

**CITY OF SIMI VALLEY**  
**Environmental Compliance Division**  
**500 West Los Angeles Avenue, Simi Valley CA 93065**  
**(805) 583-6412**  
**www.simivalley.org**

**ENVIRONMENTAL COMPLIANCE DISCHARGE PERMIT APPLICATION**

All businesses in Simi Valley are required to complete an Environmental Compliance Discharge Permit application. Use current operating data, if available, or your best estimate based on similar types of businesses. Please answer all questions.

1. Business Name: \_\_\_\_\_
2. Facility Address: \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_
4. Facility Contact:      Mr.      Mrs.      Ms. \_\_\_\_\_ Phone: \_\_\_\_\_
5. Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_
6. Email Address: \_\_\_\_\_ Website: \_\_\_\_\_
7. Building Owner/Building Management Company: \_\_\_\_\_ Phone: \_\_\_\_\_
8. Describe Principal Business Activity at this Facility: \_\_\_\_\_  
\_\_\_\_\_ SIC Code: \_\_\_\_\_ NAICS Code: \_\_\_\_\_
9. Best time of the day for Environmental Compliance staff to visit your facility (am/pm): \_\_\_\_\_ to \_\_\_\_\_.
10. Average number of Employees: \_\_\_\_\_ Number of Shifts per Day: \_\_\_\_\_
11. Days of Operation:      S      M      T      W      Th      F      S Hours of Operation: \_\_\_\_\_
12. Facility Water Usage:
  - a. Average amount of water purchased (per water bill): \_\_\_\_\_
  - b. Waterworks District No. 8:      Golden State Water Co.:      Water Acct Number: \_\_\_\_\_  
(Please attach copy of water bill)
  - c. If water or sewer charges are paid by someone other than your business, give name, address and phone number: \_\_\_\_\_
13. Estimated percentage of total water consumption used for each of the following:

_____ Kitchens & Restrooms	_____ Irrigation
_____ Consumed in Product	_____ Industrial/Process Wastes
_____ Other (clean-up, etc.)	_____ 100% Total
14. Facility Wastewater Discharge:
  - a. Estimated wastewater discharge flow per day: \_\_\_\_\_
  - b. List the wastewater sources at the facility (e.g., restrooms, cooking, car wash, electroplating, etc.): \_\_\_\_\_  
\_\_\_\_\_
  - c. Do you have floor drains, floor sinks, or any other connection(s) to the sewer system? Yes      No
  - d. Describe any alternate disposal methods used (i.e., recycle, waste hauler, etc.): \_\_\_\_\_  
\_\_\_\_\_
  - e. Do you have a sand/oil/grease trap or clarifier? \_\_\_\_\_ Location: \_\_\_\_\_
  - f. Describe the processes that generate wastewater at this facility: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- g. What type of wastewater treatment system is being used at this facility? \_\_\_\_\_  
 \_\_\_\_\_
15. Do you have, or will you use, a grease rendering service? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Name and address of service provider: \_\_\_\_\_
16. Hazardous Materials:
- a. List all hazardous materials, i.e., chemicals, fuels, corrosives, etc., and the approximate quantities that are stored at this facility. (Attach additional sheet(s) if needed): \_\_\_\_\_  
 \_\_\_\_\_
- b. Do you generate and/or dispose of hazardous waste? Yes \_\_\_ No \_\_\_
- c. Do you use on-site recycling, reclamation, or recovery of the hazardous materials used? Yes \_\_\_ No \_\_\_
- d. Do you use an off-site recycling service or hazardous waste hauling and disposal service? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Name of recycling service or waste hauler: \_\_\_\_\_
17. Are there any outdoor business activities that may be exposed to stormwater? Yes \_\_\_\_\_ No \_\_\_\_\_
18. Does this facility store materials outdoors that may come into contact with stormwater? Yes \_\_\_\_\_ No \_\_\_\_\_
19. Are any stormwater treatment devices or Best Management Practices (BMP) installed on site? Yes \_\_\_\_\_ No \_\_\_\_\_
20. Are you familiar with and follow the requirements in the City's Water Conservation Ordinance? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If not, please read the ordinance located at [www.simivalley.org/WaterConservationProgram](http://www.simivalley.org/WaterConservationProgram) Water Conservation Ordinances & Resolutions

**If you have any questions or would like help completing this application please call our Environmental Compliance Division Hot Line at (805) 583-6420.**

By signing this application, the applicant certifies the above information is true and correct.

Completed by (Please Print): \_\_\_\_\_

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

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Please Return To:  
**City of Simi Valley**  
**Environmental Compliance Division**  
**2929 Tapo Canyon Road**  
**Simi Valley CA 93063**