

STATE OF WEST VIRGINIA – DEPARTMENT OF ENVIRONMENTAL PROTECTION – DIVISION OF WATER AND WASTE MANAGEMENT - 601 57th STREET SE, CHARLESTON, WV 25304-2345

FORM SG
FACILITY REGISTRATION APPLICATION FORM
FOR
WV/NPDES GENERAL PERMIT
DISPOSAL OF SEWAGE

FOR INFORMATION PURPOSES ONLY
THIS APPLICATION IS REQUIRED TO
BE SUBMITTED ELECTRONICALLY

PART A: TO BE COMPLETED BY THE DIVISION OF WATER AND WASTE MANAGEMENT

MAXIMUM FLOW LIMIT _____ gallons per day (GPD)

TREATMENT CATEGORY CLASSIFICATION _____

PART B: TO BE COMPLETED BY APPLICANT

1. **Owner of Treatment Facility** _____
Owner's Mailing Address _____
City _____ **State** _____ **Zip Code** _____
Phone No. _____ **E-Mail Address** _____
2. **Name of Facility** _____ **Facility** _____
Contact _____ **E-Mail Address** _____
3. **Phone No.** _____ **Facility Location** _____
City _____ **State** _____ **Zip Code** _____
County _____
4. **Legal Entity Responsible for Operation** _____
5. **Other Permits:**
 - A. Bureau of Health Certificate of Approval No. _____
 - B. Department of Environmental Protection, Water Pollution Control Permit WV/NPDES No. _____
6. **Discharge Description:**
 - A. Discharge Outlet No. 001
 - B. Location of Discharge Point: Latitude ____° ____' ____" (North)
Longitude ____° ____' ____" (West)
 - C. Name of Immediate Receiving Stream _____
tributary of _____ tributary of _____
 - D. Distance from discharge point to mouth of immediate receiving stream _____ miles

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7. **Facility Description:**

- A. Service (mark X) Municipality () Trailer Court ()
School () Shopping Center ()
Subdivision () Apartments ()
Park () PSD ()
Other () Describe _____
- B. Number of Persons Served _____
- C. Number of home, camp, mobile home, etc. sites _____

8. **If you are currently covered under the general permit, describe any changes or modifications made to the sewage collection and treatment system in the last five (5) years and skip to Section 10.**

9. **Description of Sewage Disposal System**

A. Collection System:

1. Size, type and length of sewer lines and force main

2. Number of Manholes _____

3. Number of Cleanouts _____

4. Number of Lift Stations _____

B. Treatment Plant:

1. Type of treatment – check appropriate box

() Extended Aeration “Package” Treatment Plant rated capacity _____ GPD; Aeration Chamber Size _____ gallons
Clarifier Size _____ gallons

() Stabilization Pond – Surface Area _____ acres

() Other (Describe) _____

2. Type of Effluent Disinfection – Check appropriate box

() Chlorination

() Chlorination/Dechlorination

() UV Disinfection

() Chlorination Chamber Size _____ gallons

() Other, describe _____

3. Other Treatment Units Existing – Check appropriate box(es)

() Type of Pretreatment _____

() Equalization Tank, Volume = _____ gallons

() Aerated Sludge Holding Tank, Volume = _____ gallons

() Polishing Pond, Volume = _____ gallons

() Alternating Surface Sand Filter, total surface area = _____ square foot

() Rapid Sand Filter, capacity _____
Surface Area _____

() Post Aeration, Type = _____

() Other, describe _____
_____ capacity _____ surface area

10. 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.

Name and Official Title (type or print) _____

Signature _____ Date Signed _____

We will process your personal information (email address, mailing address and/or telephone number) in accordance with the State of West Virginia's Privacy Policy for appropriate and customary business purposes. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. The Division of Water and Waste Management will appropriately secure your personal information. If you have any questions about our use of your personal information, please contact the DEP's Chief Privacy officer at depprivacyofficer@wv.gov.

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