

## ORANGE COUNTY SANITATION DISTRICT CLASS II WASTEWATER DISCHARGE PERMIT

### Instructions

For the Orange County Sanitation District (OC San) to properly evaluate and process a Class II Wastewater Discharge Permit the applicant must comply with all the following:

- The Permit Application Form must be filled out completely. Incomplete applications **will not** be processed. **Do not leave blanks. Please write "N/A" if the information being requested does not apply.**
- The Permit Application must be signed on page 5 by the Responsible Officer or Designated Signatory as specified on the RO/DS forms. The permit application **will not** be processed if it is not signed by the Responsible Officer/Designated Signatory.
- The permit application will not be processed without the permit application fee (\$3,150.00 July 1, 2025, through June 30, 2026). The check for the application fee must be sent directly to OC San's Accounts Receivable 18480 Bandilier Circle, Fountain Valley, CA 92708. A photocopy of the check must be submitted with the permit application to the Resource Protection Division.

### Ownership Information

A Applicant \_\_\_\_\_  
(Complete Legal Company Name)

B Mailing Address \_\_\_\_\_  
Street City State Zip Code

C Sewer Service Address \_\_\_\_\_  
Street City State Zip Code

D Phone Number (xxx ) \_\_\_\_\_ Fax Number (xxx ) \_\_\_\_\_

E Company Website (if any): http:// \_\_\_\_\_

F Is your business a  corporation?  partnership?  sole proprietorship?  Limited Liability Corporation?

L \_\_\_\_\_  
Name and Title Address

\_\_\_\_\_  
Name and Title Address

\_\_\_\_\_  
Name and Title Address

For corporations only: \_\_\_\_\_  
Year of Incorporation State of Incorporation Corporate Identification Number

G Are you the  landowner? Or  lessee? If a lessee, include the name, address, and telephone number of the property owner and/or the manager of the property: Check one:  Owner  Manager

\_\_\_\_\_  
Name Address Phone

## Process Information

Description of all manufacturing processes or service activities on the premises: (Use additional sheets if necessary.)

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Description of Product(s) or Service(s) Provided: (Use additional sheets if necessary.)  Not Applicable

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Description of Raw Materials Used: (Use additional sheets if necessary.)  Not Applicable

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Average Daily Production Rate: \_\_\_\_\_  Not

Applicable Standard Industrial Classification (N.A. I.C.S) Code: \_\_\_\_\_  Not

Applicable

Primary NAICS Code: \_\_\_\_\_ Secondary NAICS Code(s): \_\_\_\_\_

## Operations Information

Operating Schedule:

Number of shifts per work day: \_\_\_\_\_ Number of work days per week: \_\_\_\_\_

Number of working days per year: \_\_\_\_\_

Average number of employees per shift: 1st: \_\_\_\_\_ 2nd: \_\_\_\_\_ 3rd: \_\_\_\_\_ Total: \_\_\_\_\_

Production hours per shift: 1st: \_\_\_\_\_ 2nd: \_\_\_\_\_ 3rd: \_\_\_\_\_ Total: \_\_\_\_\_

Discharge hours per shift: 1st: \_\_\_\_\_ 2nd: \_\_\_\_\_ 3rd: \_\_\_\_\_ Total: \_\_\_\_\_

## Discharge Information

Do you currently have an existing Wastewater Discharge Permit issued by the Orange County Sanitation District at the sewer address indicated?  Yes  No If yes, Permit No. \_\_\_\_\_

Do you currently discharge wastewater from the sewer address indicated?  Yes  No

If the answer is "No", indicate the date you plan to commence discharge \_\_\_\_\_

Indicate approximate, anticipated, or actual industrial discharge: \_\_\_\_\_

gallons/day Provide data or calculations used to determine this rate.

Indicate source of wastewater generated:  Industrial  Commercial  Domestic/Sanitary

If industrial, answer the following:

Indicate approximate, anticipated, or actual concentration of the industrial discharge:

Biochemical Oxygen Demand (BOD): \_\_\_\_\_ mg/L Total Suspended Solids (TSS): \_\_\_\_\_ mg/L

## Information for Determining Volume of Wastewater Discharge and User Charges

Assessor Parcel Number (s) as shown on property tax bill: \_\_\_\_\_  
(Attach photocopy of property tax bill)

Water Supplier: \_\_\_\_\_

Water Account Number(s): \_\_\_\_\_

If a lessee, indicate:

- (a) percentage of property tax bill paid to landowner: \_\_\_\_\_
- (b) percentage of water bill paid to landowner: \_\_\_\_\_
- (c) square footage of leased space: \_\_\_\_\_
- (d) whether your facility is a part of a commercial/industrial complex:  Yes  No  N/A

In order to determine user charges, the actual volume of water discharged to the sewer must be calculated. For facilities that do not have effluent meters, this is done by determining the volume of incoming water as indicated by the city water meter and then applying appropriate deductions for water losses. If losses cannot be quantified, the District will apply water losses equivalent to 5% of the incoming water. It is to your advantage to determine and quantify these losses if your facility has water losses more than 5%. Please check the appropriate box below:

Apply 5% loss  Use calculated loss

If calculated loss is indicated, determine all applicable losses using the worksheet provided in **Attachment A** and summarize results in the table below. The worksheet and supporting documentation must be submitted for these losses to be applied.

Item	Average Daily Water Losses	Gal/day
I	Landscape / Irrigation losses	
II	Boiler losses for steam condensate not returned to boiler	
III	Cooling tower water evaporation	
IV	Product losses	
V	Other losses	
TOTAL LOSSES		

Indicate the water meter type(s) used to measure **incoming** water for your facility:

- City water meter only       Process meter only       Both city meter and process meter

The meter(s) checked above measure:

- Only the incoming water going to the applicant's facility.  
 The incoming water to the applicant's facility and for other companies adjacent.

Applicable losses (Please refer to the table on the previous page for the item list.)

Answer this section only if losses were calculated and itemized in the table above. If your facility has both a city meter and a process meter, indicate which losses apply to the appropriate meter by circling the items below:

City Meter:            I   II   III   IV   V

Process Meter:        I   II   III   IV   V

**Certification of Accuracy of Information**

*I have personally examined and am familiar with the information submitted in the attached document, and I hereby certify under penalty of law that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. I also authorize OC San to verify all information provided, including the water account/usage information from the water supplier, facility lease contracts, and other pertinent information.*

*I certify that upon issuance of the permit, that this firm's operation and its resultant wastewater discharge will achieve consistent compliance with OC San's Wastewater Discharge Regulations Ordinance and applicable regulations, the company will modify manufacturing equipment, limit production, limit industrial waste discharge, install wastewater pretreatment equipment, or do whatever is legally necessary to meet discharge requirements.*

Responsible Officer/Designated Signatory (as specific on attached RO/DS forms):

Name \_\_\_\_\_

Wet Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Name of the person to contact concerning information provided in this application:

Name \_\_\_\_\_

Address \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**ATTACHMENT A**  
**ITEMIZED CALCULATION OF WATER LOSSES**

Losses refer to the incoming water used that does not go to the sewer. This includes water used for landscaping/irrigation, water evaporated from cooling towers, water evaporated from boilers in which condensate is not returned to the boiler, water evaporated from heated tanks or processes, wash water going to the storm drain, water actually added to your product, or any other processes where water does not go to the sewer. Calculate the losses as shown below:

**I. LANDSCAPE/IRRIGATION LOSSES**

Square Footage of Landscaped Area (sq. ft.)	x	Loss Factor (25 gal/sq. ft./yr)	÷	Number of Days per Year (days/year)	=	Landscape Losses (gal/day)
	x	<b>25</b>	÷		=	

**II. BOILER LOSSES FROM STEAM CONDENSATE NOT RETURNED TO BOILER**

Boiler Horsepower Based on 100% of boiler rating	x	80% Factor (0.8)	x	Loss Factor (3.6 gal/hr/hp)	x	No. of Operating Hrs/Day (hours/day)	=	Boiler Losses (gal/day)
	x	<b>0.8</b>	x	<b>3.6</b>	x		=	

**III. WATER EVAPORATION LOSSES FROM COOLING TOWERS**

Tonnage (hundred design tons)	x	Loss Factor (2.5 gal/min/100 design tons)	x	No. of Operating Hrs/Day (hours/day)	x	Conversion Factor (60 min/hr)	=	Cooling Tower Losses (gal/day)
	x	<b>2.5</b>	x		x	<b>60</b>	=	

**IV. WATER INTO PRODUCT LOSS**

# Certification of Responsible Officer (RO)

This form is required

Complete and return the original hard copy with wet signature to OC San

1. \_\_\_\_\_ [Company Name (name of Permittee/Certificate Holder)]\* holds a wastewater discharge permit/certification from OC San or has applied for a wastewater discharge permit/certification from OC San. Permittee/Certificate Holder is a [corporation, partnership, or sole proprietorship].
  
2. I, \_\_\_\_\_ [Responsible Officer], am the [responsible corporate officer, general partner, or sole proprietor] of [Permittee/Certificate Holder] within the meaning of 40 C.F.R. Section 403.12(l). I am so designated on Permit/Certificate No. \_\_\_\_\_ issued to [Permittee/Certificate Holder]. Absent delegation of signature authority under 40 C.F.R. Section 403.12(l)(3), I would be responsible for signing the reports and documents required by 40 C.F.R. Sections 403.12(b), (d), (e), and (h) and in accordance with OC San's Wastewater Discharge Regulations.
  
3. I, \_\_\_\_\_ [Responsible Officer] accept the responsibility for the overall operation of the facility and/or overall responsibility for compliance with all regulatory requirements for the facility from which the wastewater discharge originates.

I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct.

Executed this \_\_\_\_\_ [day] of \_\_\_\_\_ [month] in the year \_\_\_\_\_ at

\_\_\_\_\_  
[city & state, zip code]

Name of Responsible Officer \_\_\_\_\_

Wet Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ RO Email Address \_\_\_\_\_

Company \_\_\_\_\_ Permit/Certificate No. \_\_\_\_\_

\* Name of Permittee/Certificate Holder should match the Applicant name in the Permit Application (Complete Legal **Company Name**). Do not use the name of an individual employee in the field for Permittee/Certificate Holder.

**NOTE: All correspondence including but not limited to permit, enforcement, and self-monitoring (e.g., Self-Monitoring Forms and Reminder Letters, Notices of Violations, Permit Application, etc.) shall be sent to the Responsible Officer. If the permittee seeks to change the Responsible Officer or designee on the Authorization to Sign Reports and Permit Applications, then new RO and DS forms must be submitted as appropriate.**

# **Authorization to Sign Reports and Permit Applications Designated Signatory (DS)**

Submit this form only if the Responsible Officer wants to designate a Signatory  
Complete and return the original hard copy with wet signature to OC San

1. \_\_\_\_\_ **[Company Name (name of Permittee/Certificate Holder)]\*** holds a wastewater discharge permit/certification from OC San or has applied for an industrial discharge permit/certification from OC San. Permittee/Certificate Holder is a [corporation, partnership, or sole proprietorship].

2. I, \_\_\_\_\_ **[Responsible Officer]**, am the [responsible corporate officer, general partner, or sole proprietor] of [Permittee/Certificate Holder] within the meaning of 40 C.F.R. Section 403.12(l). I am so designated on Permit/Certificate No. \_\_\_\_\_ issued to [Permittee/Certificate Holder]. Absent delegation of signature authority under 40 C.F.R. Section 403.12(l)(3), I would be responsible for signing the reports required by 40 C.F.R. Sections 403.12(b), (d), (e), and (h) and in accordance with OC San's Wastewater Discharge Regulations Ordinance.

3. I have authorized, and hereby do authorize, \_\_\_\_\_ **[individual, position title]** to sign the reports and documents required by 40 C.F.R. Sections 403.12(b), (d), (e), (h) and in accordance with OC San's Wastewater Discharge Regulations Ordinance, and as my representative. I affirm that \_\_\_\_\_ **[individual, position title]** has responsibility for overall operation of the permitted facility or has overall responsibility for environmental matters for the industrial discharger as required by 40 C.F.R. Section 403.12(l)(3).

4. I acknowledge that this Authorization does not in any way relieve me of my responsibilities or liabilities as the [responsible corporate officer, general partner, or sole proprietor] of [Permittee/Certificate Holder] under the Clean Water Act, the Federal Pretreatment Regulations, the California Porter-Cologne Water Quality Act, or OC San's Wastewater Discharge Regulations Ordinance.

I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct.

Executed this \_\_\_\_\_ [day] of \_\_\_\_\_ [month] in the year \_\_\_\_\_ at

\_\_\_\_\_  
[city & state, zip code]

Name of Responsible Officer \_\_\_\_\_

Wet Signature \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Company \_\_\_\_\_ Permit/Certificate No. \_\_\_\_\_

DS Email Address \_\_\_\_\_

\* Name of Permittee/Certificate Holder should match the Applicant name in the Permit Application (Complete Legal **Company Name**). Do not use the name of an individual employee in the field for Permittee/Certificate Holder.