



For Napa Sanitation District Use Only: COMPANY NAME: _____
Date received: _____ **Permit #:** _____

In accordance with the Napa Sanitation District Code, no user shall connect, discharge, cause, allow, or permit any discharge, into the Sanitary Sewer System except in accordance with a Wastewater Discharge Permit issued by the Napa Sanitation District. A completed permit application and appropriate fee is required to be submitted to this office by all Users. Municipal Code requires that permit applications, and any other reports required by the Napa Sanitation District shall be **signed by an Executive Officer of the business filing the application**. Such Executive Officer shall be at least of the level of Vice President, General Partner, President, or an individual responsible for the overall operation of the facility applying for the Permit, or meet the Federal requirements for NPDES applications as contained in Title 40 of the Code of Federal Regulations.

CERTIFICATION 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 of 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 or imprisonment for knowing violations."

CERTIFIED BY:

Name (please print) *Email* *Title*

Signature *Date* *Phone*

COMPANY INFORMATION

Company Name: _____ Web site: _____

Doing Business As (dba) (if different from above): _____

Business Address: _____ ZIP: _____

Mailing Address: _____ ZIP: _____

Billing Address: _____ ZIP: _____

Telephone (Main): _____ Fax Number: _____



INDIVIDUALS RESPONSIBLE FOR PERMIT

Name: _____ Email: _____

Title: _____ Phone: _____ Cell _____

NATURE OF BUSINESS

Provide a Description of the expected sources and profile (makeup) of the expected discharge:

County Pumper Truck Permit Number	County Pumper Truck Permit Expiration	Truck License Number	Truck Capacity (gallons)

ENVIRONMENTAL CONTROL PERMITS

List all other environmental control permits issued to this facility.

<i>NAME OF PERMIT</i>	<i>PERMIT #</i>
<i>Napa County – Environmental Health Permit</i>	
<i>Other</i>	

PERMIT CLASSIFICATIONS AND FEES

This discharge permit application must be submitted to Napa Sanitation District Pretreatment department at the address below. The District will notify the applicant regarding fees based on the information from the application.

Please send the Permit Application to;
Napa Sanitation District,
ATTN: Pretreatment Department
1515 Soscol Ferry Road, Napa, CA 94558.

Call (707) 258-6084 for questions about completing the application.