



## PRETREATMENT & POLLUTION PREVENTION DEPARTMENT CATEGORICAL WASTE NO DISCHARGE STATEMENT

Company Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

**Type of Categorical Industry** (*Industries subject to Categorical Pretreatment Standards under 40 CFR 403.6 and 40 CFR chapter I, subchapter N*): \_\_\_\_\_

Applicable Regulation(s): 40 CFR \_\_\_\_\_

Categorical Process(es): \_\_\_\_\_

North American Industry Classification System (NAICS) Number(s): \_\_\_\_\_

I certify that to the best of my knowledge and belief, there has been no discharge of any process wastewater since filing the last report. There are no process solutions, rinses, and clean-up wastes associated with categorical operations discharged into the sanitary sewer system from this facility.

Please indicate how categorical process wastes are handled:

\_\_\_\_\_ Categorical process does not generate wastewater.

\_\_\_\_\_ Categorical process wastes are disposed of offsite at an approved treatment/disposal facility.

\_\_\_\_\_ Categorical process wastes are evaporated.

\_\_\_\_\_ Other disposal mechanism (please explain): \_\_\_\_\_

### CERTIFICATION STATEMENT

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 \_\_\_\_\_ (Print)

Name \_\_\_\_\_ (Signature)

Title \_\_\_\_\_

Date \_\_\_\_\_

**A copy of this statement must contain an original signature of an authorized industry representative. Original signatures are not required for submittals to HRSD; however, original certification statements/signatures that are not submitted to HRSD's P3 Department must be retained by the industry for a period of three (3) years.**