

Permit Application to Discharge Less than 100,000 GPD Domestic Wastewater (Central Coast)

This application package constitutes a Report of Waste Discharge (ROWD) pursuant to California Water Code Section 13260 and serves as a notice of intent to enroll in the State Water Resources Control Board Order WQ 2014-0153-DWQ, General Waste Discharge Requirements for Small Domestic Wastewater Treatment Systems (Small General Permit). Section 13260 states that persons discharging or proposing to discharge waste that could affect the quality of the waters of the State, other than into a community sewer system, shall file a ROWD containing information which may be required by the appropriate Regional Water Quality Control Board.

The submission of this form marks the beginning of the application process for enrollment into the Small General Permit. This application is intended for facilities that cannot be permitted through their local agencies' approved Local Agency Management Program (LAMP).

A copy of the Small General Permit can be found:

https://www.waterboards.ca.gov/centralcoast/board_decisions/adopted_orders/2014/2014%20small%20domestic%20GP.pdf

(https://www.waterboards.ca.gov/centralcoast/board_decisions/adopted_orders/2014/2014%20small%20domestic%20GP.pdf).

Additional Information Requirements:

The Central Coast Regional Water Quality Control Board (Central Coast Water Board) will notify you regarding the completeness of your application. If your application is incomplete, the Central Coast Water Board will send you a list of discharge specific information necessary to complete the application process. The completion date of your application is normally the date when all required information, including the correct fee, is received by the Central Coast Water Board. All dischargers regulated under waste discharge requirements must pay an annual fee. Your application fee serves as your first annual fee. The Central Coast Water Board will notify you of your application fee based on an evaluation of your proposed discharge. Please do NOT submit a check for your application fee until requested to do so by the Central Coast Water Board.

* Required

Instructions for filling out this form

This application must be completed in one sitting (the application cannot be saved) **and will take about 30-45 minutes to complete if you have reviewed the questions ahead of time.** The application questions can be found on our website. **We strongly advise you review the application questions ahead of time.**

Applicants must begin at the top of this form and complete every question for the form to be considered complete. Additionally, applicants must submit additional required documents in PDF to RB3-WDR@waterboards.ca.gov (mailto:RB3-WDR@waterboards.ca.gov) as specified in question 108 and 109. If you have questions regarding this application or the application process, please contact RB3-WDR@Waterboards.ca.gov (mailto:RB3-WDR@Waterboards.ca.gov). Once the application is submitted, you will receive an email from the Central Coast Water Board to review and sign the application summary via DocuSign. Once the application is signed, then the Central Coast Water Board will begin the application review process and will reach out if we have any questions.

Note: Once the application is submitted, you **cannot make** revisions to the form. To make changes to your application, please contact the Central Coast Water Board at RB3-WDR@Waterboards.ca.gov (mailto:RB3-WDR@Waterboards.ca.gov).

1. Person's First and Last Name Completing this Application *

Please include the first and last name of the individual who is completing the application.

2. Person's Email Completing this Application *

Please include the email of the individual who is completing the application.

For Reference Only

3. Reason for Filing (Check all that apply) *

- New Discharge or Facility
- Change in Design or Operation (upgrade)
- Repair
- Change in Type of Discharge
- Changes in Ownership/ Operator
- Waste Discharge Requirements Update
- Impacted by Fire Damage
-

Other

For Reference Only

Preliminary Screening

To proceed with this application, the proposed wastewater treatment system must be representative of all the following statements.

If you answer 'YES' to any of the THREE following questions, then this application DOES NOT apply to you.

4. Average wastewater generated is greater than or equal to 100,000 gallons per day. *

If the facility is requesting a permitted flow greater than 100,000 GPD or the discharger anticipates flows will be greater than 100,000 GPD in the next three years, please apply for the Large General Permit instead of the Small General Permit.

- Yes, monthly average wastewater generated is greater than 100,000 gallons per day.
- No, monthly wastewater generated is less than or equal to 100,000 gallons per day.

5. Treated or untreated wastewater will be discharged into surface water bodies (rivers, streams, lakes, etc.) of the United States. *

- Yes, treated wastewater will be discharged into surface water bodies (rivers, streams, lakes, etc.) of the United States.
- No, treated wastewater will NOT be discharged into surface waters (rivers, streams, lakes, etc.) of the United States.

6. Hazardous Waste will be discharged with wastewater. *

- Yes, Hazardous Waste will be discharged with wastewater.
- No, Hazardous Waste will NOT be discharged with wastewater.

Facility Information

You must provide the factual information listed below for ALL owners, operators, and locations and, where appropriate, for ALL general partners and lease holders.

7. Facility Name *

8. Facility Street Address: *

Physical location of the facility (no P.O. Box numbers). If no address exists, state street name and nearest cross street.

9. Facility City, State, Zip Code *

For Reference Only

10. Select the Facility County *

- Santa Clara
- Santa Benito
- Santa Cruz
- Monterey
- San Luis Obispo
- Santa Barbara
- Ventura
- San Mateo

11. Facility Contact Person *

Individual that Central Coast Water Board should reach out to in the future for routine correspondence regarding the permit.

12. Facility Contact Telephone Number (xxx-xxx-xxxx) *

13. Facility Contact Email *

For Reference Only

Legal Entity

The permit will be issued to the legal entity that is discharging the wastewater.

14. Legal Entity Name *

Name of the legal entity that is discharging the wastewater. If this is an agency, list the agency's name. If this is a business, enter the business entity name as registered with the California Secretary of State. Here is a link to the California Secretary of State's website: <https://businesssearch.sos.ca.gov/> (<https://businesssearch.sos.ca.gov/>). This is typically the entity that owns of the facility but can be another entity that is taking responsibility for the wastewater discharge.

15. Legal Entity Business Entity Number Registered with the CA Secretary of State *

The entity number can be found here: <https://businesssearch.sos.ca.gov/> (<https://businesssearch.sos.ca.gov/>). If you are an agency, list "not applicable".

16. Legal Entity Mailing Street Address *

17. Legal Entity City, State, Zip Code *

18. Legal Entity Application Signatory Name *

The following people may sign the application:

- for a corporation, a principal executive officer of at least the level of senior vice-president
- for a partnership or individual (sole proprietorship), a general partner or the proprietor
- for a governmental or public agency, either a principal executive officer or ranking elected/appointed official
- for an LLC, an LLC member or manager given signing authority by the operating agreement of the LLC

19. Legal Entity Application Signatory Title *

Title of the person signing the application

20. Legal Entity Application Signatory Email Address *

21. Legal Entity Federal Tax Identification Number

Note: Individuals do not need to provide this information. Please provide your Federal Tax Identification Number if you are a corporation, governmental agency, partnership, LLC, or other.

For Reference Only

Facility Operator

22. Facility Operator (the agency or business name) *

List the agency or business name that will provide a qualified operator or service provider. This facility operator is a qualified service provider whom will perform required operations and maintenance. If the operator will be an employee of the Facility, then simply state 'Qualified In-House Operator'.

23. Facility Operator Contact Person *

The name of the person who is the lead operator or service provider

24. Facility Operator Registration Number (if applicable)

A qualified operator may be registered with the California Wastewater Operator Certification Program. List each individual's registration number here. Separate numbers with commas.

25. Facility Operator Grade (if applicable)

26. Facility Operator Street Address *

For Reference Only

27. Facility Operator City, State, Zip Code *

28. Facility Operator Telephone Number (xxx-xxx-xxxx) *

29. Facility Operator Email *

For Reference Only

Landowner

30. Landowner Name *

List the name of the entity or person that is listed on the property title.

31. Landowner Address *

32. Landowner City, State, Zip Code *

33. Landowner Contact Person *

34. Landowner Telephone Number (xxx-xxx-xxxx) *

35. Landowner Email *

For Reference Only

Address where Legal Notice may be Served

Address where legal notice may be served, person to contact, and phone number.

36. Street Address Where Legal Notice May be Served *

37. City, State, Zip Code Where Legal Notice May be Served *

38. Contact Person Where Legal Notice May be Served *

39. Telephone Number Where Legal Notice May be Served *

40. Email Where Legal Notice May be Served *

For Reference Only

Facility Billing Address

Address where annual fee invoices should be sent

41. Facility Billing Street Address *

42. Facility Billing City, State, Zip Code *

43. Facility Billing Contact Person *

44. Facility Billing Telephone Number (xxx-xxx-xxxx) *

45. Facility Billing Email *

For Reference Only

Facility APN and Coordinates

Enter the Assessor's Parcel Number(s) (APN), which is located on the property tax bill. The number can also be obtained from the County Assessor's Office. Indicate the APN for both the facility location and the wastewater discharge point.

Enter the latitude and longitude coordinates of the entrance to the proposed/existing facility and of the wastewater discharge point. Latitude and longitude information can be obtained from an online mapping system such as Google Maps. Other maps may also contain this information.

46. Facility APN (xxx-xxx-xxx-xxx). Separate APNs with commas if more than one APN. *

47. Wastewater Discharge Point APN (xxx-xxx-xxx-xxx) *

List the APN of the parcel where the wastewater will be discharged. May be the same or different parcel as the facility.

48. Facility Latitude (decimal degrees) *

49. Facility Longitude (decimal degrees) *

50. Wastewater Discharge Point Latitude (decimal degrees) *

51. Wastewater Discharge Point Longitude (decimal degrees) *

For Reference Only

California Environmental Quality Act (CEQA)

Name the Lead Agency responsible for completion of CEQA requirements for the project. This will typically be the public agency that approves the building of your project (e.g. County or City). The Regional Board are typically not the lead agency.

52. Has a public agency determined that the proposed project is exempt from CEQA? *

- Yes, a public agency has determined that the proposed project is exempt from CEQA. I will email the Water Board a copy of the CEQA document.
- No, a public agency has not determined that the proposed project is exempt from CEQA. I will email the Water Board a copy of the CEQA document if/ when I receive it.

53. If the response to question 56 is "Yes, a public agency has determined that the proposed project is exempt from CEQA", state the basis for the exemption and the name of the agency supplying the exemption on the space provided.

If extra space is needed, use an extra sheet of paper and include it in the list of documents submitted as part of the application.

54. If the response to question 56 is "No", please provide the name of the Lead Agency.

55. Has a "Notice of Determination" been filed under CEQA?

If you select yes, email a copy of the CEQA document, Environmental Impact Report (EIR), or Negative Declaration.

- Yes
- No

56. If the response to question No. 60 is "No", identify the expected type of CEQA document.

EIR

Negative Declaration

Other

57. Expected CEQA Completion Date:

Expected date of completion using the timelines given under CEQA. The date of completion should be taken as the date that the Notice of Determination will be submitted. If not known, write "Unknown".



Format: M/d/yyyy

For Reference Only

Wastewater treatment system

58. Treatment Type *

- Septic system
- Aerobic treatment
- Sequencing Batch Reactors (SBR)
- Trickling filter
- Activated sludge
- Pond system
- Micro-filtration
- Ultra-filtration
- Membrane bioreactor (MBR)

Other

59. Wastewater treatment level plant classification *

- Class I
- Class II
- Class III
- Class IV
- Class V
- Onsite wastewater treatment system with subsurface disposal does not require plant classification.

60. Headworks/ preliminary treatment

Treatment descriptions must be provided in complete sentences. If the question does not apply, put N/A.

61. Capacity of the headworks system in gpd:

62. Primary treatment

Treatment descriptions must be provided in complete sentences. If the question does not apply, put N/A.

63. Capacity of the primary treatment technology in gpd:

64. Secondary treatment

Treatment descriptions must be provided in complete sentences. If the question does not apply, put N/A.

65. Capacity of the secondary treatment technology in gpd:

66. Tertiary treatment

Treatment descriptions must be provided in complete sentences. If the question does not apply, put N/A.

67. Capacity of the tertiary treatment technology in gpd:

68. Disinfection

Treatment descriptions must be provided in complete sentences. If the question does not apply, put N/A.

69. Capacity of the disinfection technology in gpd:

70. Wastewater disposal method

Describe the disposal method(s) and the total surface area in the space provided below in complete sentences.

71. Capacity of the wastewater disposal method(s) in gpd:

72. Solids handling

Treatment descriptions must be provided in complete sentences. If the question does not apply, put N/A.

73. Solids produced annually in tons:

74. Solids disposal facility/location (name & address below)

For Reference Only

Design Specific Information

75. Name of Qualified Professional that Designed the Wastewater Treatment System: *

76. Qualified Professional's State of California License Number: *

77. What is the Facility's peak daily design flow in gallons? *

78. What is the Facility's average monthly design flow in gallons? *

79. Average incoming wastewater flow during previous calendar year in gpd:

This question only applies for existing systems.

80. Type of wastewater and waste (Check all that apply) *

Domestic/ Municipal Wastewater

Industrial Process Wastewater

RV Wastewater

Evaporative Cooler Water

Biosolids/ Residual

Surface Impoundment

Other

81. Will this wastewater facility be storing or treating sludge? *

Yes, this wastewater facility will be storing or treating sludge.

No, this wastewater facility will not be storing or treating sludge.

82. Expected treatment system effluent biochemical oxygen demand (BOD) concentration (mg/L): *

83. Expected treatment system effluent total suspended solids (TSS) concentration (mg/L): *

84. Expected treatment system effluent total nitrogen concentration (mg/L): *

For Reference Only

Wastewater Disposal

Information related to disposal design and subsurface conditions.

85. How do you plan to dispose of the wastewater? (Check all that apply) *

Land Application Area (e.g., spray disposal)

Percolation Pond

Title 22 Recycled Water

Cesspool

Leach Field

Seepage Pit

Drip Dispersal

Other

86. Will the wastewater system provide Title 22 Recycled Water? *

If yes, include a Title 22 report with your application.

Yes

No

87. Will the use of recycled water be onsite and managed by the same entity enrolling in this permit? *

If the recycled water will be used offsite, additional enrollment in the Recycled Water User Permit is required.

Yes

No

88. Annual rainfall (inches/year): *

89. Design application rate within disposal area (gallons/day-square foot): *

This application rate must be determined from the average percolation rate.

90. Distance between bottom of disposal system and seasonally high groundwater (feet): *

If this is less than 5 feet then enhanced treatment with disinfection is required.

91. Seasonally high groundwater level within disposal area (feet below ground surface): *

92. Average percolation rate within disposal area (minutes/inch): *

For Reference Only

93. Facilities that store wastewater and apply it to a Land Application Area (LAA) during irrigation season may land apply more than 100,000 gallons per day of treated wastewater to a LAA during the irrigation season. Will this facility store treated wastewater and potentially land apply more than 100,000 gallons per day during irrigation season? *

- Yes, treated wastewater disposal may exceed 100,000 gpd for irrigation onto a LAA.
- No, treated wastewater disposal will not exceed 100,000 gpd for irrigation onto a LAA
- Facility will not land apply to a LAA

For Reference Only

Subsurface disposal

Complete this section if the system includes leachfield or other subsurface disposal method.

94. Total length of leach line (linear feet), if applicable.

95. Infiltrative area per linear foot of leach line (square ft/ linear ft), if applicable:

Please note: Maximum of 4 square feet per linear foot is required for new leach line disposal systems.

96. Does the proposed disposal system have a 100% replacement area defined? *

- Yes, the proposed disposal system has a 100% replacement area defined.
- No, the proposed disposal system does not have a 100% replacement area defined.
- System does not have a subsurface disposal field

97. Total drip dispersal disposal area (square feet), if applicable.

98. If the system has a septic tank, are the tanks used in the proposed treatment system IAMPO certified? *

- Yes, tanks used in the proposed treatment system are IAMPO certified.
- No, tanks used in the proposed treatment system are not IAMPO certified.
- System does not have septic tanks

99. Do any of these characteristics describe your facility? If any one of these characteristics describes the wastewater facility, and subsurface disposal is utilized, then you must obtain a Class V USEPA Well Permit. Provide it with this application. *

- The wastewater treatment system serves 20 or more people per day.
- The wastewater system receives wastewater other than domestic.
- The wastewater system receives RV waste or portable toilet waste.
- None of the above characteristics apply to this Facility.

For Reference Only

Collection System

This section pertains to the collection system that serves the subject wastewater system.

100. Population served by the collection system:

101. Total sewer connections (domestic & industrial) wastewater system serves:

102. Potable Water Service Provider: *

List the potable water service provider for the community/area/home served by the wastewater system. If served by a private well, state private well and list the Well ID Number.

103. Is the collection system enrolled in State Water Board Order No. 2006-0003-DWQ for Sanitary Sewers? https://www.waterboards.ca.gov/board_decisions/adopted_orders/water_quality/2006/wqo/wqo2006_0003.pdf (https://www.waterboards.ca.gov/board_decisions/adopted_orders/water_quality/2006/wqo/wqo2006_0003.pdf).

Yes

No

Additional questions

104. Is the natural ground percent slope greater than 30% at the wastewater treatment system or the disposal area? *

105. Is this facility within a disadvantaged community? *

- Yes, this facility is within a disadvantaged community.
- No, this facility is not within a disadvantaged community.

106. Is this facility within three miles of an existing centralized sanitary sewer collection system? *

- Yes, the facility is within three miles of a centralized sanitary sewer collection system.
- No, the facility is not within three miles of a centralized sanitary sewer collection system.

107. Does the treatment and disposal system meet the setback requirements specified in Table 3 of the Small General Permit? *

- Yes
- No

Required Attachments

108. Please make sure to include ALL of the following documents: *

Submit the following documents via email in PDF to RB3-WDR@waterboards.ca.gov (<mailto:RB3-WDR@waterboards.ca.gov>) along with the application address. Please include the first and last name of the individual who is completing the application in the subject line.

- Wastewater Design Plans: scaled schematic of wastewater system (e.g., treatment train, treated wastewater disposal, solids disposal, treatment wastewater reuse, sampling locations, etc.)
- Engineering Report including design and description of (1) actual or predicted flow calculations; (2) all treatment components and their treatment objectives and capacity, (3) storage components and their capacity and size; and (4) disposal components and capacity. Include engineering, geologic, and hydrogeologic assumptions used for all calculations.
- Schematic of the wastewater system (process flow) identifying treatment components, sampling locations, treated wastewater disposal or reuse components, solids disposal, etc.
- Scaled aerial map of the wastewater system identifying wastewater system boundary, treatment components, sampling locations, treated wastewater disposal or reuse areas, solids disposal, etc. For complex systems include multiple maps for clarity (e.g., stand alone disposal area map).
- Site location map (includes groundwater monitoring wells, domestic wells, groundwater elevation contours, the direction of groundwater flow, storm drains, streams, property lines, lakes, and reservoir).
Summary of Wastewater System Setbacks can be found in Table 3 of the Small General Permit
- Percolation records
- Soil profile logs
- Owner agent agreement form (if applicable)
- Geo-report for when disposal area slopes exceed 30%
- Copy of Title Deed (not applicable to public agencies)
- Treatment system service agreement, if system operations are performed by a third party.
- Treatment system specification sheet
- Disposal system specification sheet
- CEQA documentation
- Title 22 Engineering Report for facilities planning to recycle. Please also submit to the Division of Drinking Water

109. Wastewater collection system information

Submit the following documents via email in PDF to RB3-WDR@waterboards.ca.gov (<mailto:RB3-WDR@waterboards.ca.gov>), along with the application address. Please include the first and last name of the individual who is completing the application in the subject line. For collection systems subject to State Water Board Order No. 2006-0003-DWQ, reports prepared to comply with the State Water Board Order No. 2006-0003-DWQ satisfies this requirement and may be submitted as part of the ROWD technical report.

Describe the following:

- Age and condition of collection system, piping construction and layout (show on map), lift stations and backup pumping systems, failure warning system, inflow and infiltration (I/I) estimates (and any control that is necessary), maintenance of collection system and spill response
- Storm water collection area (show on map), storm water disposal area in relation to wastewater disposal area, and storm water disposal permit (if needed)

For Reference Only

Fees

If you are currently enrolled in a wastewater permit that pays annual fees, no application fee is needed. You can skip this section.

There are two ways to pay your WDR application fee:

1) Pay your water quality program invoice online

Instructions to pay online: https://www.waterboards.ca.gov/make_a_payment/
(https://www.waterboards.ca.gov/make_a_payment/).

To pay online through direct deposit: <https://www.govone.com/PAYCAL/SWRCB/Account/SubAgencies>
(<https://www.govone.com/PAYCAL/SWRCB/Account/SubAgencies>).

The SWRC Application Number when paying online is "WA", followed by the first 4 letters of the landowner's last name, followed by the month and day this online application was signed. (Example: If the landowner John Smith applied and signed the application on January 1st, the application number would be: WASMIT0101).

If paid online, please include the provided confirmation number.

2) Make a check, money order, or cashier check payable to the "State Water Resources Control Board."

- a) Write "WDR App. Fee" on the check, money order, or cashier check.
- b) Attach a copy of the Form 200 or Notice of Intent (NOI) cover page. This will ensure the check is logged for the correct facility. These can be emailed to RB3-WDR@Waterboards.ca.gov (<mailto:RB3-WDR@Waterboards.ca.gov>).
- c) Payments should be sent to:

Central Coast Regional Water Quality Control Board
Attention: WDR Program (include staff person, if known)
895 Aerovista Place Suite 101
San Luis Obispo, CA 93401

****Your application fee is also your first annual fee.***

110. Payment method

- Paid invoice online
- Paid via check, money order, or cashier check

111. If paid invoice online, what was your confirmation number?

112. If paid via check, money order or cashier check, where was the check sent?

Central Coast Regional Water Quality Control Board, 895 Aerovista Place, Suite 101, San Luis Obispo, CA 93401

State Board Accounting Office, PO Box 1888, Sacramento, CA 95812-1888

Other

113. Check Number

114. Date invoice paid online or date check mailed:



Format: M/d/yyyy

For Reference Only

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