**Industrial Pretreatment Discharge Request Form**

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| Date of Request: | Click or tap to enter a date. | Proposed Discharge: |[ ]  Existing Discharge: |[ ]

**Contact Information:**

|  |  |
| --- | --- |
| Name & Title: | Click or tap here to enter text. |
| Company Name: | Click or tap here to enter text. |
| Company Address: | Click or tap here to enter text. |
| Phone: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |

**Discharge Details (Volume, Frequency, Location, etc.):**

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| --- | --- | --- | --- |
| Date: | Click or tap to enter a date. | Discharge Volume: | Click or tap here to enter text. |
| Frequency: | *One-Time* |[ ]  *Ongoing* |[ ]  Safety Data Sheet (SDS) Attached: |[ ]
| Location (manhole, building, tank, etc): | Click or tap here to enter text. |

**Description of Discharge (chemicals, pollutants, volume, process, etc) – Please be detailed.**

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| Click or tap here to enter text. |

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**Section Below Is for Official Use Only**

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**Discharge Comments**

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| *pH must be verified to be within* ***5.5-10.5 su*** *prior to discharge.*1. *Reasonable steps must be taken to minimize any discharge of solids.*
2. *Spill control precautions shall be in place to ensure* ***no discharge to a Stormwater drain****.*

*If an un-controlled release occurs, immediately contact City of Boulder Industrial Pretreatment staff at 303-413-7350 and the Wastewater Treatment Coordinator at 303-413-7340 – also immediately email* COBPretreatment@BoulderColorado.gov *.* |

**City of Boulder Approval:**

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| --- | --- | --- |
| Name / Title: | *Sheri DurenIndustrial Pretreatment Supervisor* | */s/* |
| Phone: | *303-413-7362* | Email: | *DurenS@BoulderColorado.gov* |
| **Date Signed:** | Click or tap to enter a date. | **APPROVED:** |[ ]  **NOT APPROVED:** |[ ]