

Sewer Use By-law Assessment Report

General:

Please complete electronically

Personal information which may be requested in this Sewer Use By-Law Assessment Report ("Report") 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 compliance with said by-law. Questions regarding the completion or submission of this report or the collection of any personal information may be addressed to the Environmental Monitoring and Enforcement Unit of the City of Hamilton at 905-546-2424 ext. 5190 or via email at sewerusebylaw@hamilton.ca. Information collected on this report 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 Part 5 of the Sewer Use By- law 14-090, as amended:

If required by written notice from an officer, the owner or occupier of a premises shall complete and submit to the officer:

(a) a Sewer Use By-law Assessment Report, **no more than 60 days** after delivery of the written notice.

Failure to submit the completed Report by the due date outlined below, may result in enforcement action under the Sewer Use By-law.

The property owner, if different from occupier, shall be provided with this completed Report by the City.

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

Instructions:

- 1. Please complete this Report electronically. Once complete, click on the "Submit by Email" button on page 6.
- 2. The original completed Sewer Use By-law Assessment Report must be submitted by:
- 3. The grey shaded areas are for City of Hamilton use only.
- 4. The yellow shaded areas contain information that you are to attach to this Report.

Verification Inspection

An Officer will visit your facility on the date and time specified below to verify the information provided in this report. Please contact the Officer to reschedule if necessary and to specify any site-specific requirements related to their visit, (i.e., personal protective equipment, etc.).

Please have the following available for review (but not limited to as applicable):

- Site drainage and plumbing plans
- O.Reg 347 waste haulage manifests for hazardous wastes
- Spill contingency plan and related spills training documents
- Calibration records for flow meters and any wastewater monitoring devices (i.e. pH meter)
- Interceptor cleaning invoices
- SDS for main chemicals used in process/stored in large quantities on site

Date (yyyy-mm-dd):	Time:	AM	PM	
Officer's Name:	Phone #: 905-546-24	124		Ext.
Email:	RSC#:			
Company Escort:	Company Escort Pho	one #:		

1.0 Physical Address of Premises/Project

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

Street Number:	Street Name:		Туре:		Direction:	Unit/Box/Etc.:
Cross Street:	•	City/Town:		Province:		Postal Code:

1.1 Property Owner Information

Provide the particulars of the registered owner of the property from which the discharge is to occur.

Legal Name of Property Owner:						
Operating Name of Property Owner (if other):						
Contact Name/Title (authorized representative):			E-mail:			
Phone: Ext.		Ext.	Cell Phone:			
Street Number:	: Street Name:		Туре:	Direction:	Unit/Box/Etc.:	
City/Town:	•	Province:	·	Postal Code:		

1.2 Property Occupier Information

Provide the particulars of the occupier or tenant of the property from which the discharge is to occur. Each occupier should fill out a separate form.

Legal Name of Occupier:							
Operating Name of Occupier (if other):							
Contact Name/Title: E-mail:							
Phone: Ext.		Ext.	Cell Phone:				
Street Number:	Street Name:		Type:	Direction:	Unit/Box/Etc.:		
City/Town:		Province:		Postal Code:			

1.3 Site Information/ Layout

Number of employees:	Number of shifts per day:	24/7 Operation?	Yes	No				
Please attach to this report directly or by separate email , any blue-prints or engineering schematics of premises including all buildings, water meters, pretreatment works, property boundaries, plumbing connections, drains, floor drains, catch basins, stormwater flow control and manholes for both sanitary and storm sewers. If drawings cannot be provided, please provide illustrations to the best of your ability .								
Please attach to this report directly or by separate email, a flow diagram of any processes that utilize water or								

Please <u>attach</u> to this report **directly or by separate email**, a flow diagram of any processes that utilize wate discharge to sewer.

City of Hamilton Use Only:	Officer's Comments:
List private sanitary and storm manhole locations:	
1)	
2)	
3)	
4)	
Site Discharge to: Sanitary Combined	

1.4 Business Activities

				s of services and/or products you provide:
Process wastewater discharge	to sewer (check all t	hat apply)	:	
Continuous	Intermittent	I	Batch	No Process Wastewater Discharged
Specify Discharge Days:		& 1	imes:	
Production Cycle:				
Cleaning Cycle:				
Seasonal Production Change				
City of Hamilton Use Only:				Officer's Comments:
Company production identified in Sampling requirements:	oollution matrix NAICS	;#		
Will prior notification of batch disch	arge be required? Y	es No	N/A	

Section 2 – Water and Wastewater

2.0 Surcharge

Sources (Check all that apply)	Annual Volume (m ³)	Peak Flow Rate (L/s)	How are volume and flow rate measured?
Private Well/Reservoir			
Lake/Harbour			
Rainwater Harvesting			
Other (specify below):			

Do you have a Permit to take from the Ministry of Environm		Yes	No	If Yes, Permit Number: Approximate volume per day:		
Please attach to this report directly or by separate email , the site's contingency plan in the event that the City requires a diversion of these waters from the City's sewer system.						
City of Hamilton Use Only:	Officer's Com	ments:				
Annual Alectra consumption						
m ³						

2.1 Wastewater Discharge

	Check	Annual	Discharged	l to:	How is volume measured/estimated?
Туре	all that apply	Volume (m ³)	Sanitary/ Combined	Storm	
Domestic sewage – bathrooms, sinks, etc.					
Process wastewater					
Boiler blow down					
Contact cooling water					
Non-contact cooling water					
Rainwater					
Groundwater					
Landfill Leachate					
Other (specify):					
City of Hamilton Use C	Only:				Officer's Comments:
Are meters calibrated ann	nually?	Yes	No N/A		
Surcharge permit require	ed?	Yes	No N/A		
Conditional permit requi	red?	Yes	No N/A		
ECA for PCBs:					
ECA for waste disposal s	ite leachate:				

2.2 Hauled Sewage and Interceptors

Does the facility have sewage	Yes No							
If Yes, check all that apply and attach most recent cleanout invoice:								
TypeCheck all that applyCapacity (m ³)Clean-out frequencyHauling Company Name								
Sewage Holding Tank								
Sewage Septic Tank								
Grit/Sediment Interceptor								

Animal/Vegetable Grease trap				
Mineral/Synthetic oil separation				
Other (specify):				
City of Hamilton Use Only:			Officer's Comments	:
Provided invoices, verification?	Yes No	N/A		

2.3 Pretreatment of Wastewater Discharges

Does the site have any pretreatment systems for process effluent prior to discharge to the sewer works?					
Pretreatment provided (check all that apply)	No pretreatment provided				
Air Flotation pH Treatment Interceptor (grease, oil, solids, etc.) – Complete 2.2	Screening Other Treatment:				
Biological Treatment, Type:					
City of Hamilton Use Only:	Officer's Comments:				
Treatment system maintained: Yes No N/A Location of final pH probe:					

2.4 Stormwater Discharges

Is there stormwater pretreatment (e.g. oil/grit interce	eptors) on-site?	Yes	No
If yes, maintenance/cleanout Interval:			
Are there stormwater flow rate controls?		Yes	No
Ministry of Environment approval for stormwater d	lischarges:	Yes	No
If yes, ECA Number:	EASR Number:		
City of Hamilton Use Only:	Officer's Cor	nments:	
Storm Water pretreatment maintenance records verified?			
Yes No N/A			

2.5 Potable Water Diversion

Does facility divert any wastewater sourced from the city po	otable water supply from City sewer?	Yes	No					
Is the diverted volume 25% of supply or greater? If yes, ple	ease check all that apply:	Yes	No					
Water contained in final product								
Environmental release (e.g. air conditioning, heating, evaporation)								
Consumed in process:								
Discharged to surface water (lake, creek, ditch – ECA	Discharged to surface water (lake, creek, ditch – ECA)							
Other (specify):								
City of Hamilton Use Only:	Officer's Comments:							
WWAP potential? Yes No								
Location of water meters:								

Section 3 – Material Handling and Spill Plans

3.1 Materials Handling and Disposal

Materials (including chemicals, raw/ intermediate/finished/waste products / by-products etc.) stored on site? Yes No If yes, please list largest quantity/highest risk materials below; if more than three, attach here:								
Are you registered to report to NPRI?	Yes	No	lf ye	es, NPRI ID:				
Materials	Quantity/ Volume	Unit	Disposal Method					
City of Hamilton Use Only:				Officer's Comments:				
Materials storage location:								
Is the storage near drain?		Yes	No					
Spill containment present?		Yes	No					

3.2 Spill Contingency Planning

Is a Spill Contingency Plan available?	Yes	No
Is Spill Contingency Plan posted in visible areas?	Yes	No
Plan include City of Hamilton Spill Reporting Line (905-540-5188)?	Yes	No
Are staff trained on Spill Contingency Plan and use of Spill Kit?	Yes	No

City of Hamilton Risks associated w	-			Officer's Comments:
San/comb	Storm/ditch	Envir	onment	
Spill Contingency P	lan Posted:	Yes	No	

Section 4 – Declaration and Findings

I, ______ (insert name) solemnly declare on behalf of the Occupier of the Property as identified in Section 1 that the information contained in this Sewer Use By-law Assessment Report is true, that the information contained in the documents that accompany this Sewer Use By-law Assessment Report is true and that the City of Hamilton may rely on all of the foregoing information in determining whether or not to provide any preliminary approval of the discharge described in this Sewer Use By-law Assessment Report.

_____ day of _____, 20_____

Signature of Occupier of the Premises

For City of Hamilton Use Only:		Sewer Dischar	ge Peri	mit Re	quirem	nents:			
Risk level: Low Medium High		San / Stm#	Α	В	С	D	E	F	None
WWAP eligible Yes	No								
Requires manhole install Yes	No								
Other (specify):									
Comments (summarize recommendations):									
Officer Name:		05							
Badge #: Date:		Officer Sign	ature:						