



Comhairle Cathrach
& Contae **Luimnigh**

Limerick City
& County Council

The Local Government (Water Pollution) Acts, 1977 to 2007

Application for a Licence to Discharge Trade/Domestic Effluent to Surface Waters

Your completed application accompanied by all relevant information and payment is
to be sent to the following address:

Address:	Discharge Licensing
	Environment & Climate Action Department
	Limerick City and County Council
	Dooradoyle Road
	Dooradoyle
	Limerick
	V94 WV78

PART I - Section 1

A. Guidance on Applying for a Discharge Licence - Surface Waters

Any person who intends to discharge domestic waste water or trade effluent to surface waters must obtain permission to do so from either the relevant Local Authority or the Environmental Protection Agency (EPA) before the discharge is commenced.

Where the discharge is licensable by Limerick City & County Council, this Application Form is to be completed and submitted to the Council.

Applicants should read the “Guidance on Applying for a Discharge Licence - Surface Waters” before completing this licence application form.

B. Completing the Application Form

Guidance on what information is to be included in each Part of the Application Form is provided in the “*Guidance on Applying for a Discharge Licence - Surface Waters*”.

As an applicant, please contact Limerick City & County Council in the event that:

- you are unsure as to whether the discharge is licensable by the Council or the EPA
- you are having difficulty in providing all the information required in the application form
- you are unsure as to what information they are to provide in the form
- you are unsure as to where to source the information required in the form
- you require any information or guidance on filling out the form

Limerick City & County Council WILL NOT process an incomplete application.

Where multiple discharges are proposed, you licence must first contact Limerick City & County Council for advice on whether one application form will suffice or whether multiple forms need to be submitted.

Additional Sheets

Where any part of the Application Form does not afford sufficient space to provide the required information, please attach additional sheets to the form containing such information.

The additional sheets should be cross-referenced to the appropriate section in the Application Form. Mark each sheet with the name of the Applicant and the name of the premises from which the discharge is generated and indicate the section and part of the Application Form to which the additional sheets relate. An example of an Additional Sheet cross reference is provided in “*Guidance on Applying for a Discharge Licence - Surface Waters*”.

Request for Further Information

Limerick City & County Council is entitled under Section 7(3) of the *Local Government (Water Pollution) Regulations, 1978* to request the Applicant to submit additional information that it deems necessary for the consideration of an application for a discharge licence.

Where additional information is not provided by the Applicant within a three month period of receiving such a request then the Council may carry out the necessary investigations to acquire the information, the cost of which is to be borne by the Applicant. Alternatively the Licensing Authority may proceed to make a determination on the application in the absence of such information

PART I – DECLARATIONS & SIGNATURES

C. Signatures of the Applicant & Agent

Identify the class of discharge to which this application pertains.

I hereby make an application for a licence to discharge _____* effluent to groundwater under the Local Government (Water Pollution) Acts 1977 to 2007 in respect of the particulars included in this application on behalf of _____(insert name of the Applicant).

**indicate whether trade or domestic or both*

Where this application is made by an Agent on behalf of an Applicant, the signature of the Applicant must be provided below confirming the authorisation of the Agent to apply for a licence on his/her behalf:

I hereby authorise _____ (name of Agent) to apply for a discharge licence on behalf of _____ (name of Applicant).

Signed: **te:**

(provide signature of Applicant)

I hereby declare that I am fully aware of my responsibilities to implement the conditions of any licence granted on the basis of this application and acknowledge that I may be subject to criminal liability whereby the terms of the licence are not complied with.

Signed: **Date:**

(provide signature of Applicant)

Refer to the “Guidance on Applying for a Discharge Licence - Surface Waters” for definitions of the Applicant and the Agent.

PART I - Section 2

A. Disclosure of Information

The Freedom of Information Act, 1997 (as amended) states that every person has a right to access any record held by a public body. This includes discharge licenses (and associated applications) held by Limerick City & County Council. The Council may refuse to provide access to records held by them where the information was provided to Limerick City & County Council with the understanding that it is to be treated as confidential.

Circumstances under which confidentiality may apply include where information submitted in the application contains commercially sensitive information or matters of national security.

The Applicant is requested to identify all information submitted with the application which is to be treated as confidential and is requested to identify the grounds on which the information may be categorised as confidential.

B. False or Misleading Information

It is an offence under the *Local Government (Water Pollution) Act, 1977* knowingly to submit false or misleading information in the licence application and an Applicant is liable to a fine on summary conviction of such an offence.

Please provide signature of the authorised representatives of the Applicant and where appropriate the Agent confirming that all the information submitted in this application is correct and also that they have made themselves aware of the provisions of the Freedom of Information Act.

I/we hereby declare that I/we have made myself/ourselves aware of the provisions of the Freedom of Information Act and that I/we understand that there is a legal obligation on Limerick City & County Council to make this discharge licence application available for inspection by third parties.

I/We hereby declare that to the best of my/our knowledge all of the information provided in this application is true and correct.

Signed: te:

(provide signature of the Applicant)

Signed: te:

(provide signature of the Agent)

PART II – GENERAL DETAILS

PART II – Section 1

A. Contact Details – Applicant	
A. (i) Provide contact details for the Applicant below	
The Applicant is:	<input type="checkbox"/> An Individual <input type="checkbox"/> A Group of Individuals <input type="checkbox"/> A Corporate Body
Name (Principal Contact)*	
Address	<div></div> <div></div> <div></div> <div></div> <div>Post Code</div>
Phone Number (land)	
Phone Number (mobile)	
Fax	
E-mail Address	
<p>* Where the Applicant is a group of individuals or a corporate body, provide the name of one individual to be the principal contact for the purpose of correspondence relating to a licence granted by the licensing authority.</p>	

A. (ii) Where the Applicant is an Individual provide the following details:	
Relationship to the premises from which it is proposed to discharge	<input type="checkbox"/> Owner/occupier <input type="checkbox"/> Landowner <input type="checkbox"/> Responsible for treatment facility <input type="checkbox"/> Other _____ (please specify)

A. (iii) Where the Applicant is a Group of Individuals provide the following details:	
Type of Group	<input type="checkbox"/> Management Company <input type="checkbox"/> Residents Association <input type="checkbox"/> Voluntary Group <input type="checkbox"/> Club <input type="checkbox"/> Other _____ (please specify)

PART II – GENERAL DETAILS

A. (iv) Where the Applicant is a Corporate Body provide the following details:	
Type of Corporate Body	<div style="display: flex; flex-direction: column; gap: 10px;"> <div><input type="checkbox"/> Limited Company</div> <div><input type="checkbox"/> Public Limited Company</div> <div><input type="checkbox"/> Sole Trader</div> <div><input type="checkbox"/> Co-operative</div> <div><input type="checkbox"/> Partnership</div> <div><input type="checkbox"/> Other _____ <i>(please specify)</i></div> </div>
Certificate of Incorporation must be included with the application listing the names of Directors.	

B. Contact Details – Agent		
B. Where an Agent is making this application on behalf of an Applicant the Agent's contact details must be provided		
Name		
Address		
		Post Code
Phone Number (land)		
Phone Number (mobile)		
Fax		
E-mail Address		
Relationship to the Applicant e.g. employee, consultant, partner.		

PART II – GENERAL DETAILS

PART II – Section 2

A. Site Details														
A. (i) Provide details below of the site / activity from which it is proposed to discharge.														
Name of Site (where applicable)														
Address														
											Post Code			
Site location (Co-ordinates)	Easting								Northing					
Is the site an existing development or a new development?	<input type="checkbox"/> Existing <input type="checkbox"/> New													
Is there any existing discharge license(s) granted in relation to the site?	<input type="checkbox"/> Yes Reference Number _____ <input type="checkbox"/> No Reference Number _____													
Is planning permission granted for any proposed / existing development at the site?	<input type="checkbox"/> Granted Reference Number _____ <input type="checkbox"/> Pending <input type="checkbox"/> Not Applied For													
Have copies of the following maps / drawings been included?	<input type="checkbox"/> Site Location Map <input type="checkbox"/> Site Layout Map <input type="checkbox"/> Site Drainage System Drawings <input type="checkbox"/> None of the above <i>Refer to "Guidance on Applying for a Discharge Licence - Surface Waters" for details of what is to be included on the maps.</i>													

PART II – GENERAL DETAILS

A. (ii) Identify the sector(s) from which the proposed discharge will be generated.			
Type of Premises	<i>Please tick the box as appropriate</i>		<input type="checkbox"/>
	Accommodation	Household / Holiday Home	<input type="checkbox"/>
		Hotel / Guesthouse / B&B	<input type="checkbox"/>
		Caravan Park / Camp Site	<input type="checkbox"/>
		Nursing Home	<input type="checkbox"/>
	Education	Non-residential facility	<input type="checkbox"/>
		Boarding School	<input type="checkbox"/>
		College / University	<input type="checkbox"/>
	Commercial / Service	Office	<input type="checkbox"/>
		Hairdresser / Beauty Salon	<input type="checkbox"/>
		Doctor Surgery	<input type="checkbox"/>
		Dentist	<input type="checkbox"/>
		Launderettes and Dry Cleaners	<input type="checkbox"/>
		Petrol Station	<input type="checkbox"/>
		Hospital	<input type="checkbox"/>
		Churches, Monasteries etc.	<input type="checkbox"/>
		Amenities (golf course, sport facilities etc.)	<input type="checkbox"/>
		Food & Drink	Public House (with or without food preparation)
	Restaurant / Café / Take Away		<input type="checkbox"/>
	Transport	Airport	<input type="checkbox"/>
		Train station	<input type="checkbox"/>
		Bus station	<input type="checkbox"/>
	Industrial	Dry process industry without canteen	<input type="checkbox"/>
		Dry process industry with canteen where food is prepared	<input type="checkbox"/>
		Chemicals industry	<input type="checkbox"/>
		Wood, paper, textiles and leather	<input type="checkbox"/>
		Food and drink	<input type="checkbox"/>
		Minerals and other materials	<input type="checkbox"/>
		Energy	<input type="checkbox"/>
		Metals	<input type="checkbox"/>
		Mineral fibres and glass	<input type="checkbox"/>
		Fossil fuels	<input type="checkbox"/>
		Cement manufacture	<input type="checkbox"/>
		Waste	<input type="checkbox"/>
		Surface coatings	<input type="checkbox"/>
	Other (Please specify)	e.g. tourism- heritage centre, quarry activities.	<input type="checkbox"/>

A. (iii) Activities Carried Out on Site.

Provide details of the activities carried out on site. Where this involves a process, provide an overview of the process. In particular indicate where domestic waste water / trade effluent is generated.

Provide additional sheets where necessary.

PART II – GENERAL DETAILS

Process Materials & Waste Disposal	Where applicable, complete Appendix A and Appendix B of this form.
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PART III – EFFLUENT DETAILS

PART III – Section 1

A. Effluent Details	
PART III – Section 1 A is to be completed by All Applicants.	
Type of effluent	<input type="checkbox"/> Domestic Waste Water Only <input type="checkbox"/> Trade Effluent Only <input type="checkbox"/> Both Domestic and Trade Effluent
Indicate the type of discharge to which this application relates.	<input type="checkbox"/> New Discharge <input type="checkbox"/> Existing Discharge
Domestic Waste water only (if relevant)	Population Equivalent (p.e.) _____ <hr/> Expected Dry Weather Flow (DWF) _____ m ³ /day. <i>Provide details of how the P.E. & DWF were calculated.</i>
Trade Effluent only or Domestic & Trade (if relevant)	Normal volume of effluent discharged per day is _____ m ³ /day. <hr/> Maximum volume of effluent discharged in one day is _____ m ³ /day. <hr/> Maximum volume of effluent discharged per hour is _____ m ³ /hour.
<i>Provide details of how the trade effluent flows are calculated.</i>	
Effluent Characteristics.	Complete Appendix C and Appendix D of this form.

PART III – EFFLUENT DETAILS

Provide additional sheets where necessary.

PART III – EFFLUENT DETAILS

B. Effluent Details	
PART III – Section 1 B is to be completed by All Applicants.	
<i>Provide additional sheets where necessary.</i>	
Discharge Variability	<p>Briefly identify whether there is likely to be variability in the discharge flow or characteristics e.g. due to process changes, due to seasonal variation, due to diurnal changes etc.</p> <p>Where the discharge shows seasonal or other variation, please provide details of flow volumes and times of discharge.</p> <p>Also provide details of varying effluent characteristics in Appendix C and Appendix D.</p>
Proposed Date of Discharge	<p>Date: _____</p> <p>Identify the proposed date for the commencement of the discharge or where it is an existing discharge identify the date on which the discharge commenced.</p>
Fats, Oils and Grease (FOG) (if relevant)	Provide details of control measures proposed for the removal of FOG from the effluent prior to discharge. Provide technical data sheets for any equipment proposed.
Food Waste (if relevant)	Provide details of provisions for source segregation and disposal of food waste.
Other Discharges	Provide particulars of any other discharges from the premises (e.g. storm water).
Water Supply	<p>Provide details of the source of water that will form part of the discharge e.g. mains, borehole, river etc.</p> <p>The estimated volume of water used per day is _____m³/day</p>
Other Effluent Details	You may be required to furnish such other particulars as the Licensing Authority may reasonably require for consideration of the application e.g. effluent toxicity testing, bioaccumulation testing, biodegradation testing.

PART III – EFFLUENT DETAILS

PART III – Section 2

A. Effluent Treatment	
PART III – Section 2 A is to be completed where the effluent is to be treated prior to discharge.	
Operator of Treatment System (where relevant)	Where the treatment system is to be maintained and operated by a third part please provide the following:
	Contact Name
	Company Name
	Address
	Post Code
	Phone Number (day)
Phone Number (night)	
Fax	
e-mail	
Registered Company Details	
Waste Water Treatment System Overview	<p>Provide particulars of the existing / proposed effluent treatment system. Provide copies of the treatment system process drawings. Provide details of performance standards.</p> <p><i>Provide additional sheets where necessary.</i></p>
Is the Discharge a Direct Discharge or an Indirect Discharge?	<p><input type="checkbox"/> Direct Discharge</p> <p><input type="checkbox"/> Indirect Discharge via Percolation Area, Soakage Pit, Filter System or Other Method</p> <p>Where discharge is via a percolation area, soakage pit, filter system, constructed wetland or other method provide details of the design and construction of same and include such drawings as may be relevant.</p>

PART III – EFFLUENT DETAILS

A. Effluent Treatment	
Hydraulic Loading	<p>Effluent Discharge Rate (maximum) is _____ m³/day</p> <p>Recharge Rate is _____ m³/day</p> <p>Hydraulic loading rate (volumetric flow rate over a given percolation area) is _____ m³/day</p>

B. Effluent Treatment	
<p>PART III – Section 2 B is to be completed where the effluent is to be treated prior to discharge.</p> <p><i>Provide additional sheets where necessary.</i></p>	
Treatment System Maintenance	<p>Provide details of the proposals for the treatment system maintenance including frequency of inspection and de-sludging.</p>
Plant Failure	<p>Identify how any failure of the treatment system will be detected.</p>
Sludge	<p>Provide details of proposals for dealing with sludge.</p>

PART III – EFFLUENT DETAILS

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PART III – Section 3

A. Effluent Monitoring												
PART III – Section 3 A is to be completed by All Applicants. Provide details of the monitoring proposed for the effluent discharge <i>Provide additional sheets where necessary.</i>												
Monitoring the Discharge.	Provide details of any proposals to monitor the discharge e.g. <ul style="list-style-type: none"> ○ Parameters to be analysed; ○ Monitoring programme; ○ Details of any sampling equipment to be used. 											
Location of sampling point(s) (Co-ordinates)	Easting							Northing				
Effluent Flow Monitoring	Provide details of any proposals to monitor the discharge flow.											

PART III – EFFLUENT DETAILS

Licensing Authority Monitoring	Provide a description of how the Licensing Authority will be provided access to the effluent in order to take samples and indicate the point at which such samples may be taken e.g. last manhole before outfall. <i>(Provide grid reference below)</i> .														
Location of Licensing Authority sampling point(s) (Co-ordinates)	Easting								Northing						

PART III – EFFLUENT DETAILS

B. Pollution Control	
PART III – Section 3 B is to be completed by All Applicants. Provide details of any pollution control measures proposed. <i>Provide additional sheets where necessary.</i>	
Accidental Discharges	Provide details of arrangements to prevent accidental discharges.
Provide below, details of emergency procedures, contact persons and facilities available to respond to unexpected incidents.	
Emergency Response	Contact Name
	Phone Number (day)
	Phone Number (night)
	Provide details of any emergency procedure.
Environmental Management Plan	<p>Is there an Environmental Management Plan in place in respect of the site?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><i>If 'Yes' please submit a copy with this application.</i></p>

PART IV – DISCHARGE TO GROUNDWATER

PART IV – Section 1

A. General Details	
Identify why it is not feasible to discharge to sewer.	
Provide details of the newspaper notice.	Name of Publication _____ Date of Print _____ <i>Please include one original plus the required copies of the notice.</i>

PART IV – Section 2

A. Aquifer Characteristics & Receptor Details													
Name of Receiving Water (Waterbody code)													
Location of Discharge (Co-ordinates)	Easting							Northing					
<i>Add additional rows where necessary.</i> All discharge locations to be indicated clearly on OS Map.													
Name of River Basin District	Provide the name of the River Basin District in which the discharge is located _____.												
Water Framework Directive Waterbody Status	<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <input type="checkbox"/> No Status </div> <div style="text-align: center;"> <input type="checkbox"/> Poor </div> <div style="text-align: center;"> <input type="checkbox"/> Good </div> </div>												
Designation*	The receiving water is located within the boundary of: <i>(tick as appropriate)</i> <div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <input type="checkbox"/> An SAC, site code _____. </div> <div style="text-align: center;"> <input type="checkbox"/> An SPA, site code _____. </div> <div style="text-align: center;"> <input type="checkbox"/> None of the Above </div> </div> <p style="font-size: small; margin-top: 10px;"> <i>* Note: Where the discharge is located within the boundary of a Natura 2000 site (SAC or SPA), or where a discharge is likely to impact on a nearby SAC / SPA, an Appropriate Assessment (Natura Impact Statement) must be submitted with this application as required by Council Directive 92/43/EEC on the Conservation of Natural Habitats and of Wild Fauna and Flora (Habitats Directive).</i> </p>												

PART IV – DISCHARGE TO GROUNDWATER

Is GWDTE Located within 1km of the Discharge?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Nearby Surface Water Features	Show the location of nearby surface waters e.g. rivers, streams, lakes and field drainage ditches within 250m of the discharge on a map.
Drinking Water Abstractions	<p>Provide the name of Public/Group Water Supply Schemes within 1km of the discharge and mark their location on a map.</p> <p>Mark the location of any domestic wells located within 250m of the discharge on a map.</p> <p>Is the discharge located within the Zone of Contribution or Source Protection Zone of a Groundwater Protection Scheme?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> None Delineated
	<i>If Yes, provide copy of report and maps.</i>
Soil & Bedrock	Soil type _____ Subsoil type _____ Bedrock Type _____ Karst features _____ <i>Provide copies of reports and maps as relevant.</i>
Aquifer Category and Vulnerability	Identify Aquifer Category _____ Identify Vulnerability Rating _____ <i>Provide copies of reports and maps as relevant.</i>
Topography & Groundwater Flow Direction	Identify slope of land at the point of discharge i.e. Steep (>1:5), Shallow (1:5-1:20), or Relatively Flat (<1:20) _____ Mark groundwater flow direction on a map.
Depth to Water Table	Where available provide depth to water table: _____ m.

Refer to “Guidance on Applying for a Discharge Licence - Surface Waters” for sources of information.

B. Groundwater Background Concentrations		
Receiving Water Background Concentrations.	Parameter	Result (mean)
	Total Dissolved Solids mg/l	
	pH (pH units)	
	Colour	
	Temperature °C	
	Electrical Conductivity µS/cm	
	Total Hardness mg/l CaCO ₃	
	Total Ammonia as mg/l NH ₄ – N	
	Un-ionised Ammonia as mg/l N	
	Molybdate Reactive Phosphorus as (unfiltered MRP)	
	Total Phosphorus as mg/l P	
	Nitrite as mg/l NO ₂ – N	
	Nitrate as mg/l NO ₃ – N	
	Total Nitrogen mg/l N	
	Total organic carbon (TOC)	
	Chloride mg/l	
	Sulphate mg/l	
	Sodium mg/l	
	Magnesium µg/l	
	Manganese µg/l	
	Iron µg/l	
	<i>Escherichia coli</i> (E.coli) number/100 ml	
	Total Coliforms number/100 ml	
	<i>Cryptosporidium</i> number/100 ml	
Refer to “Guidance on Applying for a Discharge Licence - Surface Waters” for guidance on reporting monitoring data and on sampling.		

PART IV – Section 3

A. Impact of Discharge – Site Suitability/Characterisation	
Tier 1 Assessment	<i>A Tier 1 Assessment must be carried out in support of all applications to discharge to groundwater.</i>
Tier 2 Assessment	<p><i>A Tier 2 Assessment must be carried out for the following:</i></p> <ul style="list-style-type: none"> <i>Where the proposed discharge is an input greater than 5 m³/d and less than or equal to 20 m³/d of domestic waste water associated with OSWTS and ICWs;</i> <i>Where the proposed discharge is a trade effluent (moderate risk);</i> <i>Where the Tier 1 Assessment indicates uncertainty about the risk of impact to surface waters, the Applicant must proceed to a Tier 2 Assessment.</i> <p><i>Note that an Applicant may be requested to conduct a Tier 2 Assessment where the Licensing Authority, following a risk screening of the discharge, deems that there is a moderate risk of impact to surface waters from the discharge.</i></p>
Tier 3 Assessment	<p><i>A Tier 3 Assessment must be carried out for applications to discharge to groundwater that relate to the following activities:</i></p> <ul style="list-style-type: none"> <i>Inputs greater than 20 m³/d of domestic waste water;</i> <i>Discharges from Landfills;</i> <i>Where the proposed discharge is a trade effluent (high risk)</i> <i>Where the Tier 1 and Tier 2 Assessments indicate uncertainty about the risk of impact to surface waters, the Applicant must proceed to a Tier 3 Assessment.</i> <p><i>Note that an Applicant may be requested to conduct a Tier 3 Assessment where the Licensing Authority, following a risk screening of the discharge, deems that there is a high risk of impact to surface waters from the discharge.</i></p>
Refer to “Guidance on Applying for a Discharge Licence - Surface Waters” for guidance on Carrying out a Tier 1, Tier 2 and Tier 3 Assessment.	

PART IV – Section 4

Checklist for Applicant when applying for a licence to discharge to Groundwater	
Details to be Submitted	Tick Box where included
1. Fully completed, signed and dated application form (One original plus one hard copy and one electronic copy)	
2. Name & address of Applicant & Agent	
3. Has the type of discharge been identified i.e. new or existing / domestic or trade?	
4. Has location of discharge been identified on a location map?	
5. Newspaper Notice (one original plus one hard copy)	
6. Application fee	
7. Site location map at scale 1:50,000	
8. Site layout map at scale of 1:2500	
9. Drainage system drawings at scale no greater than 1:2500	
10. Description of process giving rise to trade effluent	
11. Description of the proposed method of effluent treatment including details of percolation area (including measures for the control of FOG where appropriate)	
12. Treatment system process drawings	
13. Treatment system operation & maintenance details	
14. Effluent quality, discharge load details and concentration	
15. Receiving water quality assessment (physico-chemical & microbial)	
16. Hydraulic loading calculations	
17. Site investigation results including soil and subsoil characterisation, trial hole and percolation testing.	
18. Details of designated areas (including designation of waters)	
19. Proposals for dealing with sludge (where relevant)	
20. Emergency procedures in case of plant breakdown or pollution incident (including details of storage facilities onsite).	
21. Results of Tier1/Tier2/Tier3 assessment as appropriate	
22. Has one original plus one hard copy and one electronic copy of all associated documentation been included?	

Please include any additional information which you deem to be pertinent to the application / discharge.

APPENDICES

Appendix A - Provide details of process related raw materials, products etc. used or generated on site.							
Substance	EC Number	Nature of Use	Amount Stored (tonnes)	Annual Usage (tonnes)	Danger Classification	Risk Phrase	Safety Phrase
Include copies of Material Safety Data Sheets (MSDS) for materials.							

Ref. European Communities (Classification, Packaging, Labelling and Notification of Dangerous Substances) Regulations, 1994

APPENDICES

Appendix B - Off-site Waste Disposal

Waste Description	EWC. Catalogue No.	Quantity (Tonnes per annum)	Name of site accepting waste	Reference Number of site environment licence	State whether recycling, recovery or disposal

APPENDICES

Appendix C - Characteristics of Trade and/or Domestic Effluent

The following list of parameters is indicative only. Additional physical, chemical or other characteristics as are pertinent to the effluent in question should also be identified.

Complete for all applicable sections, giving concentration ranges where available.

Emission Point co-ordinates (One table per emission point):								
Parameter <i>Concentrations in mg/l unless otherwise stated</i>		Prior to Treatment (if any)			As discharged			
Characteristic <i>Note: Section A = to be completed where discharging domestic effluent only Section A-E = to be completed where discharging a trade effluent.</i>		Max. Hourly	Max. Daily	Mg/l	Max. Hourly	Max. Daily	Mg/l	% Removal
A	Temperature °C							
	pH							
	Biological Oxygen Demand (5 day)							
	Chemical Oxygen Demand							
	Suspended Solids							
	Total Ammonia (as N)							
	Nitrate (as N)							
	Total Phosphorus (as P)							
	Conductivity							
	Molybdate Reactive Phosphorus (MRP)							
	Oils, Fats and Greases							
	Sulphates (as SO ₄)							
	Chlorides (as Cl)							
	Phenols (as C ₆ H ₅ OH)							
	Detergents (as Lauryl Sulphate)							
	Escherichia coli (E.coli) number/100 ml							
Total Coliforms number/100 ml								

APPENDICES

	<i>Cryptosporidium</i> number/100 ml							
B	Metals µg/l							
	Arsenic							
	Chromium							
	Copper							
	Cyanide							
	Fluoride							
	Iron							
	Lead							
	Magnesium							
	Manganese							
	Nickel							
	Zinc							
	Other (<i>please specify</i>)							
C	Pesticides & Solvents:							
	Atrazine							
	Dichloromethane µg/l							
	Simazine µg/l							
	Toluene µg/l							
	Xylenes µg/l							
D	Organohalogen Compounds (Specify)							
	Organophosphorus Compounds (Specify)							
	Organotin Compounds (Specify)							
	Mineral Oils or Hydrocarbons of petroleum origin							
	Other toxic substances (Specify)							
	Colour (degrees hazen)							
E	Other:							
	Other relevant characteristics including fish toxicity data from tests carried out on all or part of the effluent							

APPENDICES

APPENDICES

Appendix D - Dangerous Substances

Are any of the following chemicals used in the process or stored on the premises	Yes/No	Are residual chemical process materials or chemical tailings from a process recovered or discharged?
EDC (1, 2 dichloroethane (C ₂ H ₄ Cl ₂))		
TRI trichloroethylene (C ₂ HCl ₃);		
PER perchloroethylene (C ₂ Cl ₄);		
TCB trichlorobenzene		
Carbon tetrachloride, DDT and pentachlorophenol		
Aldrin, dieldrin, isodrin, HCB (hexachlorobenzene), HCB (hexachlorobutadiene) and CHCl ₃ (chloroform)		
Cadmium		
>100 kg of raw asbestos		
Atrazine		
Dichloromethane		
Simazine		
Toluene		
Tributyltin		
Xylenes		
Arsenic		
Chromium		
Copper		
Cyanide		
Fluoride		
Lead		
Nickel		
Zinc		

APPENDICES

