

Leave Blank - For AWWU Use Only

AWWU I.D. \_\_\_\_\_

Date Received \_\_\_\_\_

This form must be completed by all Users identified in subsec. 26.50.028 of the Anchorage Municipal Code, before commencing discharge into the Municipality of Anchorage sewerage system. Attach additional pages if necessary to provide complete response.

## NOTICE OF INTENT TO DISCHARGE INDUSTRIAL WASTEWATER

ANCHORAGE WATER AND WASTEWATER UTILITY  
3000 Arctic Boulevard  
Anchorage, Alaska 99503

### SECTION I - TO BE COMPLETED BY USER

1. COMPANY NAME: \_\_\_\_\_

2. DIVISION NAME: \_\_\_\_\_

3. FACILITY ADDRESS: \_\_\_\_\_

4. MAILING ADDRESS: \_\_\_\_\_

5. BRIEF DESCRIPTION OF BUSINESS: \_\_\_\_\_

LEGAL DESCRIPTION: \_\_\_\_\_

PRIVATE SYSTEM # \_\_\_\_\_

6. NAME, TITLE AND TELEPHONE NUMBER OF INDUSTRY REPRESENTATIVE:

a. NAME \_\_\_\_\_

b. TITLE \_\_\_\_\_

c. TELEPHONE NUMBER \_\_\_\_\_

7. DATE DISCHARGE IS EXPECTED TO BEGIN: \_\_\_\_\_

8. NAICS (North American Industry Classification System) CODE FOR FACILITY: \_\_\_\_\_

9. REASON FOR FILING NOTICE OF INTENT:

a.  PURCHASE OF AN EXISTING FACILITY

b.  CONSTRUCTION OF A NEW FACILITY

c.  PROPOSING TO DISCHARGE FROM A FACILITY WHERE THERE IS CURRENTLY NO DISCHARGE

d.  SIGNIFICANTLY ALTERING THE VOLUME OR CHARACTERISTICS OF AN EXISTING DISCHARGE

10. VOLUME OF: Existing Discharge Proposed Discharge  
\_\_\_\_\_ gal/day process wastewater \_\_\_\_\_  
\_\_\_\_\_ gal/day domestic wastewater \_\_\_\_\_  
\_\_\_\_\_ gal/day cooling water \_\_\_\_\_

11. DESCRIBE PROCESS THAT WILL RESULT IN THE DISCHARGE OF AN INDUSTRIAL PROCESS WASTEWATER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. LIST ALL CHEMICALS/POLLUTANTS THAT MIGHT BE PRESENT IN YOUR PROPOSED DISCHARGE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. DESCRIBE ANY WASTEWATER PRETREATMENT METHOD AND FACILITIES TO BE USED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. I AM FAMILIAR WITH THE DISCHARGE STANDARDS, MONITORING AND REPORTING REQUIREMENTS, AND OTHER PROVISIONS OF CHAPTER 26.50 OF THE ANCHORAGE MUNICIPAL CODE. THE INFORMATION CONTAINED IN THIS NOTICE IS FAMILIAR TO ME AND, TO THE BEST OF MY KNOWLEDGE AND BELIEF, SUCH INFORMATION IS TRUE, COMPLETE, AND ACCURATE.

\_\_\_\_\_  
signature

\_\_\_\_\_  
date

\_\_\_\_\_  
title

\_\_\_\_\_  
telephone no.

**SECTION II - TO BE COMPLETED BY AWWU**

APPROVAL TO COMMENCE PROPOSED DISCHARGE IS SUBJECT TO:

\_\_\_\_\_ CONTROL MANHOLE REQUIRED

\_\_\_\_\_ CONTROL MANHOLE WAIVED

\_\_\_\_\_ ATTACHED SPECIAL CONDITIONS (Owners signature required)

REJECTED, FOR REASONS AS SPECIFIED IN THE ATTACHMENT

\_\_\_\_\_  
signature

\_\_\_\_\_  
date

\_\_\_\_\_  
title

\_\_\_\_\_  
telephone no.