



**WASTEWATER SOURCE CONTROL SECTION**  
**APPLICATION for**  
**TEMPORARY DISCHARGE PERMIT or LETTER OF AUTHORIZATION**

Fees and other conditions apply and will be determined after submittal

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Responsible Party (Waste Generator): \_\_\_\_\_

Site Address: \_\_\_\_\_

**PROJECT DESCRIPTION** (use attachments as necessary)

<b>Amount of Waste</b>	<i>Enter overall project volume, max daily volume, discharge rate, frequency of discharge (e.g., continuous, # of hrs/day, # days/week, etc.)</i>
<b>Source of Wastewater</b>	<i>Describe how the waste was generated</i>
<b>Chemical Make-up</b>	<i>Include chemical or product names, existing lab analyses (additional testing may be requested), available MSDS</i>
<b>Procedure for Disposal</b>	<i>Describe exact location and desired method of discharge, such as manhole number or drain location, hauler name, and equipment used</i>
Discharge start date: _____	Discharge end date: _____

**Company Representative Certification:** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Submit to Sabina Rynas, Wastewater Source Control Section  
 10060 Goethe Road, Sacramento, CA 95827  
 Fax: (916) 854-9286 or Email: rynass@sacsewer.com  
 Phone: (916) 876-6522