

ORANGE COUNTY SANITATION DISTRICT

SPECIAL PURPOSE DISCHARGE PERMIT RENEWAL APPLICATION CHECKLIST

(This checklist must be completed and submitted with the Special Purpose Discharge Permit Application)

PERMITTEE _____

Complete Legal Company Name

Please list date of last regular discharge (Not Including purge water for sampling): _____

TO BE SUBMITTED BY PERMITTEE

PERMIT APPLICATION

COPY OF THE CHECK FOR PERMIT FEE REMITTANCE

A separate invoice will be sent by OC San Accounting Department for the permit application fee. Please

Note: Send the check for the permit application fee to OC San Accounts Receivable 18480 Bandilier Circle, Fountain Valley, CA 92708

INFORMATION AND DRAWINGS REQUIREMENTS:

- I. Current Site Drawing and Process Flow Sketch
- II. Influent Lab Analysis
- III. Certificate of Responsible Officer
- IV. Option to Designate Signatory
- V. Effluent Meter In-Situ Hydraulic Calibration Report
- VI. Sewer Connection Verification Statement
- VII. Certification of Accuracy of Information

Other: _____

The items checked above were submitted.

Wet Signature of Responsible Officer or Designated Signatory Date

Permit Number: _____

**Note: All Signatures must be from the Responsible Officer or Designated Signatory.
Consultant Signatures will not be accepted.**

ORANGE COUNTY SANITATION DISTRICT

APPLICATION FOR SPECIAL PURPOSE DISCHARGE PERMIT

A. Instructions

Special Purpose Discharge Permits are limited term permits, with a maximum term of one year. For the Orange County Sanitation District (OC San) to properly evaluate and process a Special Purpose Discharge Permit.

- 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 6 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. Please note that the election of a consultant as a DS is not permissible; the DS must be directly employed by and associated with the owners of the facility to which the permit is issued.
- If the payment for the application fee (\$3,215.17 effective July 1, 2026) is not received by OC San, the permit application will not be processed. 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 application to the Resource Protection Division.

B. Applicant and Ownership Information

Applicant: _____
complete Legal Entity Name

Mailing Address: _____
Street City State Zip Code

Phone Number: (_____) _____ Fax Number: (_____) _____

Contact Name: _____ E-mail Address: _____

Sewer Service Address: _____
Street City State Zip Code

Please include a site map

List all Principal Owners / Major Shareholders of the site and/or business:

Name	Title	Address

Name	Title	Address

Name	Title	Address

For Corporations Only: _____
Year of Incorporation State of Incorporation Corporate Identification No.

Prior to commencement of discharge to the local and regional sewerage system, in accordance with the policies and procedures set by OC San, the permit applicant must apply for and receive a Special Purpose Discharge Permit from OC San. OC San may require that permit applicant enter into an agreement setting forth the terms under which the special purpose discharge is authorized in addition to or in lieu of issuance of the Special Purpose Discharge Permit.

C. Project and Site Information

Describe and submit the following (use additional sheets if necessary):

1. Describe project generating the discharge.

Include site drawings and piping layout.

2. Reasons for the discharge request to the sewer system.

3. Analysis of the feasibility of other disposal alternatives (e.g., discharging into storm drains, reuse and reclamation, etc.).

Describe the following:

- Is this a one-time discharge?

☐ Yes ☐ No

- Do you project this discharge to last longer than one year?

☐ Yes ☐ No

- Projected duration: Of project: _____ Of discharge: _____

- Does the facility on this site have a Wastewater Discharge Permit issued by the Orange County Sanitation District?

☐ Yes ☐ No

If yes, provide Permit number:

-
- Average daily flow (gpd) from this site: _____ gpd
 - If this is a one-time discharge, indicate the total expected discharge for the project: _____ gallons
 - Rate of discharge: _____ gpm
 - Hours of discharge: From: _____ a.m. To: _____ p.m.
 - Number of days per week of discharge: _____

- Days of week of discharge (enter X):

Mon	Tue	Wed	Thu	Fri	Sat	Sun

5. Location of discharge point:

Include site drawings.

6. Contaminants present in the source of discharge and level of each contaminant.

Constituent	Level (mg/L)	Analytical Method Used

Include analytical reports.

7. Detailed design and technical information (include drawings and attach additional information).

- Pretreatment system provided to remove the contaminants.
- Equipment/structure and method to prevent pass-through and interference with the sewerage system in case of temporary outages, emergency shutdown, or sewer surcharge.
- Best management practices and pollution prevention strategies designed to minimize or eliminate the proposed discharge to the sewer.

- System to measure and record the discharge to the sewer system (see Attachment 161 for effluent flow meter installation requirements).

If effluent measuring device is already installed, please provide the following:

Date of last calibration: _____

Type of calibration: ☐ Hydraulic ☐ Instrumentation

Calibration performed in situ? ☐ Yes ☐ No

The calibration of an existing effluent meter may be acceptable to OC San only if:

- ***performed in-situ,***
- ***performed within 30 days prior to this application submittal and in accordance with Attachment 161, and***
- ***required calibration report (Attachment 161) is submitted with this application.***

8. Provisions for District's staff to gain access to the effluent sample point and measuring device for the purpose of verifying compliance.

Designate your company's authorized local associate that District's staff can contact to gain access to the sample point and measuring device(s):

Name: _____ Title: _____

Address: _____
Street City State Zip Code

Phone Number: (_____) _____ E-mail: _____

D. Additional Requirements and Certification

Please complete and provide the following documents with your application:

- Certification of Accuracy of Information
- Sewer Connection Verification Statement
- Certification of Responsible Officer
- Option to Designate Signatory (Optional)

Certification of Accuracy of Information

I have personally examined and am familiar with the information submitted in this application and required attachments, 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 the OC San's Ordinance and applicable Federal wastewater discharge requirements. If the wastewater discharge does not meet all the 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 specified 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: _____

Sewer Connection Verification Statement

☐ **Connection to OC San's Sewer System (Trunklines)**

Connection Permit No.: _____

Connection Address: _____

Discharge Pipe Size: _____ inches Maximum Flow Rate: _____ gpm

Receiving Trunkline Name / Size: _____ / _____ inches

Date Connection/Inspection Fees Paid: _____

☐ **Connection to Local Sewer (Collection) Systems**

Local Sewerage Agency: _____

Connection/Encroachment Permit No. (if applicable): _____

Connection Address: _____

Maximum Allowed by Local Sewerage Agency: _____ gpm

Name and Title of Local Agency Contact: _____

Contact's Phone No: (_____) _____

Certification of Responsible Officer (RO)

This form is required

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

Please note - there can only be 1 RO assigned.

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 (RO) _____

Wet Signature _____

Date _____

Title _____

RO's Phone Number: _____

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, otherwise mark the form N/A. Please note – there can only be 1 DS assigned.

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 _____

DS Phone Number: _____

* 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.