

# Application for Consent to Discharge Tradewaste – CONDITIONAL



(Pursuant to the Marlborough District Council  
Tradewaste Bylaw 2011)

- 1 Trading Name: \_\_\_\_\_
- 2 Street Address of Trade Premises: \_\_\_\_\_
- 3 Name of Licensee: \_\_\_\_\_  
(Occupier responsible for Consent)
- 4 Postal Address of Licensee: \_\_\_\_\_  
\_\_\_\_\_
- 5 Postal Address for Invoicing: \_\_\_\_\_  
(if different)  
  
Telephone: Business: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_\_  
  
Email: \_\_\_\_\_
- 6 Contract for Tradewaste Queries: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
(Title) (First Name) (Surname) (Position)  
  
Telephone: Business: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_\_  
  
Email: \_\_\_\_\_
- 7 Name of Property Owner: \_\_\_\_\_
- 8 Address of Property Owner: \_\_\_\_\_  
\_\_\_\_\_  
  
Telephone: Business: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_\_  
  
Email: \_\_\_\_\_
- 9 Property Number: \_\_\_\_\_
- 10 Name of Occupier/Employee Authorised to Sign Application: \_\_\_\_\_

11 Position of Occupier or Authorised Employee: \_\_\_\_\_

12 This application relates to: \_\_\_\_\_

Tick Box

(a) Variation to an existing consent ☐ Consent No. \_\_\_\_\_

(b) Renewal of an existing consent ☐ Consent No. \_\_\_\_\_

(c) A new discharge consent ☐

(d) A current discharge without a consent ☐

13 Describe the main activity carried out on site (eg, metal finishing, printing, food processing).

---

---

14 The source of water used on the premises is:

☐ From Marlborough District Council \_\_\_\_\_ m<sup>3</sup>/working day

☐ From other source (state source) \_\_\_\_\_ m<sup>3</sup>/working day

15 Please list each specific process which generates tradewastes:

(a) \_\_\_\_\_

(b) \_\_\_\_\_

(c) \_\_\_\_\_

(d) \_\_\_\_\_

(e) \_\_\_\_\_

(f) \_\_\_\_\_

16 General characteristics of wastes at point of discharge if known:

(a) Process areas as listed in Item 16.

(b) Tradewaste drains.

(c) Domestic (sewage) drains.

- (d) Main tradewaste pre-treatment systems (pH control, flow balance, grease traps, screens, etc).
- (e) Flow measuring and sampling point(s), including metering point for charging purposes (if applicable).
- (f) Open areas draining to tradewaste drains.
- (g) Stormwater drains.
- (h) Water meter locations.

17 Please provide **outline drawings** which clearly indicate the design/installation/ specifications of:

- (a) Pre-treatment systems.
- (b) Sewer flow measuring devices.

18 Total volume of wastes discharged to public sewer:

- (a) Maximum 24 hour discharge volume \_\_\_\_\_ cubic metres
- (b) Average 24 hour discharge volume \_\_\_\_\_ cubic metres
- (c) Maximum 8 hour discharge volume \_\_\_\_\_ cubic metres
- (d) Average flowrate over 24 hour period \_\_\_\_\_ litres/second
- (e) Maximum instantaneous flow rate \_\_\_\_\_ litres/second
- (f) Time of day and duration of maximum rate of discharge:

\_\_\_\_\_ am/pm \_\_\_\_\_ mins/hrs

- (g) Does your discharge have a seasonal peak (range)? ☐ Yes ☐ No

19 General characteristics of wastes at point of discharge:

Is the temperature below 50°C? ☐ Yes ☐ No

Suspended solids: \_\_\_\_\_ g/m<sup>3</sup>

COD: \_\_\_\_\_ g/m<sup>3</sup>

BOD<sub>5</sub> \_\_\_\_\_ g/m<sup>3</sup>

TKN \_\_\_\_\_ g/m<sup>3</sup>

Is the pH between 5 and 10?

☐ Yes ☐ No

If no, what is the pH?: \_\_\_\_\_

Is the oil and grease below 500 g/m<sup>3</sup>

☐ Yes ☐ No

If no, what is the oil and grease concentration?: \_\_\_\_\_ g/m<sup>3</sup>

- 20 Do you store, use or generate any of the substances defined as controlled substances (Schedule 1, tables A, B & C) in the Marlborough District Council Tradewaste Bylaw (this includes any chemicals which are similar in generic type and toxicity, eg, oils, solvents, organic compounds or heavy metals etc) that could result in discharges above the stated limits?

☐ Yes

☐ No

If no, go to Question 24.

If yes, please list: \_\_\_\_\_

- 21 Please provide material safety data sheets (MSDS) for all substances/chemicals, which have been identified from Question 20.

- 22 Describe mitigation measures to prevent accidental spillages and fire water which may contain these substances from entering the public sewer or stormwater system:

\_\_\_\_\_

- 23 (a) Is uncontaminated condensing water or cooling water included with any tradewastes?

☐ Yes

☐ No

If yes, please specify.

- (b) Do you discharge an overflow from a cooling tower that contains water treatment chemicals?

☐ Yes

☐ No

If yes, please specify.

- 24 How is stormwater runoff managed and discharged from site?

\_\_\_\_\_

25 Are any open areas, which may collect rainwater, connected to the tradewaste drain?

☐ Yes ☐ No

If yes, please specify and estimate each area and indicate the practicality of minimising or eliminating these areas from the sewer catchment: \_\_\_\_\_

\_\_\_\_\_

Is a 'first flush system' for stormwater diversion installed? ☐ Yes ☐ No

If yes, what are the maintenance arrangements for this device (monthly, yearly)?

\_\_\_\_\_

26 Is domestic wastewater such as from toilets, kitchens, showers, etc, combined with your tradewaste discharge?

☐ Yes ☐ No

27 Are there any specific Health and Safety requirements and security arrangements that Council staff entering the premises need to be aware of?

\_\_\_\_\_

\_\_\_\_\_

28 Pre-treatment Systems:

Are any of the following pre-treatments installed or proposed?

(a) Flow control (is the discharge rate controlled?)

☐ Yes ☐ No ☐ Proposed

If yes, give details.

(b) pH control Proposed

Manual dosing ☐ ☐

Automatic dosing/continuous dosing ☐ ☐

(c) Is screening for solids removal used?

☐ Yes ☐ No ☐ Proposed

If yes or proposed, state the type(s) (eg floor, basket, contra-shear) and provide the mesh size(s). Are they fixed or removable?

Type(s): \_\_\_\_\_

Mesh size(s): \_\_\_\_\_

Fixed or removable: \_\_\_\_\_

Other: \_\_\_\_\_

What arrangements do you have for the removal of the screened waste?

\_\_\_\_\_  
\_\_\_\_\_

(d) Is grease, oil, sediment or solvent separation used?

☐ Yes      ☐ No      ☐ Proposed

If yes or proposed, state the method and provide the dimensions, working capacity and a detailed plan of the system.

Method: \_\_\_\_\_

Dimensions: \_\_\_\_\_

Working Capacity: \_\_\_\_\_

Plan Provided: \_\_\_\_\_

Other: \_\_\_\_\_

(e) Is temperature control used (any form of pre-treatment to reduce temperature)?

☐ Yes      ☐ No      ☐ Proposed

If yes, please specify: \_\_\_\_\_

(f) Is chemical treatment used (is effluent chemically treated)?

☐ Yes      ☐ No      ☐ Proposed

If yes, please specify: \_\_\_\_\_

Are chemicals used to precipitate out metals? ☐ Yes      ☐ No

If yes, which chemicals are used? \_\_\_\_\_

(g) Are any additional pre-treatment methods, not already covered above, used in the treatment of tradewastes (eg, biological treatment, sludge dewatering)?

Yes ☐ No ☐ Proposed

If yes, please specify: \_\_\_\_\_

(h) Are the pre-treatment systems operated at all times, and what **management and maintenance procedures** are in place to ensure optimum/correct operation, (eg, frequency of equipment maintenance)?

\_\_\_\_\_  
\_\_\_\_\_

29 Council may require a Discharge Management Plan (DMP), Environmental or Emergency Management Plan (EMP), which specifies how tradewaste discharges are managed and controlled.

Is a DMP or EMP available for the trade premises?

☐ Yes ☐ No

If yes, please attach a copy.

30 Is an approved backflow prevention device installed on your site?

☐ Yes ☐ No

If yes, please give details of type, location, date of annual Building Warrant of Fitness (WOF).

\_\_\_\_\_  
\_\_\_\_\_

**Note:** The testing of automatic backflow protection devices is mandatory to comply with the Building Act 1991.

## Backflow Prevention:

**Note:** Backflow occurs when pressure drops or increases in a water supply system and allows water to flow backwards into the water supply. If there is a risk of contamination, an approved backflow prevention device is required to be fitted to ensure that all end users are protected against contaminated water. Should any contamination of the supply occur from activities within your site, your business may be liable for any cost involved to remedy the situation.

I declare that the foregoing information is correct to the best of my knowledge.

\_\_\_\_\_  
Occupier/Authorised Employee

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

Return to     Mike Davies  
                  Marlborough District Council  
                  PO Box 443  
                  Blenheim 7240

Record No. 15128533