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Environmental Monitoring & Enforcement
 Hamilton Water Division, Public Works
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Sewer Discharge Permit Application Form (Part 11 of the Sewer Use By-law 14-090)

General:

Please complete electronically

Personal information in this Sewer Discharge Permit Application Form (“Application Form”) is collected under the authority of the City of Hamilton (“City”) Sewer Use By-law 14-090, as amended (“Sewer Use By-law”), and will be used to evaluate eligibility for, and performing ongoing administration of a Sewer Discharge Permit. Questions about the collection of personal information may be addressed to the Environmental Monitoring and Enforcement Unit of the City at 905-546-2424, ext. 5190 or sewerusebylaw@hamilton.ca. Information collected on this Application Form may be subject to disclosure by the City under the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. M.56.

In accordance with section 11.23 of the Sewer Use By-law, a Sewer Discharge Permit shall expire three years from the date of issuance unless there is an earlier date set out in the permit or when the permit is revoked. Sewer Discharge Permit holders must ensure that they hold a valid permit and must apply for a new permit at least 30 days prior to the expiry of a permit to allow sufficient time for re-application and processing of applications.

The definitions in the Sewer Use By-law shall apply to this Application Form unless expressly stated otherwise.

Instructions:

1. Questions regarding completion and submission of this Application Form are to be directed to the Environmental Monitoring and Enforcement Unit of the City at 905-546-2424, ext. 5190, or via email at sewerusebylaw@hamilton.ca.
2. In accordance with the Ontario *Human Rights Code*, *Ontarians with Disabilities Act, 2001* and the *Accessibility for Ontarians with Disabilities Act, 2005*, if the applicant requires this Application Form in an alternate accessible format, please contact Environmental Monitoring and Enforcement Unit at 905-546-2424, ext. 5190 or sewerusebylaw@hamilton.ca.
3. All sections of this Application Form are mandatory and must be completed unless otherwise explicitly indicated.
4. This Application Form must be fully completed and submitted by:
5. This Application Form must be fully completed before it will be considered by the City for approval. Incomplete applications will not be accepted and will be returned to the applicant. The information submitted in this Application Form and accompanying documents are subject to verification by the City.
6. A complete application for a Sewer Discharge Permit consists of:
 - a) a fully completed and signed Sewer Discharge Permit Application Form including all three Sections and the applicable Schedule(s); and
 - b) all required supporting information identified in Section 2 and each specific schedule of this Application Form and in section 11.3 of the Sewer Use By-law.
7. The original and complete application for a Sewer Discharge Permit, must be emailed to sewerusebylaw@hamilton.ca.
8. Additional information may be required to be submitted by an applicant during the review of any application for a Sewer Discharge Permit initially accepted as complete, including but not limited to engineering reports, a Water Balance Study, or calibration records.

City of Hamilton Use Only			
Date Received	EEO	RSC#	SR#
		RSC	

Section 1 - General Information

1.0 Sewer Discharge Permit Administration

Please indicate if this is an application for:	<input type="checkbox"/> A New Sewer Discharge Permit <input type="checkbox"/> An amendment to an Existing Sewer Discharge Permit Existing Permit No.:
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1.1 Sewer Discharge Permit Type(s) (Check all that apply)

Sewer Discharge Permit Type	*Sewer Connection Type & Number(s)	Description	Schedule to be Completed
<input type="checkbox"/> Overstrength		For discharges of sewage containing any one or more of the following treatable parameters in excess of the limits permitted under Schedule B of the Sewer Use By-law: cBiochemical Oxygen Demand, Total Suspended Solids, Total Phosphorus, Total Kjeldahl Nitrogen or Oil and Grease (Animal/Vegetable).	A
<input type="checkbox"/> Surcharge		For discharge of sewage which contains water from a source other than City's potable water supply.	B
<input type="checkbox"/> Compliance Program		For discharges of sewage that exceeds the Sewer Use By-law limits for any one or more of the parameters contained in Schedule B.	C
<input type="checkbox"/> Chlorides		For discharges of sewage that exceed the Sewer Use By-law limit for Chlorides.	D
<input type="checkbox"/> Temporary		For non-routine and short-term discharges of less than six months.	E
<input type="checkbox"/> Conditional		For discharges of sewage that contain matter as set out in section 4.4 or 4.8.	F
<input type="checkbox"/> Construction Dewatering		For discharges of water originating from Construction Dewatering as set out in section 4.5 or 4.8	G

*The number of the sanitary/combined/storm sewer connection should coincide with the number that is assigned to the sewer connection in the Sewer Use By-law Assessment Report on file for this premises, example: San #1 or Storm #1.

1.2 Physical Address of Premises

Provide the particulars of the premises from which the discharge is to occur.

Physical Address Street Number:	Street Name:
Second Street Number If Applicable:	Second Street Name if Applicable:

1.3 Registered Owner of Premises

If more than one registered owner, please provide the information in this section and attach on a separate page.

More than one registered owner of premises? <input type="checkbox"/> Yes, attached pages <input type="checkbox"/> No			
Legal Name:			
Business Name (only if operating under a different name than above):			
Authorized Representative Contact Name:		Authorized Representative Title:	
Phone Number:	Fax Number:	E-mail:	
Mailing Address Street Number:		Street Name:	
City/Town:		Province:	Postal Code:

1.4 Occupier Information (if applicable)

If occupier is different than the registered owner, a joint permit in the name of both the registered owner and an occupier of the premises is required. Please provide the information below for the occupier. If more than one occupier, please provide the information in this section and attach others on a separate page. If a joint permit is issued, the registered owner and the occupier will be jointly and severally liable.

<input type="checkbox"/> Not Applicable			
More than one occupier of premises? <input type="checkbox"/> Yes, attached pages <input type="checkbox"/> No			
Legal Name:			
Business Name (only if operating under a different name than above):			
Authorized Representative Contact Name:		Authorized Representative Title:	
Phone Number:	Fax Number:	E-mail:	
Mailing Address Street Number:	Street Name:		
City/Town:	Province:	Postal Code:	

1.5 Applicant Information (if applicable)

If the person completing this form is different from any of the above, please complete this section

<input type="checkbox"/> Not Applicable			
Legal Name:			
Business Name:			
Relationship to Registered Owner (for example, "property manager"):			
Authorized Representative Contact Name:		Authorized Representative Title:	
Phone Number:	Fax Number:	E-mail:	
Mailing Address Street Number:	Street Name:		
City/Town:	Province:	Postal Code:	

1.6 Consultant Information (if applicable)

<input type="checkbox"/> Not Applicable			
Name of Consulting Firm:			
Primary Contact:		Primary Contact Title:	
Phone Number:	Fax Number:	E-mail:	
Mailing Address Street Number:	Street Name:		
City/Town:	Province:	Postal Code:	

Section 2 - Supporting Information

2.0 Water Account Information

City water/sewer charges for the premises

Please provide the Water Account Number(s) for the premises (list all that apply):

2.1 Insurance Requirements

Insurance

The applicant must obtain and maintain at their own expense, including the cost of any applicable deductible, the following policies of insurance valid for the term of the proposed discharge:

For **all** types of discharges, except in some cases temporary or one-time discharges:

Commercial General Liability Insurance having an inclusive limit of not less than \$2,000,000 per occurrence

For **compliance program discharges** or where otherwise required by the General Manager:

Sudden & Accidental pollution coverage under either the Commercial General Liability policy or under a separate policy of Pollution liability, which Pollution policy shall carry a limit of \$1,000,000 per occurrence

Certificate of insurance originally signed by an authorized insurance representative for current term of policies:

Attached

Attached

All of the above policies must provide for at least 30 days written prior notice of cancellation of coverage to be given to the City and all policies must be endorsed to include the 'City of Hamilton' as an additional insured. Certificate should list the address in which discharge occurs. Certificate should indicate an insurance company which possess a valid Ontario license number to provide insurance. Certificate should be addressed as the City of Hamilton, City Hall, 71 Main Street West, Hamilton, Ontario L8P 4Y5. However, all certificates, cancellation, nonrenewal or adverse change notices should be **emailed to sewerusebylaw@hamilton.ca**

2.2 Release & Indemnity

Required to be submitted only for compliance program (Schedule C), and conditional (Schedule F) discharges.

Release and Indemnity

A Release and Indemnification Form must be signed and submitted with this application, by the registered owner of the premises to which the Sewer Discharge Permit is to apply, and the occupier of the premises (if seeking a joint permit in the name of both the registered owner and occupier). A blank Release and Indemnification Form is attached to this application form.

Attached

Section 3 - Fees and Certification

3.0 Fees & Invoicing

All fees referred to in this Application Form and otherwise related to the Sewer Use By-law can be found in the [Water and Wastewater/Storm Fees and Charges By-law](#) or by visiting www.hamilton.ca/sewerdischargepermits

Invoices will be issued by the City's water/wastewater billing agent to the address they have on file, unless otherwise indicated below:

Name:		Title:	
Phone Number:	Fax Number:		E-mail:
Mailing Address Street Number:		Street Name:	
City/Town:		Province:	Postal Code:

3.1 Non-Refundable Permit Fees

Invoices will be issued to the registered owner of the premises at the mailing address indicated in Section 1.3 of this Application Form unless a cheque or money order for the applicable fees, in Canadian funds, payable to the City of Hamilton, is provided with this application.

Sewer Discharge Permit Application Fee (required for all new applications)	<input type="checkbox"/>
Amendment Fee (required only if requesting amendment to an existing permit)	<input type="checkbox"/>
Wastewater Characterization Deposit (required only when choosing Option 2 in Schedule A)	<input type="checkbox"/>

3.2 Certification

Registered Owner or Applicant (on behalf of Registered Owner)

I, _____ (print name) certify as the **Registered Owner/Applicant** identified in Section 1 of this Sewer Discharge Permit Application Form that the information provided in this Application Form is true, that the information contained in the documents that accompany this Application Form is true and that the City of Hamilton may rely on all of the foregoing information in determining whether or not to issue the proposed Sewer Discharge Permit(s) described in this Application Form.

Signature of Registered Owner/Applicant

Name: _____

Title: _____

Date: [Click or tap to enter a date.](#)

Schedule A - Overstrength

For discharges of sewage containing any one or more of the following treatable parameters in excess of the limits permitted under Schedule B of the Sewer Use By-law; cBiochemical Oxygen Demand (cBOD); Total Suspended Solids (TSS); Total Phosphorus; Total Kjeldahl Nitrogen (TKN); Oil and Grease (animal/vegetable).

Sampling and Analysis Data

The City will utilize the data on file for the discharge in order to quantify loadings and calculate parameter limits that will be outlined in the conditions of the initial permit and used for invoicing purposes, unless a Wastewater Characterization Study that proves a more accurate reflection of the discharge quality is received by the City. If a Wastewater Characterization Study is completed it must be pursuant to Part 6 of the Sewer Use By-law, consists of at least 10 representative composite samples, at the expense of the permit holder, the options of which are identified below.

Options for Sampling and Analysis of Discharge:

Choose One Option	Method of Sampling and Analysis
<input type="checkbox"/> Option 1	Utilize the City's data on file as it represents the discharge on an ongoing basis. An amendment can be applied for at any time should the discharge characteristics change.
<input type="checkbox"/> Option 2	The applicant can obtain the services of the City, subject to the availability of City resources, to conduct the sampling and analysis at a fee that recovers the cost of staff time, equipment and lab analysis. Please contact the City for a detailed quotation. Please note a Wastewater Characterization Deposit is required prior to the commencement of the services.
<input type="checkbox"/> Option 3	The permit holder can obtain the services of an independent consulting engineer to conduct the sampling and analysis as prescribed by the City and in accordance with Part 6 of the Sewer Use By-law. The results of the sampling and analysis are then submitted to the City for consideration to amend the initial permit.

Billing Method

The formula used to determine overstrength discharge fees is as follows:

$$\text{Discharge fee payable per parameter} = (\text{concentration} - \text{Sewer Use By-law limit}) \times \text{quantity of discharge} \times \text{overstrength discharge fee for the parameter}$$

Please choose the preferred method to determine **concentration**:

- Average - In this method, the City calculates the average concentration for each parameter based on the required sampling and analysis data.
- Actual - In this method, the applicant provides actual and ongoing sampling and analysis data for each parameter for the time period that the permit is in effect and at a frequency approved by the General Manager.

Please choose a method to determine **quantity**:

- Flow measuring device has been installed, calibrated and will be maintained at the expense of the applicant, which measures the quantity of discharge to a sewer works. Suitability of the device and its location are subject to approval by the General Manager.

Flow Measuring Device Type: _____

Serial #: _____

Location: _____

Manufacture Recommended Calibration Frequency: _____

Signed Calibration Certificate(s) must be attached to this application and the applicant shall provide to the Environmental Monitoring and Enforcement Unit via email at sewerusebylaw@hamilton.ca updated Calibration Certificate(s) per manufacture recommended frequency.

- Water consumption records from the City's water/wastewater billing agent
- Quantity reduced by Approved Diversion Rate in Wastewater Abatement Program

- Water Balance Study (only where installation of a flow measuring device is not possible), subject to approval by the General Manager. The Water Balance Study report shall:
 - Cover a minimum period of five calendar days over a minimum of three separate occasions and shall include at least one balance showing seasonal variation, including activities such as shutdowns;
 - Record all water originating from the City's potable water supply, if applicable;
 - Measure all water originating from a source other than the City's potable water supply which will be discharged from the premises to a sewer works;
 - Be completed and certified by a qualified professional engineer, licenced in the Province of Ontario; and
 - Be submitted with this Application Form.
 - Water Balance Study Title: _____
 - Water Balance Study Prepared by: _____
 - Water Balance Study Report Date: [Click or tap to enter a date.](#)

- Other (please describe):

Fees will be calculated per parameter listed in the Sewer Discharge Permit and the total amount will be invoiced quarterly.

Schedule B - Surcharge

For discharges of sewage which contains water that has originated from a source other than the City's potable water supply.

Discharge Information

Discharge Volume:	
Expected Annual Surcharge Discharge Volume (L):	What is the proposed maximum flow rate of the surcharge discharge (litres per second)?
Please detail the Surcharge Contingency Plan should you require to discharge at higher flow rate, or the City request you stop discharge:	
Other discharge information:	

Sampling and Analysis Data

Please attach to this application sampling and analysis data for all parameters evaluated against Sewer Use Bylaw criteria (Schedule B for Sanitary/Combined Sewer) that is representative of the discharge. Any sampling and analysis data that is submitted must have been collected pursuant to Part 6 of the Sewer Use By-law, at the expense of the Applicant.

Billing Method

The formula used to determine surcharge discharge fees is as follows:

Discharge fee payable = **quantity** of discharge x Surcharge Discharge Fee (as set by the City annually in the Water and Wastewater/Storm Fees and Charges By-law)

Please choose a method to determine **quantity**:

- Flow measuring device has been installed, calibrated and will be maintained at the expense of the applicant, which measures the quantity of discharge to a sewer works. Suitability of the device and its location are subject to approval by the General Manager.

Flow Measuring Device Type: _____

Serial #: _____

Location: _____

Manufacture Recommended Calibration Frequency: _____

Signed Calibration Certificate(s) must be attached to this application and the applicant shall provide to the Environmental Monitoring and Enforcement Unit via email at sewerusebylaw@hamilton.ca updated Calibration Certificate(s) per manufacture recommended frequency.

- Water Balance Study (only where installation of a flow measuring device is not possible), subject to approval by the General Manager. The Water Balance Study report shall:
- Cover a minimum period of five calendar days over a minimum of three separate occasions and shall include at least one balance showing seasonal variation, including activities such as shutdowns;
 - Record all water originating from the City's potable water supply, if applicable;
 - Measure all water originating from a source other than the City's potable water supply which will be discharged from the premises to a sewer works;
 - Be completed and certified by a qualified professional engineer, licenced in the Province of Ontario; and
 - Be submitted with this Application Form.
- Water Balance Study Title: _____
- Water Balance Study Prepared by: _____
- Water Balance Study Report Date: [Click or tap to enter a date.](#)

Other (please describe):

Fees will be calculated, and invoices issued quarterly.

Schedule C - Compliance Program

For discharges of sewage that exceed the limits for any one or more of the parameters contained in Schedule B of the Sewer Use By-law in accordance with a compliance program.

Sampling and Analysis Data

The City will utilize the data on file for the discharge in order to quantify loadings and calculate parameter limits that will be outlined in the conditions of the permit. If the Applicant has sampling and Analysis data to be considered in conjunction with the City data, please attach to this application.

Description of Non-Compliance

Please describe what is causing the discharge to exceed the Sewer Use By-law limit(s). Please attach additional pages if required.

Description of Proposed Compliance Program

Please provide a brief summary of the activities such as investigative and remedial actions that are proposed to be undertaken in order to bring the discharge into compliance with the Sewer Use By-law. Please attach additional pages if required.

List Each Proposed Compliance Program Activity in Sequence	Schedule B Parameter(s) to which each Program Activity Relates	Proposed Completion Date for Activity
		Click or tap to enter a date.
		Click or tap to enter a date.
		Click or tap to enter a date.
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		Click or tap to enter a date.
		Click or tap to enter a date.
The expiry date of the Sewer Discharge Permit will be the final completion date of all compliance program activities, subject to approval by the General Manager.		Click or tap to enter a date.

Schedule D - Chlorides

For discharges of sewage that exceed the limit for chlorides set out in Schedule B of the Sewer Use By-law.

Concentration Ranges and Applicable Conditions

Please check the appropriate type of chlorides discharge based on City of Hamilton sampling data:

- Sewage containing chlorides in excess of 1500 mg/L but less than 4000 mg/L:
 - A chlorides sampling and reporting program will be conducted by and at the expense of the Sewer Discharge Permit holder as a condition of the permit; and
 - The City will conduct sampling and analysis of the discharge quarterly.

- Sewage containing chlorides equal to or greater than 4000 mg/L and not more than 5000 mg/L:
 - The applicant shall submit, with this Application Form, an engineering study showing the likely reduction, if any, of the life span of the sewer works, including but not limited to evidence of the condition of the sewer works at the point of discharge;
 - A chlorides sampling and reporting program will be conducted by and at the expense of the Sewer Discharge Permit holder as a condition of the permit; and
 - The City will conduct sampling and analysis of the discharge quarterly.

Chlorides Sewage Discharge Permit Compensation

For chlorides discharges equal to or greater than 4000 mg/L and not more than 5000 mg/L the applicant/registered owner of the premises shall pay for the likely reduction, if any, of the lifespan of the sewer works as a result of the discharge of chlorides permitted under the Sewer Discharge Permit. This payment of compensation will be based on the information provided by the engineering study submitted with this Application Form, which is subject to approval by the General Manager.

Schedule E - Temporary

For non-routine and short term discharges of sewage that exceed the limits for any one or more of the parameters contained Schedule B of the Sewer Use By-law or for discharges of sewage which contains water that has originated from a source other than the City's potable water supply, **for a time period of less than six months.**

Discharge Information

Project Description:	
Project Summary (e.g. Product dewatering, Off spec product, Temporary sites, etc):	
What is the source of the water to be discharged? <input type="checkbox"/> City Water Supply <input type="checkbox"/> Groundwater <input type="checkbox"/> Stormwater <input type="checkbox"/> Lake/Stream/River/Harbour <input type="checkbox"/> Private Well/Reservoir <input type="checkbox"/> Process By-product <input type="checkbox"/> Boiler Blowdown <input type="checkbox"/> Other: _____	
Sewer Type <i>(The "other" option is to cover cases where a proposed discharge into a storm sewer system will ultimately, via connection, flow into the City's sanitary and/or combined sewer system, select final receiving sewer as well)</i> <input type="checkbox"/> Storm Sewer <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Combined Sewer <input type="checkbox"/> Other:	
Discharge Location:	
<i>Please note that applicants can use the City of Hamilton maps tool to identify a City manhole or catch basin for discharge. This can be found by accessing the Water & Wastewater layer from https://map.hamilton.ca/</i>	
Please describe proposed point of discharge into the sewer works (e.g. SAN #1) or attach a diagram:	
Site address or intersection:	Manhole location:
Manhole number:	Will you be installing a connection to the City Sewer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe discharge connection to City Sewer:	
Discharge Volume:	
Expected Total Discharge Volume (L):	What is the proposed maximum flow rate of the surcharge discharge (litres per second)?
Is this a batch discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, how many batches per day?
Please provide the plan to verify that flow rate stays below the maximum rate proposed. <input type="checkbox"/> Flow Meter Data <input type="checkbox"/> Max Pump Rate ____ L/sec <input type="checkbox"/> Orifice Restriction Plate <input type="checkbox"/> Water Balance Study - Attach <input type="checkbox"/> Other – Provide details:	
Please detail the Water Discharge Controls (tanks, valves, etc):	
Please detail the Surchage Contingency Plan should you require to discharge at higher flow rate, or the City request you stop discharge:	
Discharge Period:	
Estimated START date of discharge Click or tap to enter a date.	Estimated END date of discharge Click or tap to enter a date.
What HOURS are proposed for the discharge (e.g. 08:00-14:00)?	What DAYS of the week are proposed for the discharge (e.g. Mon-Fri)?
Frequency of Discharge <input type="checkbox"/> Once <input type="checkbox"/> Continuous <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____	

Please note that applicant will be required to notify the Environmental Monitoring and Enforcement Unit seven (7) calendar days prior to the commencement of the temporary discharge, via email at sewerusebylaw@hamilton.ca.

Is There Known Groundwater or Soil Contamination Onsite?
 When groundwater or soil contamination is suspected, please provide the following information: Description of the contamination source(s), chemical characteristics; and water/soil quality data, including environmental audits, Phase 1 or Phase 2 environmental site assessments, and spills reports.

Pre-treatment Information
 Description of any proposed pre-treatment system(s):

Design capacities:	Contaminant(s) to be removed:
Estimated removal efficiencies:	Treatment by-product and maintenance requirements:

Will treatment achieve compliance with limits in [Sewer Use By-law 14-090, as amended](#)? Yes No
 If not, list parameters that will exceed limits and maximum concentration:

Describe monitoring plan to ensure compliance with [Sewer Use By-law 14-090, as amended](#) and this Permit (sample frequency):

Describe the temporary and sediment control best management practices to be implemented at the property (Optional).

Please note that applicant will be required to collect representative samples of initial discharge and periodically during term of Permit and submit sample results in accordance with the Permit terms.

Other

Does the Applicant have a Permit to Take Water ("PTTW") or Environment Activity Sector Registry("EASR") or other for the premises issued by the Ministry of the Environment, Conservation and Parks ("MECP")?
 Yes, attached to this application No

Applicant to attach to this application Project Drawings/Schematics showing the premise's location, the source of water to be discharged, the flow meter location(s), sampling point location(s) and discharge location(s).

Other discharge information:

Sampling and Analysis Data

Please attach to this application sampling and analysis data for all parameters evaluated against Sewer Use Bylaw criteria (Schedule B for Sanitary/Combined Sewer, or Schedule C and PWQO for Storm Sewer Discharge Limits) that is representative of the discharge in order to quantify loadings and calculate parameter limits that will be outlined in the conditions of the permit and used for invoicing purposes. Any sampling and analysis data that is submitted must have been collected pursuant to Part 6 of the Sewer Use By-law, at the expense of the Applicant.

Billing Method

- If the temporary discharge is overstrength, the following formula is used to determine the overstrength discharge fee:

$$\text{Discharge fee payable per parameter} = (\text{concentration} - \text{Sewer Use By-law limit}) \times \text{quantity of discharge} \\ \times \text{overstrength discharge fee for the parameter}$$

and/or

- If the discharge contains water that has originated from a source other than the City's potable water supply (surcharge), the following formula is used to determine the surcharge discharge fee:

$$\text{Discharge fee payable} = \text{quantity of discharge} \times \text{wastewater/storm treatment charge (as set by the City annually in the Water and Wastewater/Storm Fees and Charges By-law)}$$

Please choose the preferred method to determine **concentration** (if overstrength):

- Average - In this method, the City calculates the average concentration for each parameter based on the required sampling and analysis data.
- Actual - In this method, the applicant provides actual and ongoing sampling and analysis data for each parameter for the time period that the permit is in effect and at a frequency approved by the General Manager.

Please choose a method to determine **quantity** (if overstrength and/or surcharge):

- Flow measuring device has been installed, calibrated and will be maintained at the expense of the applicant, which measures the quantity of discharge to a sewer works. Suitability of the device and its location are subject to approval by the General Manager.

Flow Measuring Device Type: _____

Serial #: _____

Location: _____

Manufacture Recommended Calibration Frequency: _____

Signed Calibration Certificate(s) must be attached to this application and the applicant shall provide to the Environmental Monitoring and Enforcement Unit via email at sewerusebylaw@hamilton.ca updated Calibration Certificate(s) per manufacture recommended frequency.

- Water consumption records from the City's water/wastewater billing agent (only in the case of overstrength discharge).
- Water Balance Study (only where installation of a flow measuring device is not possible), subject to approval by the General Manager. The Water Balance Study report shall:
 - Cover a minimum period of five calendar days over a minimum of three separate occasions and shall include at least one balance showing seasonal variation, including activities such as shutdowns;
 - Record all water originating from the City's potable water supply, if applicable;
 - Measure all water originating from a source other than the City's potable water supply which will be discharged from the premises to a sewer works;
 - Be completed and certified by a qualified professional engineer, licenced in the Province of Ontario; and
 - Be submitted with this Application Form.
 - Water Balance Study Title: _____
 - Water Balance Study Prepared by: _____
 - Water Balance Study Report Date: [Click or tap to enter a date.](#)
- Other (only in the case of overstrength discharge, please describe):

Fees will be calculated, and invoices issued quarterly.

Schedule F - Conditional

For discharges of sewage containing:

- PCBs in excess of the limits set out in Schedule B;
- waste radioactive prescribed substances;
- leachate from a waste disposal site;
- water from a groundwater remediation unit or site containing matter in a concentration in excess of any of the limits for any of the parameters in Schedule B;
- matter in a concentration in excess of any of the limits for any of the parameters in Schedule C; or
- blowdown water;
 - which is otherwise prohibited under Part 4 of the Sewer Use By-law and requires approval from other levels of government.

Non-Compliant Discharges Requested to be Included in Conditional Sewer Discharge Permit

Proposed Discharge	Copy of Approval, Licence or Exemption Attached (please describe):
<input type="checkbox"/> PCBs	<input type="checkbox"/>
<input type="checkbox"/> Waste radioactive prescribed substances	<input type="checkbox"/>
<input type="checkbox"/> Leachate from a waste disposal site	<input type="checkbox"/>
<input type="checkbox"/> Remediated ground water	<input type="checkbox"/>
<input type="checkbox"/> Matter in excess of the limits for any one or more of the parameters permitted under Schedule C to the storm sewer	<input type="checkbox"/>
<input type="checkbox"/> Once through cooling water or blowdown water to the storm sewer	<input type="checkbox"/>

Discharge Information

What is the source of the water to be discharged? <input type="checkbox"/> City water supply <input type="checkbox"/> Groundwater <input type="checkbox"/> Stormwater <input type="checkbox"/> Other: _____	
Is this a batch discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, how many batches per day?	What is the expected discharge duration?
What hours are proposed for the discharge?	What will be the maximum flow rate of the discharge (litres per second)?
Please describe proposed point of discharge into the sewer works or attach a diagram:	
Other discharge information:	

Sampling and Analysis Data

Please attach to this application sampling and analysis data evaluated against Sewer Use Bylaw criteria (Schedule B for Sanitary/Combined Sewer) that is representative of the discharge in order to quantify loadings and calculate parameter limits that will be outlined in the conditions of the permit and used for invoicing purposes. Any sampling and analysis data that is submitted must have been collected pursuant to Part 6 of the Sewer Use By-law, at the expense of the Applicant.

Schedule G – Construction Dewatering

For discharges of water which contains water that has originated from Construction Dewatering

Discharge Information

Project Description	
Project summary:	
Estimated project duration:	
Proposed use (Condo, utilities, etc.):	
Development status <input type="checkbox"/> Prior to conditional approval <input type="checkbox"/> Conditional approval <input type="checkbox"/> Building permit application <input type="checkbox"/> Other:	
Source of Construction Dewatering Activities Generating Water (Check off all that apply)	
<input type="checkbox"/> Taking water from a well or otherwise extracting groundwater	
<input type="checkbox"/> Draining water from a permanent or temporary pond or other surface water body, whether natural or man-made	
<input type="checkbox"/> The permanent or temporary alteration of a natural or pre-existing drainage pattern	
<input type="checkbox"/> Releasing water previously stored in a tank, tanker truck, vessel, or other means of water storage	
<input type="checkbox"/> Other (please specify):	
Sewer Type (<i>The "other" option is to cover cases where a proposed discharge into a storm sewer system will ultimately, via connection, flow into the City's sanitary and/or combined sewer system; select final receiving sewer as well</i>) <input type="checkbox"/> Storm Sewer <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Combined Sewer <input type="checkbox"/> Other:	
Discharge Location	
<i>Please note that applicants can use the City of Hamilton maps tool to identify a City manhole or catch basin for discharge. This can be found by accessing the Water & Wastewater layer from https://map.hamilton.ca/</i>	
<i>Please describe proposed point of discharge into the sewer works (e.g., SAN #1) or attach a diagram.</i>	
Site address or intersection:	Manhole location:
Manhole number:	Will you be installing a connection to the City Sewer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe discharge connection to City Sewer:	
Discharge Volume	
Expected Total Discharge Volume (L)	Expected Maximum Discharge Rate (L/s)
Is this a batch discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, how many batches per day? _____
Please provide the plan to verify that flow rate stays below the maximum rate proposed. <input type="checkbox"/> Flow Meter Data <input type="checkbox"/> Max Pump Rate _____ L/sec <input type="checkbox"/> Orifice Restriction Plate <input type="checkbox"/> Water Balance Study - Attach <input type="checkbox"/> Other – Provide details:	
Please detail the Water Discharge Controls (tanks, valves, etc):	
Please detail the Surge Contingency Plan should you require to discharge at higher flow rate, or the City request you stop discharge:	
Discharge Period	
Estimated START date of discharge	Estimated END date of discharge
What HOURS are proposed for the discharge (e.g. 08:00-14:00)?	What DAYS of the week are proposed for the discharge? (e.g. Mon-Fri)?
Frequency of Discharge <input type="checkbox"/> Once <input type="checkbox"/> Continuous <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____	

Please note that applicant will be required to notify the Environmental Monitoring and Enforcement Unit seven (7) calendar days prior to the commencement of the dewatering discharge, via email at sewerusebylaw@hamilton.ca.

Is There Known Groundwater or Soil Contamination Onsite?

When groundwater or soil contamination is suspected, please provide the following information: Description of the contamination source(s), chemical characteristics; and water/soil quality data, including environmental audits, Phase 1 or Phase 2 environmental site assessments, and spills reports.

Pre-treatment Information

Description of the proposed pre-treatment system(s):

Design capacities:

Contaminant(s) to be removed:

Estimated removal efficiencies:

Treatment by-product and maintenance requirements:

Will treatment achieve compliance with limits in [Sewer Use By-law 14-090, as amended](#)? Yes No If not, list parameters that will exceed limits and maximum concentration

Describe monitoring plan to ensure compliance with [Sewer Use By-law 14-090, as amended](#) and this Permit (sample frequency):

Describe the temporary and sediment control best management practices to be implemented at the property (Optional):

Please note that applicant will be required to collect representative samples of initial discharge and periodically during term of Permit and submit sample results in accordance with the Permit terms.

Other:

Does the Applicant have a Permit to Take Water ("PTTW") or Environment Activity Sector Registry ("EASR") for the premises issued by the Ministry of the Environment, Conservation and Parks ("MECP")?

Yes, attached to this application No

Applicant to attach to this application Project Drawings/Schematics showing the premise's location, the source of water to be discharged, the flow meter location(s), sampling point location(s) and discharge location(s)

Other discharge information:

Sampling and Analysis Data

Please attach to this application sampling and analysis for all parameters evaluated against Sewer Use Bylaw criteria (Schedule B for Sanitary/Combined Sewer, or Schedule C and PWQO for Storm Sewer Discharge Limits) that is representative of the discharge in order to quantify loadings and calculate parameter limits that will be outlined in the conditions of the permit and used for invoicing purposes. Any sampling and analysis data that is submitted must have been collected pursuant to Part 6 of the Sewer Use Bylaw at the expense of the Applicant.

Billing Method (only for sanitary sewer or combined sewer discharges)

The formula used to determine Construction Dewatering discharge fees is as follows:

$$\text{Discharge fee payable} = \text{quantity of discharge} \times \text{wastewater/storm treatment charge (as set by the City annually in the Water and Wastewater/Storm Fees and Charges By-law)}$$

If the Construction Dewatering discharge is also overstrength, the following additional formula is used to determine the overstrength discharge fee:

$$\text{Discharge fee payable per parameter} = (\text{concentration} - \text{Sewer Use By-law limit}) \times \text{quantity of discharge} \times \text{overstrength discharge fee for the parameter}$$

Concentration shall be based on the applicant provided actual and ongoing sampling and analysis data for each parameter for the time period that the permit is in effect and at a frequency approved by the General Manager.

Please choose a method to determine quantity:

- Flow measuring device has been installed, calibrated and will be maintained at the expense of the applicant, which measures the quantity of discharge to a sewer works. Suitability of the device and its location are subject to approval by the General Manager.

Flow Measuring Device Type: _____

Serial #: _____

Location: _____

Manufacture Recommended Calibration Frequency: _____

Signed Calibration Certificate(s) must be attached to this application and the applicant shall provide to the Environmental Monitoring and Enforcement Unit via email at sewerusebylaw@hamilton.ca updated Calibration Certificate(s) per manufacture recommended frequency.

- Water Balance Study (only where installation of a flow measuring device is not possible), subject to approval by the General Manager. The Water Balance Study report shall:

- Cover a minimum period of five calendar days over a minimum of three separate occasions and shall include at least one balance showing seasonal variation, including activities such as shutdowns;
- Record all water originating from the City's potable water supply, if applicable;
- Measure all water originating from a source other than the City's potable water supply which will be discharged from the premises to a sewer works;
- Be completed and certified by a qualified professional engineer, licenced in the Province of Ontario; and
- Be submitted with this Application Form.

- Water Balance Study Title: _____

- Water Balance Study Prepared by: _____

- Water Balance Study Report Date: _____

- Other (please describe):

The applicant shall provide to the Environmental Monitoring and Enforcement Unit via email at sewerusebylaw@hamilton.ca a report of the sample analysis and volume discharged to the sewer works.

Release and Indemnification Form

(Only required for Schedule C and Schedule F Discharges)

Address of Premises to which the Sewer Discharge Permit is to apply (the "Premises"):

(insert address above)

IN CONSIDERATION and as a condition of the City of Hamilton (the "City") granting the Sewer Discharge Permit applied for, each of the undersigned, for itself, its transferees, successors and assigns agree as follows:

1. Release – I/we hereby release and forever discharge the City, its officers, officials, employees, servants and agents (collectively the "Releasees"), from any and all claims, demands, actions, causes of action, interest, costs, damages, expenses, loss, suits or other proceedings, however arising, which I/we now have or may hereafter have against the City in consequence of the discharge of sewage pursuant to the Sewer Discharge Permit, except to the extent such proceedings are attributable to or caused by the negligence of the Releasees or any discharge into the sewers that exceeds the requirements of any City of Hamilton by-law, including the Sewer Use By-law, notwithstanding the Sewer Discharge Permit.

2. Assumption of Liability – I/We agree to assume all liability associated with any discharge permitted by any Sewer Discharge Permit that has been issued to me/us by the City of Hamilton that exceeds the allowable limits set out in any City of Hamilton by-law, including the Sewer Use By-law.

3. Indemnity – I/we hereby agree to indemnify, defend and hold harmless the Releasees from and against any and all claims, demands, actions, causes of action, obligations, interest, costs, damages, expenses, fines, penalties, loss, suits or other proceedings for loss, damage, injury or death which the City suffers or incurs or is liable for by reason of the discharge of sewage pursuant to the Sewer Discharge Permit or as a result of or in connection with the issuance of the Sewer Discharge Permit, no matter how caused, except to the extent the loss, damage, injury or death is attributable to or caused by the negligence of the Releasees or any discharge into the sewers that exceeds the requirements of any City of Hamilton by-law, including the Sewer Use By-law, notwithstanding the Sewer Discharge Permit.

I/we agree to conform to all applicable requirements of City of Hamilton by-laws and the conditions of the Sewer Discharge Permit. By submitting and signing this Release and Indemnification Form, I/we expressly acknowledge and agree that I/we have read, fully understand and agree to be bound by the provisions herein, and further acknowledge and agree that this Release and Indemnification Form shall survive the alteration, suspension, revocation, termination or expiry of the Sewer Discharge Permit.

Where more than one party is signing below, all parties agree to be jointly and severally bound by the provisions of this Release and Indemnification Form.

Registered Owner of Premises:

(Print legal name of Registered Owner)

(Print name & position of authorized signing officer)

Date

Signature of Registered Owner

Occupier of Premises (if applicable):

(Print legal name of Occupier)

(Print name & position of authorized signing officer)

Date

Signature of Occupier