

Application No. _____
Date Received _____
Reviewer's Initials _____
Date Reviewed _____

TOWN OF MERRIMACK, NEW HAMPSHIRE SEPTAGE WASTEWATER PERMIT APPLICATION

SECTION A. GENERAL INFORMATION

All items are to be completed. Proposed discharge should indicate whether discharge information is actual or estimated. Existing and increased discharges must give actual information for all questions. If an item is not applicable, indicate "NA". Unless otherwise specified, please print or type.

1. Company Name _____
2. Address _____
3. Mailing Address (if different) _____
4. Name of Signing Official _____
5. Title of Signing Official _____
6. Business Phone Number () _____
7. Person to contact concerning information provided herein:
 - a. Name _____
 - b. Title _____
 - c. Business Phone Number () _____
8. Parent Company _____
9. Address _____

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe 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/or imprisonment.

Date

Signature of Official
(Seal if Applicable)

SECTION B. PRODUCT OR SERVICE INFORMATION

10. Brief narrative description of manufacturing or service activity:

11. List all raw materials used in your process/production operations:

[illegible]

12. Principal Products / Services

Amount/Year

[illegible]

13. Since your septage discharges are subject to seasonal variations, please indicate which months are considered your peak discharge months:

14. Shift Information

a. Number of Trucks in operation: _____

b. Number of employees – Shift 1 _____
Shift 2 _____
Shift 3 _____

c. Days of Operation Per Week:

Shifts: 1 _____ 2 _____ 3 _____

d. Shift Start Times:

1st _____

2nd _____

3rd _____

15. Wastewater Discharged to Municipal Sewers: (See Appendix for Definitions)

Type	Average Volume Gallons/Day	Where Discharged
Sanitary	_____	_____
Other	_____	_____

16. Do you agree to list the origin (name, address and phone number) for each septage discharge at the Merrimack Wastewater Treatment Facility?

☐ YES

☐ NO

17. It is illegal for the Merrimack Wastewater Treatment Facility to accept industrial waste at the treatment plant headworks by truck. Do you agree not to truck industrial waste to the Merrimack Wastewater Treatment Facility?

☐ YES

☐ NO

APPENDIX

Sanitary (or Domestic) Wastewater –

- wastewater discharged from human sources: bathrooms, locker rooms, dining rooms