

**Attachment O: Discharge Information**  
**(must be completed and submitted for each discharge)**

Applicant Name: \_\_\_\_\_  
(as indicated on the permit application form)

Existing Permit Number (if applicable):

Complete this attachment for *each* discharge and label each discharge consecutively starting with serial number 101 for discharges to a surface water, 201 for discharges to a POTW, and 301 for discharges to ground water.

**Part A: General Discharge Information**

<b>Discharge Serial Number:</b>
<p>1. For discharges to a surface water only:</p> <p>a. The discharge enters the surface water (check one):</p> <p><input type="checkbox"/> directly</p> <p><input type="checkbox"/> through a municipal storm sewer</p> <p><input type="checkbox"/> through other drainage systems (e.g., swale) Please specify below:</p> <p>b. Name of surface water body the discharge first enters:</p> <p>c. Surface water classification of the above listed water body:</p> <p>Present: _____ Future: _____</p> <p>2. For discharges to a POTW only:</p> <p>a. The discharge enters the POTW (check one):</p> <p><input type="checkbox"/> directly hauled</p> <p><input type="checkbox"/> through a sanitary sewer or a combined sewer</p> <p>b. Name of POTW the discharge first enters:</p> <p>c. Facility I.D. or location address of POTW:</p> <p>d. Does the discharge contain a substance, which, in the absence of a wastewater discharge permit, would be a hazardous waste under 40 CFR Part 261? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. For discharges to ground water only:</p> <p>a. Groundwater classification of the site:</p> <p>Present: _____ Future: _____</p> <p>b. Name of surface water body in watershed area:</p> <p>Surface water classification of the above listed water body:</p> <p>Present: _____ Future: _____</p>

**Part A: General Discharge Information (continued)**

<b>Discharge Serial Number:</b>	
4. Average Daily Flow (gpd): Design Flow (gpd): Date discharge began or will begin: _____	Maximum Daily Flow (gpd):
5. Is the discharge continuous? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate: Average number of hours per day of the discharge: Maximum number of hours per day of the discharge:	
6. For other than a continuous discharge (e.g., batch, intermittent, or seasonal discharges), indicate: Average number of hours per event of the discharge: Maximum number of hours per event of the discharge: The duration and frequency of the discharge:	
7. Description of each specific activity or each process generating the discharge and identification of all types of waste generated by each process.	
<input type="checkbox"/> Check here if additional sheets are necessary, please label and attach them to this sheet.	







## Attachment O: Discharge Information (continued)

### Part B: Discharge Analysis

All applicants must complete Part B, Tables 1 through 4 for each discharge. Be sure to review the instructions; specifically, "Testing Requirements for All Discharge Categories", Schedule A in the instructions under Attachment O before completing this part. In addition, please note that for existing discharges previously licensed by DEEP, identify the substances that were monitored in the existing permit by placing "PP" in the " Daily Composite or Grab Sample Results" column by the substance. For such substances, you need not repeat the analytical results in Tables 1 through 4, as long as such results are provided in Attachment W of the application.

**Please indicate whether the discharge analysis was based on (check one):**

Projection                       Actual wastewater                       Wastewater from other similar discharge

All applicants must provide analysis results in column 1 for <i>all</i> the substances listed in Table 1 and other information needed to complete columns 2 and 3, for each discharge except the following: For discharges of non-contact cooling water, heat pump wastewaters and blowdown from heating and cooling equipment, provide analysis results for substances numbered in Table 1 as 3, 5, 6, and 11 through 16 only.			
<b>Table 1</b>		<b>Discharge Serial Number:</b>	
<b>Date Sampled:</b>		<b>Discharge Serial Number:</b>	
GENERAL	1 Daily Composite or Grab Sample* Results	2 Number of Analyses	3 EPA** Method
1. Biochemical Oxygen Demand (5Day)			
2. Chemical Oxygen Demand			
3. Oil and Grease, Total*			
4. Oil and Grease, Hydrocarbon Fraction*			
5. Total Suspended Solids			
6. Ammonia (as Nitrogen)			
7. Phosphorus (Total)			
8. Nitrate			
9. Nitrite			
10. Total Kjeldahl Nitrogen			
11. Total Residual Chlorine*			
12. Temperature (Winter and Summer)*			
13. pH (minimum and maximum)*			
14. Copper, Total			
15. Lead, Total			
16. Zinc, Total			

\* Check the instructions under this part for the required method of sample collection.

\*\* For surface water discharges only, check the instructions for *required* EPA methods of analyses.

**Part B: Discharge Analysis (continued)**

All applicants must complete Table 2 for each discharge by placing an "X" in column 1, if applicable *and* by placing an "X" in column 2 or 3. If column 1 or 2 is marked for any substance, you *must* provide analysis results in column 4 for that substance and other information needed to complete columns 5 and 6 for that substance.

<b>Table 2</b>						
<b>Date Sampled:</b>			<b>Discharge Serial Number:</b>			
<b>TOXIC METALS, CYANIDES, PHENOLS</b>	<b>1 Analysis Required by Schedule A - see Instructions</b>	<b>2 Known or Suspected Present</b>	<b>3 Believed Absent</b>	<b>4 Daily Composite or Grab Sample Results*</b>	<b>5 Number of Analyses</b>	<b>6 EPA** Method</b>
1. Antimony, Total						
2. Arsenic, Total						
3. Beryllium, Total						
4. Cadmium, Total						
5. Chromium, Total						
6. Chromium, Hexavalent*						
7. Mercury, Total						
8. Nickel, Total						
9. Selenium, Total						
10. Silver, Total						
11. Thallium, Total						
12. Cyanide, Total*						
13. Cyanide, Amenable*						
14. Phenols, Total*						

**Part B: Discharge Analysis (continued)**

Table 2 (continued)						
Date Sampled:		Discharge Serial Number:				
VOLATILES*	1 Analysis Required by Schedule A - see Instructions	2 Known or Suspected Present	3 Believed Absent	4 Daily Composite or Grab Sample Results*	5 Number of Analyses	6 EPA** Method
1. Acrolein						
2. Acrylonitrile						
3. Benzene						
4. Bromoform						
5. Carbon Tetrachloride						
6. Chlorobenzene						
7. Chlorodibromomethane						
8. Chloroethane						
9. 2-Chloroethylvinyl Ether						
10. Chloroform						
11. Dichlorobromomethane						
12. 1, 1-Dichloroethane						
13. 1, 2-Dichloroethane						
14. 1, 1-Dichloroethylene						
15. 1, 2-Dichloropropane						
16. 1, 3-Dichloropropylene						
17. Ethylbenzene						
18. Methylbromide						
19. Methylchloride						
20. Methylene Chloride						
21. 1, 1, 2, 2,-Tetrachloroethane						
22. Tetrachloroethylene						
23. Toluene						
24. 1, 2-Trans-Dichloroethylene						

**Part B: Discharge Analysis (continued)**

Table 2 (continued)						
Date Sampled:		Discharge Serial Number:				
VOLATILES*	1 Analysis Required by Schedule A - see Instructions	2 Known or Suspected Present	3 Believed Absent	4 Daily Composite or Grab Sample Results*	5 Number of Analyses	6 EPA** Method
25. 1, 1, 1-Trichloroethane						
26. 1, 1, 2- Trichloroethane						
27. Trichloroethylene						
28. Vinyl Chloride						
<b>GC/MS FRACTION ACID COMPOUNDS</b>						
1. 2-Chlorophenol						
2. 2, 4-Dichlorophenol						
3. 2, 4-Dimethylphenol						
4. 4, 6-Dinitro-O-Cresol						
5. 2, 4-Dinitrophenol						
6. 2-Nitrophenol						
7. 4-Nitrophenol						
8. P-Chloro-M-Cresol						
9. Pentachlorophenol						
10. Phenol						
11. 2, 4, 6- Trichlorophenol						
<b>BASE NEUTRAL COMPOUNDS</b>						
1. Acenaphthene						
2. Acenaphthylene						
3. Anthracene						
4. Benzidine						
5. Benzo(a)anthracene						
6. Benzo(a)pyrene						
7. 3, 4-Benzo-fluoranthene						

**Part B: Discharge Analysis (continued)**

Table 2 (continued)						
Date Sampled:		Discharge Serial Number:				
BASE NEUTRAL COMPOUNDS	1 Analysis Required by Schedule A - see Instructions	2 Known or Suspected Present	3 Believed Absent	4 Daily Composite or Grab Sample Results*	5 Number of Analyses	6 EPA** Method
8. Benzo(ghi)perylene						
9. Benzo(k) fluoranthene						
10. Bis(2-Chloroethoxy) Methane						
11. Bis(2-Chloroethyl) Ether						
12. Bis(2-Chloroisopropyl) Ether						
13. Bis(2-Ethylhexyl) Phthalate						
14. 4-Bromophenylphenyl Ether						
15. Butylbenzyl Phthalate						
16. 2-Chloronaphthalene						
17. 4-Cholorophenylphenyl Ether						
18. Chrysene						
19. Dibenzo(a, H)anthracene						
20. 1, 2-Dichlorobenzene						
21. 1, 3-Dichlorobenzene						
22. 1, 4-Dichlorobenzene						
23. 3, 3-Dichlorobenzidine						
24. Diethyl phthalate						
25. Dimethyl phthalate						
26. Di-n-butyl phthalate						
27. 2, 4-Dinitrotoluene						
28. 2, 6-Dinitrotoluene						
29. Di-n-octyl phthalate						
30. 1, 2-Diphenylhydrazine (as Azobenzene)						
31. Fluoranthene						

**Part B: Discharge Analysis (continued)**

Table 2 (continued)						
Date Sampled:		Discharge Serial Number:				
BASE NEUTRAL COMPOUNDS	1 Analysis Required by Schedule A - see Instructions	2 Known or Suspected Present	3 Believed Absent	4 Daily Composite or Grab Sample Results*	5 Number of Analyses	6 EPA** Method
32. Fluorene						
33. Hexachlorobenzene						
34. Hexachlorobutadiene						
35. Hexachlorocyclopentadiene						
36. Hexachloroethane						
37. Indeno(1,2,3-cd) Pyrene						
38. Isophorone						
39. Naphthalene						
40. Nitrobenzene						
41. N-nitroso dimethylamine						
42. N-Nitrosodi-n-Propylamine						
43. N-Nitrosodiphenylamine						
44. Phenanthrene						
45. Pyrene						
46. 1, 2, 4-Trichlorobenzene						
<b>PESTICIDES</b>						
1. Aldrin						
2. Alpha - BHC						
3. Beta - BHC						
4. Gamma-BHC						
5. Delta-BHC						
6. Chlordane						
7. 4, 4-DDT						
8. 4, 4-DDE						

**Part B: Discharge Analysis (continued)**

Table 2 (continued)						
Date Sampled:			Discharge Serial Number:			
PESTICIDES	1 Analysis Required by Schedule A - see Instructions	2 Known or Suspected Present	3 Believed Absent	4 Daily Composite or Grab Sample Results*	5 Number of Analyses	6 EPA** Method
9. 4, 4-DDD						
10. Dieldrin						
11. Alpha-Endosulfan						
12. Beta-Endosulfan						
13. Endosulfan Sulfate						
14. Endrin						
15. Endrin Aldehyde						
16. Heptachlor						
17. Heptachlor Epoxide						
18. PCB-1242						
19. PCB-1254						
20. PCB-1221						
21. PCB-1232						
22. PCB-1248						
23. PCB-1260						
24. PCB-1016						
25. Toxaphene						

**Part B: Discharge Analysis (continued)**

All applicants must complete Table 3 for each discharge by placing an "X" in either column 1 or 2. If column 1 is marked for any substance, you *must* provide analysis results for that substance in column 3 and other information needed to complete columns 4 and 5 for that substance.

<b>Table 3</b>					
<b>Date Sampled:</b>		<b>Discharge Serial Number:</b>			
<b>OTHER SUBSTANCES</b>	<b>1 Known or Suspected Present</b>	<b>2 Believed Absent</b>	<b>3 Daily Composite or Grab Sample Results*</b>	<b>4 Number of Analyses</b>	<b>5 EPA** Method</b>
1. Bromide					
2. Color					
3. Fecal Coliform*					
4. Fluoride					
5. Nitrogen, Total Organic					
6. Radioactivity					
a. Alpha, Total					
b. Beta, Total					
c. Radium, Total					
d. Radium, 226 Total					
7. Sulfate					
8. Sulfide*					
9. Sulfite					
10. Surfactants					
11. Aluminum, Total					
12. Barium, Total					
13. Boron, Total					
14. Cobalt, Total					
15. Iron, Total					
16. Magnesium, Total					

**Part B: Discharge Analysis (continued)**

Table 3 (continued)					
Date Sampled:		Discharge Serial Number:			
OTHER SUBSTANCES	1 Known or Suspected Present	2 Believed Absent	3 Daily Composite or Grab Sample Results*	4 Number of Analyses	5 EPA** Method
17. Molybdenum, Total					
18. Manganese, Total					
19. Tin, Total					
20. Titanium, Total					
OTHER TOXIC AND HAZARDOUS SUBSTANCES					
1. Asbestos					
2. Acetaldehyde					
3. Allyl alcohol					
4. Allyl chloride					
5. Amyl acetate					
6. Aniline					
7. Benzotrile					
8. Benzyl chloride					
9. Butyl acetate					
10. Butylamine					
11. Captan					
12. Carbaryl					
13. Carbofuran					
14. Carbon disulfide					
15. Chlorpyrifos					
16. Coumaphos					
17. Cresol					
18. Crotonaldehyde					
19. Cyclohexane					

**Part B: Discharge Analysis (continued)**

Table 3 (continued)					
Date Sampled:		Discharge Serial Number:			
OTHER TOXIC AND HAZARDOUS SUBSTANCES	1 Known or Suspected Present	2 Believed Absent	3 Daily Composite or Grab Sample Results*	4 Number of Analyses	5 EPA** Method
20. 2,4-Dichlorophenoxy (acetic acid)					
21. Diazinon					
22. Dicamba					
23. Dichlobenil					
24. Dichlone					
25. 2,2-Dichloro-propionic acid					
26. Dichlorvos					
27. Diethyl amine					
28. Dimethyl amine					
29. Dinitrobenzene					
30. Diquat					
31. Disulfoton					
32. Diuron					
33. Epichlorohydrin					
34. Ethanolamine					
35. Ethion					
36. Ethylene diamine					
37. Ethylene dibromide					
38. Formaldehyde					
39. Furfural					
40. Guthion					
41. Isoprene					
42. Isopropanolamine					
43. Kelthane					

**Part B: Discharge Analysis (continued)**

Table 3 (continued)					
Date Sampled:		Discharge Serial Number:			
OTHER TOXIC AND HAZARDOUS SUBSTANCES	1 Known or Suspected Present	2 Believed Absent	3 Daily Composite or Grab Sample Results*	4 Number of Analyses	5 EPA** Method
44. Kepone					
45. Malathion					
46. Mercaptodimethur					
47. Methoxychlor					
48. Methyl mercaptan					
49. Methyl methacrylate					
50. Methyl parathion					
51. Mevinphos					
52. Mexacarbate					
53. Monoethyl amine					
54. Monomethyl amine					
55. Naled					
56. Napthenic acid					
57. Nitrotoluene					
58. Parathion					
59. Phenolsulfanate					
60. Phosgene					
61. Propargite					
62. Propylene oxide					
63. Pyrethrins					
64. Quinoline					
65. Resorcinol					
66. Strontium					
67. Strychnine					

**Part B: Discharge Analysis (continued)**

Table 3 (continued)					
Date Sampled:			Discharge Serial Number:		
OTHER TOXIC AND HAZARDOUS SUBSTANCES	1 Known or Suspected Present	2 Believed Absent	3 Daily Composite or Grab Sample Results*	4 Number of Analyses	5 EPA** Method
68. Styrene					
69. 2, 4, 5-T (2, 4, 5-Trichlorophenoxy acetic acid)					
70. TDE (Tetrachlorodiphenylethane)					
71. 2, 4, 5-TP[2-(2, 4, 5-Trichlorophenoxy) propanoic acid]					
72. Trichlorofan					
73. Triethylamine					
74. Trimethylamine					
75. Uranium					
76. Vanadium					
77. Vinyl acetate					
78. Xylene					
79. Xylenol					
80. Zirconium					

**Part B: Discharge Analysis (continued)**

All applicants must complete Table 4 for each discharge, by placing an "X" in either column 1 or 2 for the substances numbered 1-6. If column 1 is marked for any substance, you *must* provide analysis results for that substance and any other information needed to complete columns 3 through 5 for that substance.

<b>Table 4</b>					
<b>Date Sampled:</b>			<b>Discharge Serial Number:</b>		
<b>SUBSTANCES</b>	<b>1 Known or Suspected Present</b>	<b>2 Believed Absent</b>	<b>3 Daily Composite or Grab Sample Results*</b>	<b>4 Daily Number of Analyses</b>	<b>5 EPA** Method</b>
1. 2, 4,5-trichlorophenoxy acetic acid (2, 4, 5,-T)					
2. 2-(2, 4, 5-trichlorophenoxy) propanoic acid (Silvex, 2, 4, 5,-TP)					
3. 2-(2, 4, 5-trichlorophenoxy) ethyl, 2, 2-dichloropropionate (Erbon)					
4. 0, 0-dimethyl-0-(2, 4, 5-trichlorophenyl) phosphorothioate (Ronnel)					
5. 2, 4, 5-trichlorophenol (TCP)					
6. hexachlorophene (HCP)					

In addition, *if*:

- 1) your facility uses or manufactures one of the substances listed above as items 1-6 or knows or has reason to believe or can reasonably ascertain that one of those substances may be present in the discharge; or
- 2) your facility has a discharge resulting from a process regulated under 40 CFR Part 430 - Pulp, Paper, and Paperboard Point Source Category; or
- 3) you know or have reason to believe or can reasonably ascertain that 2,3,7,8 - Tetrachlorodibenzo-p-dioxin (TCDD) may be present in the discharge;

you must also provide the analysis results for the dioxin and furan substances numbered 7 through 27, on the following page, using "EPA Method 1613: Tetra- through Octa- Chlorinated Dioxins and Furans by Isotope Dilution HRGC/HRMS".

**Part B: Discharge Analysis (continued)**

Table 4 (continued)			
Date Sampled:		Discharge Serial Number:	
SUBSTANCES	1 Daily Composite Sample Results*	2 Number of Analyses	3 EPA** Method
7. 2,3,7,8-TCDD (Tetrachlorodibenzo-p-dioxin)			
8. Total - TCDD			
9. 2,3,7,8-TCDF (Tetrachlorodibenzofuran)			
10. Total - TCDF			
11. 1,2,3,7,8-PeCDD (Pentachlorodibenzo-p-dioxin)			
12. Total - PeCDD			
13. 1,2,3,7,8-PeCDF (Pentachlorodibenzofuran)			
14. 2,3,4,7,8-PeCDF			
15. Total - PeCDF			
16. 1,2,3,4,7,8-HxCDD (Hexachlorodibenzo-p-dioxin)			
17. 1,2,3,6,7,8-HxCDD			
18. 1,2,3,7,8,9-HxCDD			
19. Total - HxCDD			
20. 1,2,3,6,7,8-HxCDF (Hexachlorodibenzofuran)			
21. 1,2,3,7,8,9-HxCDF			
22. Total - HxCDF			
23. 1,2,3,4,6,7,8-HpCDF (Heptachlorodibenzofuran)			
24. 1,2,3,4,7,8,9-HpCDF			
25. Total - HpCDF			
26. OCDD (Octachlorodibenzo-p-dioxin)			
27. OCDF (Hexachlorodibenzofuran)			



**Part B: Discharge Analysis (continued)**

<b>Table 6: Discharge Toxicity Evaluation</b>	<b>All Discharges</b>
<p>1. Except as provided below, all applicants for permits to discharge to a surface waterbody (i.e., for new and existing discharges) must perform a Discharge Toxicity Evaluation (DTE) in accordance with RCSA section 22a-430-4(c)(21)(B) and submit the results of the DTE as Attachment O, Table 6.</p> <p>2. Exceptions: A DTE need not be performed or submitted with this application <i>if</i>:</p> <ul style="list-style-type: none"> <li>a. this application for a permit is to discharge sewage from a POTW; or</li> <li>b. a DTE covering all discharges to surface waters at the site has been previously approved by DEEP; or</li> <li>c. the applicant has been specifically exempted from submission of a DTE for the discharge(s), in writing by DEEP, in accordance with RCSA section 22a-430-4(c)(21)(C), prior to submittal of this application. (see instructions)</li> </ul> <p>3. For discharges to a POTW, a DTE may be required depending on the nature of the discharge. In this case, you will be notified by DEEP after submitting your application.</p>	

If any of the analyses reported in Tables 1 through 6 of this application were performed by a contract laboratory or consulting firm, list the name, address and telephone number of the laboratory or firm and the type of analyses performed.

<b>Table 7: Contract Laboratory Identification</b>			<b>All Discharges</b>
<b>Name</b>	<b>Address</b>	<b>Telephone (Area Code &amp; No.)</b>	<b>Substances Analyzed (List)</b>