Appendices

- A. Summary of Rates and Fees
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RATES AND FEES

Tests:

Fire Hydrant Backflow Device Tests \$75.00

Grease Trap/Grit Trap Manifest late Fee:

If more than 30 days past due: \$250.00

Industrial Waste Extra Strength Wastewater Resample Fee:

Lab fees and labor \$350.00

Wastewater Discharge Permit:

New Permit	\$100.00
Permit Renewal	\$100.00
Permit Modifications	\$100.00
Operating without a permit	\$300.00

Cost of Sampling and Laboratory analyses:

Sampling/Laboratory fee \$200.00



PRETREATMENT SURCHARGE PROGRAM

Wastewater surcharges are charged to businesses that discharge wastewater exceeding "normal" wastewater standards. Business wastewater can be more heavily concentrated with solids and organic matter than residential wastewater, making it more expensive to treat.

All customers subject to a surcharge are notified by letter, and the monthly surcharge fees are applied to the customer's monthly utility bill. They are based on quantity and quality.

Surcharge for discharges of extra-strength wastewater. Often, the wastewater discharged from restaurants and businesses contain solids and organic material at higher concentrations in comparison to the concentrations found in residential wastewater. Wastewater is considered to be "normal strength" if it meets the wastewater quality standards established for typical residential wastewater. Wastewater that exceeds these standards is considered to be "extra strength". Much of the cost associated with treating wastewater is related to the amount of solids that must be removed and the amount of oxygen that is required to stabilize and digest the organic matter in the wastewater. Therefore, the treatment of wastewater from restaurants and businesses may be significantly more expensive than other users.

Relying on the annual collection and analysis of wastewater samples from each permitted source of industrial waste, the surcharge program enables the District to recover additional costs associated with "extra-strength" wastewater. Individual charges are determined from each source. They are based on Biochemical Oxygen Demand (BOD), Total Suspended Solids (TSS), and Chemical Oxygen Demand (COD). The surcharge is only applied to those permitted sources if their average discharge quality exceeds one or more of the following parameters:

BOD	200mg/l
COD	450 mg/l
TSS	200 mg/l



RECOMMENDED KITCHEN PRACTICES TO LOWER SURCHARGE

Food service establishments can do a lot to improve the quality of discharged wastewater and lower wastewater surcharges by reducing the amount of fats, oils and greases discharged to the sanitary sewer system.

You can do the following to help reduce surcharges, curb pollution and prevent costly plumbing problems:

- Before washing, wipe oily pans thoroughly with used paper napkins.
- Scrape Food from plates into a compost or trash bin.
- Do not use garbage disposals; food waste, whether chopped, un-chopped or pureed, does not belong in the drain.
- Keep waste cooking oil out of drains; instead, collect and sell it to rendering facilities.
- Follow an appropriate grease trap pump-out schedule to keep it functioning properly.
- Do not use prohibited enzymes, bacteria or other agents at your facility.

Any improvements will not be reflected in your surcharge bills until the next time your wastewater is resampled and your surcharge is re-assessed. You can request a surcharge resampling if you have taken any steps to improve your wastewater quality.



USE OF ENZYMES, BACTERIA & OTHER AGENTS

The use of enzymes, chemicals or other agents or devices for the purpose of causing oil, grease and/or solids to pass through the pretreatment facility is prohibited.

The following guidelines have been adopted with regard to the acceptability of the use of enzymes, chemicals, and-or microbial agents in commercial kitchens and grease traps:

- 1. The direct addition of any enzyme, chemical or microbial agent to a grease trap is prohibited. The current grease trap design and sizing criteria are based on gravimetric separation for grease and solids removal. The addition of enzymes or chemical emulsifying agents would impede this gravimetric separation and defeat the purpose of the trap. Any attempt to modify the trap into a biological reactor by adding bacterial or other microbial agents is also prohibited.
- 2. The addition of enzymes, chemicals and/or other agents to floor drains or other fixtures for the purpose of keeping the plumbing between the kitchen and the grease trap clear is allowable if, and only if, adequate care is taken to make sure that the use of such agents does not interfere with grease trap performance. The use of these agents for this purpose is prohibited if there is any sign that the use of the agent is interfering with the grease trap performance.

Four key signs of such interference include:

- 1. The use of any such agents extends the period before the oil, grease and/or solids accumulate to the effective grease trap operating capacity.
- 2. The use of any such agent is accompanied by an emulsification of oil and /or grease trap that causes a shift in the consistency of the grease content from a stratified layer with dense greasy crust on top to an almost uniform pancake batter-like consistency.
- 3. The use of such agent is accompanied by an accumulation of grease or the appearance of free-floating oil or grease downstream of the grease trap.
- 4. The use of any such agent accompanied by any end-of-pipe grab sample result for fats, oils and greases (FOG) above the instantaneous maximum concentration limit of 200 mg/L.

The prohibited use of enzymes, chemical and/or other agents is considered a violation of Travis County Water District # 17 and could subject violators to penalties of up to \$5,000 per violation per day. If such misuse of these agents contributes to a sanitary sewer overflow, the violator shall also be required to pay costs recovery for expensive clean-up and repair operations.

This policy is not intended to address the use of conventional dishwashing detergents, cleaning agents or food processing chemicals as they are used for dishwashing, kitchen cleaning and other food preparation activities, respectively.



Tel: 512-266-1111 • Fax: 512-266-2790

REQUEST SURCHARGE RESAMPLING

Commercial customers who currently pay a wastewater surcharge may request that their business be resampled and their surcharge reassessed. The wastewater surcharge only applies to permitted businesses discharging extra-strength wastewater.

Customers must make resampling requests by email to <u>ADUFEK@wcid17.org</u> or in writing to: Travis County Water Control and Improvement District No. 17 3812 Eck Lane Austin, TX 78734 Attention Al Dufek. Should WCID17 grant the request, re-sampling will consist of two sample collections on two separate, but consecutive, days. The newly calculated surcharge will be used for future utility bills only; no credit or debits would be applied retroactively.

Depending on if there has been a major change in the pretreatment device(s) or the elimination of a waste-producing device, the following requirements would apply:

If no major changes have occurred:

- The customer will be responsible for resampling and analysis costs.
- Payment must be received before resampling, which shall be scheduled within 30 working days after payment receipt. WCID17 may deny the resampling request, or delay resampling (with notification to the customer) if resources to meet customer demand are limited.
- New resampling results plus historical data from up to three previous calendar years of test results will be averaged to calculate the new surcharge.
- Customer may gain approval for only one sample per calendar year.

If the customer documents a major change in pretreatment devices or the elimination of a wasteproducing device:

- The resampling will be performed at additional cost to the customer.
- The new surcharge calculated would be based on the new re-sampling results only.



Wastewater Discharge Permit Application For General Industrial Users

This application is required in conjunction with any proposed discharge of industrial wastewater to the Travis County Water Control and Improvement District No. 17 (WCID 17) sanitary sewer system from general industrial users. All sections of this application must be completed before it will be accepted by WCID 17. Unauthorized revisions to or modification of this form may invalidate the application.

Automotive repair shops, analytical laboratories, bakeries, carwashes, daycare facilities, doctor and dentist offices, grocery stores, laundry facilities, restaurants (and similar food service establishments), schools, photo processors, print shops and silk screen operations shall complete this abbreviated application for general industrial users.

Those applicants that are not sure if they qualify as general industrial users should contact our office at (512) 748-4147 to determine if the use of this application form is appropriate. Our normal business hours are Monday-Friday between 7:00 AM and 4:00 PM. Each different type of wastewater discharge permit application is available on the WCID 17 web site at: <u>http://www.wcid17.org/</u>

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Mail completed application to:	Travis County WCID 17			
	Al Dufek / Office of Industrial Waste			
	3812 Eck Lane			
	Austin, Texas 78734			

A. Identifying Information

Wastewater Service Account Holder Information (pays the wastewater service account serving the facility described in the application)						
Name (legal name of person, company or entity)		Wastewater Service Account Number (from utility bill)				
		() - ext.				
Mailing Address		Telephone No.				
3		() -				
City, State	Zip Code	Fax Number				

Operator Information (operates the facility described in the application)					
Name (legal name of person, company or entity)		Title (if applicable)			
Address of Site Discharging Wastewater		Business Mailing Address			
Site Address		Mailing Address			
City, State	Zip Code	City, State	Zip Code		

Contact Information					
Name (person)		Title			
		() - ext.			
E-mail Address		Telephone No.			
		() - ext.			
Mailing Address		24-Hour Emergency Phone Number			
,		() -			
City, State	Zip Code	Fax Number			

If the operator is not the wastewater service account holder for the facility, briefly describe the operator's scope of responsibility below.

B. Business Activity

1.	Water Consumption (gallons/month):	Estimate	Actual
2.	Wastewater Average (gallons/month):	Estimate	Actual
3.	Standard Industrial Classification (SIC):		

4. Identify the type of business, activity or service conducted at this facility (e.g., restaurant, laundry, service station, garage, office, bakery, photo lab, manufacturing, etc.):

5. Identify the waste processes conducted at this facility (e.g., equipment/floor washing, cooling, metal finishing, x-ray/photo waste, utility blowdown, etc.):

6. Identify the major chemicals used in the processes (e.g., soaps, detergents, caustics, solvents, acids, metal salts, cyanides, etc.):

7. Are any waste liquids or sludges generated and not disposed of in the sanitary sewer system?

🗌 Yes

🗌 No

If yes, provide the information requested in the table below (examples of type of waste/substances includes rendering oil, grease trap contents, photographic waste, grit, used antifreeze, etc.):

Type of Waste/Substance	Transporter Name	Disposal Facility Name	Frequency	Quantity (per year)	

C. Authorized Representative Signature & Certification

The following certification statement must be signed by an authorized representative as the designated signatory authority for the facility. The authorized representative may be:

- a. A general partner or proprietor, if the industrial user submitting reports required by this permit is a partnership or sole proprietorship, respectively.
- b. A responsible corporate officer, if the industrial user submitting the reports required by this permit is a corporation. For the purposes of this section, a responsible corporate officer means:
 - 1.) A president, secretary, treasurer, or vice president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation; or
 - 2.) The manager of one or more manufacturing, production, or operation facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned to the manager in accordance with corporate procedures.
- c. By the director or highest official appointed or designated to oversee the operations of the facility, if the industrial user submitting reports required by this permit is a federal, state or local government entity or other institutional organization (i.e. churches, schools, non-profit agencies...etc.).

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.

Title

Signature

Date

WCID [*] No. 17 Travis County	Travis County Water Control and Improven Wastewater Discharge Permit Number SAMPLE	
sanitary sewer system in accordar permittee's responsibility to comp requirements in the Industrial Wa spill prevention; reporting; notifica Failure to comply with these provi	o discharge industrial wastewater into the Travis County Co nee with applicable provisions of the Industrial Waste and P oly with pretreatment standards, effluent limitations, discha ste and Pretreatment Order, including but not limited to: p ation of changes; off-site waste disposal; and recordkeeping isions is considered a violation of the District's Rules and Pc ult in suspension or revocation of this permit, legal action a ce termination.	retreatment Order. It shall be the arge prohibitions and all other applicable retreatment installation and maintenance; g requirements. licies and Industrial Waste and
Each violation of this permit is pu not to exceed \$5,000 per day per	nishable by a penalty violation. Jason F. Homan, General Manager Travis County Water Control and	Travis County Water Control and Improvement District No. 17 Industrial Waste Department 3812 Eck Lane Austin, Texas 78734 Office Hours: 8:00 am – 4:00 pm Phone: (512)266-1111
Issued/Effective: Expires Midnight:	Improvement District No. 17	Fax: (512) 266-2790 For Wastewater Discharge Emergencies, please call (512) 230-9096

In accordance with federal and local law (Title 40 of the Code of Federal Regulations Part 441 and Chapter 15-10 of the Austin City code), this form must be completed and returned by the applicable due date to the following address:

Travis County Water Control and Improvement District No. 17 Office of Industrial Waste 3812 Eck Lane Austin, TX 78734

For any new dental discharger or for any existing dental discharger that has a transfer of ownership, the report must be submitted within 90 days after: the opening date of the new dental facility; or the effective date of the transfer of ownership, respectively. Dental dischargers operating under the same ownership whose first discharge occurred on or before 7/14/2017, should submit this report as soon as possible but in no case any later than 10/12/2020.

IDENTIFYING INFORMATION

Dental Business Name								
Business Name			Owner Na	me (legal	l name of pe	rson, com	pany or ent	ity)
Dental Facility Physical A	ddress		Dental	Busin	ess Mail	ing Ad	dress	
Street Address (including building and	/or suite ID)		Mailing Ad	dress				
City	State	Zip Code	City				State	Zip Code
			· · ·				•	
Dental Business Contact	Info							
			()	-	ext.		
Contact Name			Primary Ph	none				
			()	-	ext.		
Contact E-mail Address			Secondary	Phone				
Owner of Preparty where	Dontal Du	ainaga ig Ong	rotod (it -					
Owner of Property where	Dental Du	siness is Oper		same, c	check here			
Name (legal name of person, company or entity)		Title (if app	olicable)					
Property Owner Mailing A	ddrocc		Droport		ner Cont	oct Inf	armatia	n
Froperty Owner Maining A	uuless		riopen				Jimalio	11
			()	-	ext.		
Mailing Address			Primary Ph	none				
City	State	Zip Code	E-mail Add	dress				
	···							
Dental Business Ownersh	np i ype: (_ Sole Proprieto	orship	l	Partner	ship	L	Corporation
	[Governmenta	I Agency		Other I	nstitutior	nal Orgar	nization
Key Dates								
Date that Dental Business Operation Started at Facility		Effective Date of Most Recent Ownership Transfer of Dental Business						
			*					
		WCID	No. 17					



Authorized Representative for Dental Business				
Identify an Authorized Representative for the Dental Business below. For a corporation this must be a responsible				
	.12(I)(1). For partnerships or sole proprietorships this must be ent agencies or institutional organizations this must be the			
director or highest appointed official designated to overse				
Delated Marsa	Construct of Authorized Decrease dation			
Printed Name	Signature of Authorized Representative			
	() - ext.			
Title	Telephone No.			
Duly Authorized Representative for Dental Busir	ESS (not valid without signature of Authorized Representative above)			
	the Authorized Representative identified above to sign and			
certify this report if the specified person holds a position w	ith responsibility for the overall operations of the business or			
overall responsibility for environmental matters for the bus	iness in accordance with 40 CFR 403.12(I)(3).			
Printed Name	Signature of Duly Authorized Representative			
	() - ext.			
Title	Telephone No.			
	· ·			
	XEMPTIONS CLAIMED			
Based on any of the following criteria, dental business may qualify for an exemption from: amalgam separator installation and maintenance requirements; and implementation of prescribed best management practices. Mark the check box and include your initials to certify each exemption claimed. If claiming an exemption you may proceed to the Compliance Certification section.				
"The dental business identified exclusively practices one or more of the following dental specialties: oral pathology oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics, or prosthodontics."				
(initials).				
"The dental business identified conducts all dental services from one or more mobile units (defined as a specialized mobile self-contained van, trailer or other equipment used in providing dentistry services at multiple locations)."				
(initials).				
"The dental business identified collects all dental amalgam process wastewater for transfer and hauling to a Centralized Waste Treatment facility as defined in 40 CFR 437."				
(initials).				
· · ·				
"The dental business identified does not place dental amalgam, and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances (according to the rules this means that, on average, less than 5% of the removal procedures involve dental amalgam, and that the business does not stock amalgam capsules of accept new patients with amalgam fillings)."				
(initials).				

PROCESS INFORMATION

Process Overview			
Total Number of Chairs at the Dental Business Facility	Number of chairs in which dental amalgam wastewater may be produced		
Number of Amalgam Separators or Equivalent Amalgam Removal Devices Installed			

Amalgam Separator Information						
Manufacturer Name	Model	Year Installed	Number of Chairs Served	Is Separator Certified Under 11143 Standard?	ISO	
				🗌 Yes 🛛 No		
				🗌 Yes 🗌 No		
				Yes No		
				Yes No		
				Yes No		
Equivalent Amalgam Removal Device Information						
Manufacturer Name	Model	Year Installed	Number of Chairs Served	Average Removal Efficiency Equivalent Amalgam Remo Device as Determined by 4 CFR 441.30(a)(2)i-iii?	val	
Is a 3rd party service prov	Is a 3rd party service provider used in maintaining amalgam separators or equivalent devices?					

3rd party service provide for separator or equivalent device maintenance (if applicable)						
Name (legal name of person, company or entity)			Contact	Person Na	ame	
		()	-	ext.	
Street Address		Primary	Phone			
City	State	Zip Code	E-mail A	Address		

If a 3rd party service is NOT used for such services, provide a brief description of in-house practices employed by the dental business to ensure proper operation and maintenance of these separators or devices in accordance with 40 CFR 441.30 and 40 CFR441.40:

Mark the check box and include your initials to certify each of the following statements:

□ "The dental business identified uses amalgam separator(s) or equivalent device(s) that are designed and will be operated and maintained to meet the requirements specified in 40 CFR § 441.30 or § 441.40."

_____ (initials).

"The dental business identified is implementing Best Management Practices (BMPs) specified in 40 CFR § 441.30 or § 441.40, including the prohibition of the discharge of waste amalgam to the sewer system; and the prohibition of the use of oxidizing and acidic cleaning products on plumbing fixtures and lines that convey amalgam wastes."

____ (initials).

COMPLIANCE CERTIFICATION

The Authorized Representative, or Duly Authorized Representative as identified in accordance with in accordance with 40 CFR 403.12(I), must sign this 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.

Printed Name			
Title			

Signature

Date

		OFFICE USE ONLY			
Date Received:		Entered By:			
WCID17 Water Customer? Yes	🗌 No	If yes, Wastewater Account Number:			
Exempt from Regulations? Yes	🗌 No	Total Number of Separators & Equivalent Devices:			
Were Amalgam Separator(s) / Amalgam Removal Device(s) installed before June 14, 2017?					



INDUSTRIAL WASTE SURCHARGE FORMULA

Using an average of all applicable sample results, a surcharge will be determined for every permitted source of industrial waste based on the following formula:

S = $V \times 8.34 [A (BOD-200) + B (TSS-200)],$

Or, if the Chemical Oxygen Demand (COD) is more than 2.25 times greater than the BOD, then the formula is:

S = V x 8.34 [C (COD-450) + B (TSS-200]

Where:

- S = Surcharge in dollars that will appear on the customer's monthly bills.
- V = Wastewater actually billed in millions of gallons during the billing period.
- 8.34 = Pounds per gallon of water
- A = Unit charge in dollars per pound of BOD in excess of 200 (mg/L), currently \$0.5043 per lb. If measured BOD is less than 200, the rate does not apply.
- BOD = Biochemical Oxygen Demand in milligrams per liter (mg/L).
- 200 = Normal BOD and normal TSS in (mg/L).
- B = Unit charge in dollars per pound of TSS in excess of 200 (mg/L), currently \$0.1087 per lb. If measured TSS is less than 200, the rate does not apply.
- TSS = Total Suspended Solids in milligrams per liter (mg/L).
- C = Unit charge in dollars per pound of COD in excess of 450 (mg/L), currently \$0.2242 per lb. If the COD is less than 450 mg/L, the rate does not apply.
- COD = Chemical Oxygen Demand in milligrams per liter (mg/L).
- 450 = Normal COD in milligrams per liter (mg/L.)

The surcharge billed (S) changes according to the wastewater billed (V), which may vary from one month to the next. For that reason, it is often more useful to discuss surcharge in terms of the Surcharge Factor (SF), the quality component of the surcharge formula. This is expressed as:

(SF) = 8.34[A(BOD-200) + B(TSS-200)]

Or, if the COD is more than 2.25 times greater than the BOD, then the formula is:

(SF) = 8.34[C(COD-450) + B(TSS-200)]

Monthly surcharge fee will be applied to the customer's monthly utility bill. Retesting may be done at the customer's expense, with the District's consent. – (Appendix E)



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Industrial Categories with Categorical Standards

- Airport De-icing
- Aluminum Forming
- Asbestos Manufacturing
- Battery Manufacturing
- Canned and Preserved Fruit and Vegetable Processing
- Canned and Preserved Seafood (Seafood Processing)
- Carbon Black Manufacturing
- Cement Manufacturing
- Centralized Waste Treatment
- Coal Mining
- Coil Coating
- Concentrated Animal Feeding Operations (CAFO)
- Concentrated Aquatic Animal Production (Aquaculture)
- Construction and Development
- Copper Forming
- Dairy Products Processing
- Dental Offices
- Electrical and Electronic Components
- Electroplating
- Explosives Manufacturing
- Ferroalloy Manufacturing
- Fertilizer Manufacturing
- Glass Manufacturing
- Grain Mills
- Gum and Wood Chemicals Manufacturing
- Hospitals
- Ink Formulating
- Inorganic Chemicals Manufacturing
- Iron and Steel Manufacturing
- Landfills
- Leather Tanning and Finishing
- Meat and Poultry Products
- Metal Finishing
- Metal Molding and Casting (Foundries)
- Metal Products and Machinery
- Mineral Mining and Processing
- Nonferrous Metals Forming and Metal Powders
- Nonferrous Metals Manufacturing



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- Oil and Gas Extraction
- Ore Mining and Dressing (Hard Rock Mining)
- Organic Chemicals, Plastics and Synthetic Fibers (OCPSF)
- Paint Formulating
- Paving and Roofing Materials (Tars and Asphalt)
- Pesticide Chemicals
- Petroleum Refining
- Pharmaceutical Manufacturing
- Phosphate Manufacturing
- Photographic
- Plastics Molding and Forming
- Porcelain Enameling
- Pulp, Paper and Paperboard
- Rubber Manufacturing
- Soap and Detergent Manufacturing
- Steam Electric Power Generating
- Sugar Processing
- Textile Mills
- Timber Products Processing
- Transportation Equipment Cleaning
- Waste Combustors



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Notice of Violation

Delivery via: Certified Mail # & U.S. Postal

In the Matter of: Industrial User Name Site/Facility Location(s) Site Permit # and/or Registration #

To: Industrial User Name Industrial User Address City, State, Zip Code

Date: X

PLEASE BE ADVISED, that the Travis County WCID17 Compliance Department ("WCID17") has sufficient information to allege that Industrial User Name ("Industrial User") has violated the following provisions of federal regulations, state statutes, rules, WCID17 ordinances and/or permit conditions at its facility or site .

1. TEXAS {Regulation} WASTEWATER QUALITY DISCHARGE STANDARDS.

{Regulation text}

On {DATE}, WCID17 staff observed {violation}

CORRECTIVE ACTION

To address the alleged violations cited in this Notice of Violation (NOV), the Industrial User is to complete the following actions:

1. Within fifteen (15) days after receipt of this NOV, submit, cease, conduct, prepare, etc. Add text describing the action requested; and

2. Within fifteen (15) days after receipt of this NOV, submit, cease, conduct, prepare, etc. Add text describing the actions requested.

NOTICE

THEREFORE, you are hereby given notice that the above alleged violations have been recorded and documented by WCID17. This NOV and your response does not preclude WCID17 from taking further action with respect to the above alleged violation(s). WCID17 reserves the right to seek any and all remedies available under all applicable WCID17 rules or permits for any violation cited in the NOV. If the Industrial User believes the allegations in this NOV are incorrect, please respond in writing within ten (10) days after receiving this NOV and explain any inaccuracies. If the Industrial User does not respond, WCID17 will conclude that the alleged violations occurred as set forth in the NOV.

IT IS IMPORTANT THAT YOU GIVE THIS MATTER YOUR FULL ATTENTION.

Should the Industrial User fail to respond to the NOV and/or fail to complete the Corrective Actions listed in the NOV, WCID17 may consider further enforcement action including, but not limited to, suspension and/or termination of service.

WCID17 Compliance Department

Al Dufek, Supervisor



3812 Eck Lane • Austin, Tx 78734 Tel: 512-266-1111 • Fax: 512-266-2790

Date

Address

WASTEWATER PRETREATMENT MANIFEST DOCUMENTATION

The records of Travis County Water Control and Improvement District 17 (WCID 17) show that your company has an onsite grit/grease trap with a pumping/disposal frequency of _____ weeks. It is very important to continue to pump your traps on schedule to help your waste systems work properly and to protect the District's wastewater treatment plant.

A copy of the sludge hauling manifest **<u>must</u>** be submitted to WCID 17 no later than ten (10) days of the grease trap cleaning. Please remember that the hauling company you have hired <u>does not</u> submit these documents to the District. It is your responsibility to submit the manifest documents in a timely manner.

Please email the manifest documents to me at <u>adufek@wcid17.org</u>, or by mail: Attn: Al Dufek, WCID 17, 3812 Eck Lane, Austin, TX 78734. If the cleaning/documentation becomes more than thirty (30) days in arrear, upon adoption of the WCID 17 Industrial Waste and Pretreatment Order, you will be subject to a <u>\$250.00 fine for non-compliance</u>.

Thank you for continuing to keep our wastewater systems in compliance. Additional details can be found in WCID 17's Industrial Pretreatment Order, Section 17.1. If you have any additional questions or concerns, please contact me at (512) 748-4147 or by email ADUFEK@wcid17.org. Your prompt delivery of this documentation is greatly appreciated.

Sincerely,

Al Dufek Travis County WCID 17 Pretreatment Compliance Supervisor