (go to Item 7)

OUTFALL NUMBER (DSN)	FREQUENCY		FLOW				DURATION IN DAYS
	DAYS PER WEEK (SPECIFY AVERAGE)	MONTHS PER YEAR (SPECIFY AVERAGE)	FLOW RATE (in mgd)		TOTAL VOLUME (specify units)		
			monthly average	daily maximum	monthly average	daily maximum	

7. PRODUCTION BASED EFFLUENT STANDARDS

A. Does an effluent guideline promulgated by USEPA under the Clean Water Act apply to any discharge this application is made for?

YES (complete 7B) NO (go to Item 8)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

YES (complete 7C) NO (go to Item 8)

C. If you answered "yes" to Item 7B, list the quantities which represent an actual measurement or estimate of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

YEAR	QUANTITY PER DAY	UNITS OF MEASURES	OPERATION, PRODUCT, MATERIAL, ETC. (SPECIFY)	OUTFALL NUMBER

8. ENFORCEMENT/CORRECTIVE ACTIONS

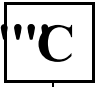
Identify each AO, ACO, JCO, NOV, COMP (if known to the applicant), or other (OT) corrective or enforcement action(s) required by NJDEP, USEPA or any other governmental agency(ies), and provide a brief summary of the action.

DATE	ACTION	AGENCY	SUMMARY OF REQUIRED ACTION

9. IMPROVEMENTS

Complete this table if you are required by federal, state or local authority to meet any implementation schedule for construction, upgrading or operation of the wastewater treatment equipment or practices, or any other environmental programs which may affect the discharges described in this application (i.e., permit conditions, administrative orders, etc.).

IDENTIFICATION OF CONDITIONS, AGREEMENTS, ETC.	AFFECTED OUTFALLS		DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE REQUIRED	
	DSN	SOURCES		REQUIRED	PROJECTED



FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10A. EFFLUENT DATA – PART A

POLLUTANT	EFFLUENT							Intake (Optional)		
	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
	Conc.	loading	conc.	loading		conc.	loading	conc.	loading	
Biochemical Oxygen Demand (BOD ₅)										
Chemical Oxygen Demand (COD)										
Total Organic Carbon (TOC)										
Total Suspended Solids (TSS)										
Total Dissolved Solids (TDS)										
Ammonia (as N)										
UNITS AS INDICATED										
Flow (specify units)	Daily Max.		Monthly Avg.							
Temperature (<i>winter</i>)	Daily Max.		Monthly Avg.			°C				
Temperature (<i>summer</i>)	Daily Max.		Monthly Avg.			°C				
pH	minimum	maximum				STANDARD UNITS		minimum	maximum	

10B. EFFLUENT DATA – PART B

POLLUTANT (AND CAS NUMBER WHERE AVAILABLE)	MARK "X"		EFFLUENT							INTAKE (Optional)		
	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
			conc.	loading	conc.	loading		conc.	loading	conc.	loading	

CONVENTIONAL and NON-CONVENTIONAL POLLUTANTS

Bromide (24959-67-9)												
Chlorine, Total Residual												
Color, (specify units)												
Fecal Coliform												
Fluoride (16984-48-8)												
Nitrate-Nitrite (as N)												

FACILITY NAME: _____ OUTFALL NUMBER (DSN): _____

10B. EFFLUENT DATA – PART B (continued)

POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"		EFFLUENT						INTAKE (Optional)			
	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
			conc.	loading	conc.	loading		conc.	loading	conc.	loading	
Nitrogen, Total Organic (as N)												
<input type="checkbox"/> Oil & Grease or <input type="checkbox"/> Pet. Hydrocarbons												
Phosphorus (as P), Total (7723-14-0)												
Alpha, Total												
Beta, Total												
Radium, Total												
Radium 226, Total												
Surfactants												
Sulfide (as S)												
Sulfite (as SO ₃) (14265-45-3)												
Sulfate (as SO ₄) (14808-79-8)												
Aluminum, Total (7429-90-5)												
Barium, Total (7440-39-3)												
Boron, Total (7440-42-8)												
Cobalt, Total (7440-48-4)												
Iron, Total (7439-89-6)												
Magnesium, Total (7439-95-4)												
Molybdenum, Total (7439-98-7)												
Manganese, Total(7439-96-5)												
Tin, Total (7440-31-5)												
Titanium, Total (7440-32-6)												



FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C

If you do not analyze a sample for certain Item 10C pollutants because you qualify as a “Small Business” (see instructions for details), check this box and attach sales data for the most recent three years.

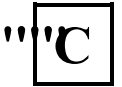
POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)			
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
				conc.	loading	conc.	loading		conc.	loading	conc.	loading	

OTHER TOXIC POLLUTANTS (METALS and CYANIDE) and TOTAL PHENOLS

Antimony, Total (7440-36-0)													
Arsenic, Total (7440-38-2)													
Beryllium, Total (7440-41-7)													
Cadmium, Total (7440-43-9)													
Chromium, Total (7440-47-3)													
Copper, Total (7550-50-8)													
Lead, Total (7439-92-1)													
Mercury, Total (7439-97-6)													
Nickel, Total (7440-02-0)													
Selenium, Total (7782-49-2)													
Silver, Total (7440-22-4)													
Thallium, Total (7440-28-0)													
Zinc, Total (7440-66-6)													
Cyanide, Total (57-12-5)													
Phenols, Total													

DIOXIN

2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)													
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FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C (continued)

POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)			
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
				conc.	loading	conc.	loading		conc.	loading	conc.	loading	
ORGANIC TOXIC POLLUTANTS – VOLATILES													
Acrolein (107-02-8)													
Acrylonitrile (107-13-1)													
Benzene (71-43-2)													
Bromoform (75-25-2)													
Carbon Tetrachloride (56-23-5)													
Chlorobenzene (108-90-7)													
Chlorodibromomethane (124-48-1)													
Chloroethane (75-00-3)													
2-Chloro-ethyl-vinyl Ether (110-75-8)													
Chloroform (67-66-3)													
Dichlorobromomethane (75-27-4)													
1,1-Dichloroethane (75-34-3)													
1,2-Dichloroethane (107-06-2)													
1,1-Dichloroethylene (75-35-4)													
1,2-Dichloropropane (78-87-5)													
1,3-Dichloropropylene (542-75-6)													
Ethylbenzene (100-41-4)													
Methyl Bromide (74-83-9)													
Methyl Chloride (74-87-4)													

FORM C
28B2



FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C (continued)

POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)			
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
				conc.	loading	conc.	loading		conc.	loading	conc.	loading	

ORGANIC TOXIC POLLUTANTS – VOLATILES (continued)

Methylene Chloride ((75-09-2)													
1,1,2,2-Tetrachloroethane (79-34-5)													
Tetrachloroethylene (127-18-4)													
Toluene (108-88-3)													
1,2-Transdichloroethylene (156-60-5)													
1,1,1-Trichloroethane (71-55-6)													
1,1,2-Trichloroethane (79-00-5)													
Trichloroethylene (79-01-6)													
Vinyl Chloride (75-01-4)													

ORGANIC TOXIC POLLUTANTS – ACID COMPOUNDS

2-Chlorophenol (95-57-8)													
2,4-Dichlorophenol (120-83-2)													
2,4-Dimethylphenol (105-67-9)													
4,6-Dinitro-O-Cresol (534-52-1)													
2,4-Dinitrophenol (51-28-5)													
2-Nitrophenol (88-75-5)													
4-Nitrophenol (100-02-7)													
P-Chloro-M-Cresol (59-50-7)													
Pentachlorophenol (87-86-5)													
Phenol (108-95-2)													
2,4,6-Trichlorophenol (88-06-2)													

FORM C
28B2



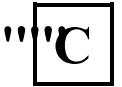
FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C (continued)

POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)			
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
				conc.	loading	conc.	loading		conc.	loading	conc.	loading	

ORGANIC TOXIC POLLUTANTS – BASE/NEUTRAL COMPOUNDS

Acenaphthene (83-32-9)													
Acenaphthylene (208-96-8)													
Anthracene (120-12-7)													
Benzidine (92-87-5)													
Benzo (a) Anthracene (56-55-3)													
Benzo (a) Pyrene (50-32-8)													
3,4-Benzofluoranthene (205-99-2)													
Benzo (ghi) Perylene (191-24-2)													
Benzo (k) Fluoranthene (207-08-9)													
Bis (2-Chloroethoxy) Methane (111-91-1)													
Bis (2-Chloroethyl) Ether (111-44-4)													
Bis (2-Chloroisopropyl) Ether (102-60-1)													
Bis (2-Ethylhexyl) Phthalate (117-81-7)													
4-Bromophenyl Phenyl Ether (101-55-3)													
Butyl Benzyl Phthalate (85-68-7)													
2-Chloronaphthalene (91-58-7)													
4-Chlorophenyl Phenyl Ether (7005-72-3)													
Chrysene (218-01-9)													
Dibenzo (a,h) Anthracene (53-70-3)													



FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C (continued)

POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)			
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
				conc.	loading	conc.	loading		conc.	loading	conc.	loading	
ORGANIC TOXIC POLLUTANTS – BASE/NEUTRAL COMPOUNDS (continued)													
1,2-Dichlorobenzene (95-50-1)													
1,3-Dichlorobenzene (541-73-1)													
1,4-Dichlorobenzene (106-46-7)													
3,3 -Dichlorobenzidine (91-94-1)													
Diethyl Phthalate (84-66-2)													
Dimethyl Phthalate (131-11-3)													
Di-N-Butyl Phthalate (84-74-2)													
2,4-Dinitrotoluene (121-14-2)													
2,6-Dinitrotoluene (606-20-2)													
Di-N-Octyl Phthalate (117-84-0)													
1,2-Diphenylhydrazine (122-66-7)													
Fluoranthene (206-44-0)													
Fluorene (86-73-7)													
Hexachlorobenzene (118-74-1)													
Hexachlorobutadiene (87-68-3)													
Hexachlorocyclopentadiene (77-47-4)													
Hexachloroethane ((67-72-1)													
Indeno (1,2,3-cd) Pyrene (193-39-5)													
Isophorone (78-59-1)													



FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C (continued)

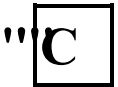
POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)			
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples
				conc.	loading	conc.	loading		conc.	loading	conc.	loading	

ORGANIC TOXIC POLLUTANTS – BASE/NEUTRAL COMPOUNDS (continued)

Naphthalene (91-20-3)													
Nitrobenzene (98-95-3)													
N-Nitrosodimethylamine (62-75-9)													
N-Nitrosodi-N-Propylamine (621-64-7)													
N-Nitrosodiphenylamine (86-30-6)													
Phenanthrene (85-01-8)													
Pyrene (129-00-0)													
1,2,4-Trichlorobenzene (120-82-1)													

ORGANIC TOXIC POLLUTANTS – PESTICIDES

Aldrin (309-00-2)													
Alpha-BHC (319-84-6)													
Beta-BHC (319-85-7)													
Gamma-BHC (58-89-9)													
Delta-BHC (319-86-8)													
Chlordane (57-74-9)													
4,4'-DDT (50-29-3)													
4,4'-DDE (72-55-9)													
4,4'-DDD (72-54-8)													
Dieldrin (60-57-1)													



FACILITY NAME: _____ **OUTFALL NUMBER (DSN):** _____

10C. EFFLUENT DATA – PART C (continued)

POLLUTANT (AND CAS NUMBER IF AVAILABLE)	MARK "X"			EFFLUENT						INTAKE (Optional)				
	testing required	believed present	believed absent	Daily Maximum		Monthly Average		# of samples	Units		Average		# of samples	
				Conc.	loading	conc.	loading		conc.	loading	conc.	loading		
ORGANIC TOXIC POLLUTANTS – PESTICIDES (continued)														
Alpha-Endosulfan (115-29-7)														
Beta-Endosulfan (115-29-7)														
Endosulfan sulfate (1031-07-8)														
Endrin (72-20-8)														
Endrin Aldehyde (7421-93-4)														
Heptachlor (76-44-8)														
Heptachlor Epoxide (1024-57-3)														
PCB-1242 (53469-21-9)														
PCB-1254 (11097-69-1)														
PCB-1221 (11104-28-2)														
PCB-1232 (11141-16-5)														
PCB-1248 (12672-29-6)														
PCB-1260 (11096-82-5)														
PCB-1016 (12674-11-2)														
Toxaphene (8001-35-2)														

FACILITY NAME:

10D. EFFLUENT DATA - PART D

Use the space below to list each of the pollutants listed in Table 3 of the instructions and each biocide, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

POLLUTANT	SOURCE

11. TOXIC POLLUTANTS USED OR MANUFACTURED

Identify below if any toxic pollutant listed in item 10C or Table 3 is a substance or a component which you currently use or manufacture as an intermediate or final product or byproduct.

12. BIOLOGICAL TOXICITY TESTING DATA

Is this application for an individual NJPDES/DSW permit?

YES (Complete Below)

NO (Go to Item 13)

DATE OF TOXICITY TEST	TYPE OF TOXICITY TEST	RESULT OF TEST

13. CERTIFIED LABORATORY

Complete the table below for all analyses reported in this application.

NAME OF CERTIFIED LAB.	TELEPHONE #	CERTIFICATION NUMBER	POLLUTANT(S)/CATEGORIES ANALYZED

14. CERTIFICATION BY THE APPLICANT

"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 purposely, knowingly, recklessly, or negligently submitting false information."

NAME (TYPE OR PRINT)	TITLE (TYPE OR PRINT)	
SIGNATURE	DATE	PHONE