

SOUTH ADAMS COUNTY WATER AND SANITATION DISTRICT  
INDUSTRIAL PRETREATMENT  
HAZARDOUS WASTE NOTIFICATION

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone \_\_\_\_\_  
Name of Publicly Owned Treatment Works \_\_\_\_\_  
NPDES Permit Number \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**HAZARDOUS WASTE INFORMATION** (use additional sheets if necessary)

Name of Waste: \_\_\_\_\_  
EPA Hazardous Waste Number: \_\_\_\_\_

TYPE OF DISCHARGE: \_\_\_\_\_ Continuous \_\_\_\_\_ Batch \_\_\_\_\_ Other

IF MORE THAN 100 KILOGRAMS OF ANY HAZARDOUS WASTE PER CALENDAR MONTH IS DISCHARGED TO THE SEWER, PLEASE INCLUDE THE FOLLOWING ITEMS OF INFORMATION FOR EACH HAZARDOUS WASTE, **TO THE EXTENT SUCH INFORMATION IS KNOWN AND READILY AVAILABLE.**

**HAZARDOUS CONSTITUENT INFORMATION:**

Name of Constituent \_\_\_\_\_  
Mass in Wastestream (this month) \_\_\_\_\_  
Concentration in Wastestream (this month) \_\_\_\_\_  
Mass in Wastestream (next 12 month) \_\_\_\_\_

I CERTIFY THAT I HAVE A PROGRAM IN PLACE TO REDUCE THE VOLUME AND TOXICITY OF HAZARDOUS WASTES GENERATED TO THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY PRACTICAL.

Signature of Company Representative: \_\_\_\_\_ Date \_\_\_\_\_

Notice to Signatory Officials: Copies of this form must be filed with the Colorado Department of Public Health and Environment the Environmental Protection Agency.