



# City of Greeley Wastewater Treatment and Reclamation Facility Irregular Waste Discharge Request Form

If you have any questions regarding the completion of this form, please contact the Industrial Pretreatment Program at (970) 350-9363.

This form may be used by a City of Greeley Water & Sewer customer requesting to discharge waste that is outside their normal wastewater profile. Keep in mind, this is a request and will be reviewed prior to being authorized to discharge said waste.

### Discharger Information

Discharger Name: \_\_\_\_\_

Address of Discharge: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

### Discharge Description

Date of requested discharge: \_\_\_\_\_

Description of waste: \_\_\_\_\_

1. Single discharge?      Yes       No       Hauled?       Sanitary Sewer?

2. Multiple discharges?      Yes       No       Hauled?       Sanitary Sewer?

a. Volume of discharge: \_\_\_\_\_ gallons per day

b. Days of discharge: \_\_\_\_\_ days

3. Discharge tested?      Yes       No

a. Analysis attached?      Yes       No

4. MSDS attached?      Yes       No

*Please submit this form using the contact information below. The Industrial Pretreatment Program will contact you with further information:*

**City of Greeley WTRF**  
**Attn: Industrial Pretreatment Program**  
300 E. 8<sup>th</sup> St.  
Greeley, CO 80631  
*jennifer.musella@greeleygov.com*

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Today's Date

# Division Comments/Approval

## Operations

Comments: \_\_\_\_\_

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

## Maintenance

Comments: \_\_\_\_\_

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

## Pretreatment

Comments: \_\_\_\_\_

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

## Administration

Comments: \_\_\_\_\_

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Discharge Approved: Yes  No

Discharge Date: \_\_\_\_\_