

DEC Identification Number	SPDES Permit Number	Facility Name
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Form
NY-2C
PART II
SPDES



**New York State Department of Environmental Conservation Application for
SPDES Permit to Discharge Wastewater
NEW AND EXISTING INDUSTRIAL OPERATIONS DETAILED INFORMATION**

SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1)) & RECEIVING WATER DESCRIPTION (6 NYCRR 750-1.7(a))

Outfall Location & Receiving Water Description	1.1	Provide information on each of the facility's outfalls and the receiving waters in the table below.		
		Outfall _____		
		Latitude	° ' "	° ' "
		Longitude	° ' "	° ' "
		Receiving Water Name		
		Water Index Number (WIN)		
		Waterbody Inventory/ Priority Waterbodies List (WI/PWL) Segment		
		Water Classification		
		Groundwater Discharges Only:		
		Soil Type		
	Depth to Water Table	ft	ft	

SECTION 2. LINE DRAWING (40 CFR 122.21(g)(2))

Line Drawing	2.1	Have you attached a line drawing to this application that shows the water flow through your facility with a water balance? (See instructions for drawing requirements. See Exhibit 2C-3 at end of instructions for example.) <input type="checkbox"/> Yes <input type="checkbox"/> No
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SECTION 3. AVERAGE FLOWS AND TREATMENT (40 CFR 122.21(g)(3))

Average Flows and Treatment	3.1	For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets if necessary.		
		Outfall Number _____		
		Operations Contributing to Flow		
		Operation	Average Flow	Maximum Flow
			MGD	MGD
			MGD	MGD
			MGD	MGD
			MGD	MGD
		Treatment Units		
		Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge

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Average Flows and Treatment Continued	3.1 cont.	**Outfall Number** _____		
		Operations Contributing to Flow		
		Operation	Average Flow	Maximum Flow
			MGD	MGD
			MGD	MGD
			MGD	MGD
			MGD	MGD
		Treatment Units		
		Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
		Outfall Number _____		
		Operations Contributing to Flow		
		Operation	Average Flow	Maximum Flow
			MGD	MGD
			MGD	MGD
	MGD	MGD		
	MGD	MGD		
Treatment Units				
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge		
WTCs	3.2	<p>Does the facility utilize or plan to utilize any water treatment chemicals that can potentially be discharged from one or more outfalls?</p> <p><input type="checkbox"/> Yes → Complete Table F <input type="checkbox"/> No → SKIP to Item 3.3.</p>		
Mixing Zone Form	3.3	<p>Has a Mixing Zone Analysis Form been completed and attached? All applicants must complete at least the Simple Form for each wastewater outfall to surface waters. Indicate which form was completed and is attached to this application.</p> <p>Yes → Simple Form Yes → Detailed Form</p>		

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SECTION 4. INTERMITTENT FLOWS (40 CFR 122.21(g)(4))

Intermittent Flows	4.1	Except for storm runoff, leaks, or spills, are any discharges described in Sections 1 and 3 intermittent or seasonal? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 5.						
	4.2	Provide information on intermittent or seasonal flows for each applicable outfall. Attach additional pages, if necessary.						
		Outfall Number	Operation (list)	Frequency		Flow Rate		Duration
				Average Days/Week	Average Months/Year	Long-Term Average	Maximum Daily	
				days/week	months/year	MGD	MGD	days
				days/week	months/year	MGD	MGD	days
				days/week	months/year	MGD	MGD	days
				days/week	months/year	MGD	MGD	days
				days/week	months/year	MGD	MGD	days
				days/week	months/year	MGD	MGD	days
			days/week	months/year	MGD	MGD	days	
		days/week	months/year	MGD	MGD	days		

SECTION 5. PRODUCTION (40 CFR 122.21(g)(5))

Applicable ELGs	5.1	Do any effluent limitation guidelines (ELGs) promulgated by EPA under Section 304 of the CWA apply to your facility? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.5.				
	5.2	Provide the following information on applicable ELGs.				
		ELG Category	ELG Subcategory			Regulatory Citation
Production-Based Limitations	5.3	Are any of the applicable ELGs expressed in terms of production (or other measure of operation)? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.5.				
	5.4	Provide an actual measure of daily production expressed in terms and units of applicable ELGs.				
		Outfall Number	Operation, Product, or Material		Quantity per Day	Unit of Measure
Specific Industry	5.5	Is your industry type listed as a specific industry requiring submission of a supplemental application form (see instructions)? Yes, supplemental form attached <input type="checkbox"/> No → SKIP to Section 6. <input type="checkbox"/>				