



<i>For MCES Use Only</i>	
Date Received:	_____
Staff:	_____
Approval No:	_____

ONE-TIME INDUSTRIAL DISCHARGE APPROVAL REQUEST FORM

A. General Information:

1. **Responsible Party/Company Name:** _____
Responsible Person: _____ **Title:** _____
Email Address: _____ **Phone:** _____
Mailing Address: _____

2. **Site Name:** _____
Site Address: _____

3. **Requester Name/ Company:** _____
Requester Address: _____ **Phone:** _____
Email Address: _____
4. **Billing Contact Name:** _____ **Phone:** _____
5. **Federal Tax ID No. of Financially Responsible Party:** _____ - _____ - _____
6. **MCES Engineer Contact:** _____

B. Waste Characteristics/Site Information:

1. Describe waste: _____

2. Are there any MSDS sheets applicable to the waste? Yes No
 (Attach relevant MSDS sheets.)
3. Location of waste (tank, sump, barrel, etc.): _____
4. Volume of waste: _____ (gallons)
5. Frequency of discharge: One-time On-going
 If on-going, please note the number or frequency of discharge events per year: _____
6. How soon does the waste need to be removed? _____
7. Means of disposal into the Metropolitan Disposal System (MDS):
 Transport to MCES Disposal Site. Hauler's Name: _____
 Discharge on site to sanitary sewer. Identify proposed point of discharge and attach a map:

8. List below the analytes specified by MCES for analysis. **Attach copies of all laboratory data sheets to this request.**

√	Analyte
	Chemical Oxygen Demand (COD)
	Total Suspended Solids (TSS)
	pH
	Cadmium
	Chromium
	Copper
	Lead
	Mercury
	Nickel
	Zinc
	Phosphorus

√	Additional Analyte(s)

C. Additional Pertinent Information: (Attach additional information if necessary)

D. Public Information Policy

Most documents required by MCES, are considered to be public information. However, if a person considers specific information submitted to MCES to be “trade secret information” as defined by state and federal laws, the person may mark each page containing such information as “trade secret information.” If the marked items are determined to be “trade secret information,” then to the extent allowed by law, MCES will make reasonable efforts to maintain their non-public status. However, MCES is not liable to any persons for disclosure of such information.

E. Certification of Information

I hereby certify that the information supplied in this request is correct and complete to the best of my knowledge.

Name (Print): _____ Title: _____

Signature _____ Date: _____

Email: _____ Phone: _____

Send completed request to address at the top of this form. For further questions regarding this request, contact the Industrial Waste & Pollution Prevention Office at: 651-602-4703, Fax: 651-602-4730.