TRA/01 Notice of application for a Temporary discharge

Or

Regional Mobile Activity

**Temporary or Regional Mobile Activity discharge notice**

**Application for a wastewater discharge** **into the Wholesaler’s Sewerage (In accordance with Water Industry Act 1991)**

**Application made to Wholesaler** ………………………………………………...

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The relevant sections of this form should be completed by the owner or occupier of the premises to which the application relates and the Retailer. The information provided will be reviewed by the Wholesaler, who will follow up accordingly should any material information be missing. The application will not be considered complete until all the information requested is provided. Please note that completion of this application form does not constitute approval to discharge wastewater.

A separate application should be made for each discharge made or to be made from the premises.

**Where this notice is used in relation to a proposed discharge, it is a notice applying for an agreement under section 119 of the 1991 Act. By signing the form below, the Non-Household Customer has confirmed that it wishes to make the application.**

Following acceptance of the discharge notice, the Wholesaler may require further detailed information about the discharge, in which case the Wholesaler may request that information from the Retailer, or the Non-Household Customer.

The form is divided into sections as follows

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| --- | --- |
| Number | Section |
|  | Retailer details |
|  | Type of Application |
|  | Legal Status of applicant |
|  | Premise & Contact details |
|  | Description of activity |
|  | Volume and composition of wastewater to be discharged |
|  | Site Drainage details |
|  | Information relating to health and safety |
|  | Volume measurement details |
|  | Monitoring details |
|  | Duration of temporary discharge |
|  | Termination Details |
|  | Declaration by the authorised signatory |
|  | Consent from the Retailer to contact the Non-Household Customer |
|  | Declaration by the Retailer |

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| 1. 1. Retailer details |
| Note: The Retailer will be the company that is the retail provider for Sewerage Services to the premises and bills for those services.  Retailer name ……………………………………………  Retailer ID ……………………………………………  Retailer's own reference ……………………………………………  Contact name ……………………………………………  Contact number ……………………………………………  Contact e-mail …………………………………………… |

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| 2. Type of application | |
| Please indicate which of the following this application relates to by ticking one relevant box | |
| 1. Temporary discharge < 6 months – **complete sections 3,4,5,6,7,8,9,10,11,12,13** | 🞏 |
| 1. Regional Mobile activity – **complete sections 3,5,8,13** | 🞏 |
| 1. Termination of temporary discharge /regional mobile activity – **complete sections 12 and 13** | 🞏 |

**The Retailer should complete sections 1, 14 and 15.**

**The Retailer may assist the Non-Household Customer in completing the application, and may make technical enquiries of Wholesaler using Process G1.**

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| 3. Legal status of applicant | | |
| **3.1 Legal status**  This is the legal entity responsible for the discharge at the premises from which the discharge will be made. All legal documentation and notices relating to the discharge will be sent to this address and copied to the Retailer. | | |
| Please indicate the legal status of the company or organisation | | |
| 🞏 | Company or body corporate |  |
| 🞏 | Governmental organisation |  |
| 🞏 | Sole trader |  |
| 🞏 | Partnership |  |
| Please provide the full legal name of the company. In the case of a sole trader, please provide the name of the individual. In the case of a partnership, please provide the names of all the partners  …………………………………………………………………………  …………………………………………………………………………  …………………………………………………………………………  …………………………………………………………………………  Trading name of the company or organisation if different  ………………………………………………………………………… | | |
| **3.2 Registered address and other details**  Registered address This may be a private address in the case of a sole trader or partnership  …………………………………………………………………………  …………………………………………………………………………  …………………………………………………………………………  …………………………………………………………………………  Postcode ……………………………………………………….. | | |
| Is the organisation a registered company? | | |
| 🞏 Yes | | |
| 🞏 No | | |
| If yes please provide the, Companies House registration number ….…………………………….  Note if this number changes a new application for consent to discharge must be made. | | |

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| 4. Premises & Contact detail |
| **4.1 Premises detail**  Premises refers to the site from which the wastewater is to be discharged  Please provide the premise SPID ………………………………………………….  If the site generating the discharge does not have a SPID then an alternative company site SPID can be used. This is required for billing purposes and the agreement cannot be issued without a SPID    Address Line 1 ………………………………………………….  Address Line 2 ………………………………………………….  Address Line 3 ………………………………………………….  Town ………………………………………………….  Postcode ………………………………………………….  **4.2 Contact detail**  Name of contact at the premises ………………………………………………....  (this is the primary contact for matters at the premises)  Job title of contact at the premises ………………………………………...............  Landline telephone number ………………………………………………….  Mobile number ………………………………………………….  E-mail address ………………………………………………….  **4.3 Operational detail**  Operational hours for the site …………………………………………………. |

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| 5. Description of activity |
| 5.1 Describe in detail the process/activity from which the wastewater arises  ……………………………………………………………………………………………..  ……………………………………………………………………………………………..  …………………………………………………………………………………………….. |
| 5.2 Provide details of any treatment to be given at site (e.g. oil separation, balancing, pH correction, chemical or biological treatment)  ……………………………………………………………………………………………..  …………………………………………………………………………………………….. |

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| 6 Volume and composition of Wastewater to be discharged | |
| 6.1 Please provide details of the volume of wastewater to be discharged | |
| Maximum quantity to be discharged (m3 per 24 hours) |  |
| Maximum rate of discharge (litres per second) |  |
| 6.2 Please provide details on the composition of the wastewater.  All substances discharged should be declared in this application, any omission to declare substances discharged or to be discharged will constitute an offence by virtue of Section 118(5) of the Water Industry Act 1991.  Chemicals/substances to be discharged  Please list any substances here and provide any relevant remarks (list on a separate sheet if necessary)  ……………………………………………………………………………………………..  ……………………………………………………………………………………………..  ……………………………………………………………………………………………..  ……………………………………………………………………………………………..  ……………………………………………………………………………………………..    Please also refer to the attached schedule at Annex 1 to this notice and highlight any additional substances likely to be present in the wastewater and to be discharged from the site. | |

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| 7. Site Drainage details | |
| 7.1 Please enclose a site drainage drawing for the premises identifying:   * The location of the sample point * Point of entry into the Sewerage system * The site surface and foul sewer drainage appropriately coloured as follows (where applicable) | |
| Red – Foul sewerage | Blue – On-site surface water |
| 7.2 Please provide a description of the sample point location: The sample point must be such that will provide a representative sample of the wastewater discharged to the sewer without domestic contamination, and provide safe and reasonable access at all times  Sample point location: ...…………………………………………………………………………..  ………………………………………………………………………………………………………..  ……………………………………………………………………………………………………….. | |
| 7.3 Please provide the name of the street where the connection to the sewer is located  …………………………………………………………………………………………….  7.4 Is this a proposed or an existing connection to the Sewerage network?  Proposed Existing  If a new connection is to be made please provide details of location and  Please tick to confirm you have received authorisation to connect to foul sewer  ………………………………………………………………………………………………………..  ……………………………………………………………………………………………………….. | |

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| 8. Information relating to health and safety | |
| Please indicate if there are any particular Health and Safety considerations or access requirements that need to be observed by visitors to the premises such as PPE  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ……………………………………………………………………………………………………….. | |
| 9. Volume measurement details | |
| Is there a flow meter which directly measures the wastewater discharged? | |
| YES | 🞏 Complete section 1 |
| NO | 🞏 Complete section2 |
| **Section 1**  If yes, please provide the following information about each flow meter. If there is more than one flow meter, please use additional sheets.  Current meter reading …………………………………………  Date of reading …………………………………………  Location of meter 🞏 Inside building 🞏 Outside building  Location description …………………………………………  …………………………………………  Meter manufacturer and model …………………………………………  Serial number …………………………………………  Unit of measurement 🞏 Metric m3  🞏 Metric other | |
| **Section 2**  If No, please provide details of how the volume discharged is to be assessed  ……………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………..  …………………………………………………………………………………………………………….. | |

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| 10. Monitoring details |
| Is there any on site monitoring of the discharge, such as pH monitoring? |

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| 🞏 | Yes |
| 🞏 | **No** |
| If yes, please provide details  …………………………………………………………………………………………….  ……………………………………………………………………………………………. | |

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| 11. Duration of temporary discharge ( temporary discharge must be less than 6 months) | |
| Start date |  |
| End date |  |

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| 13.Declaration by the authorised signatory |
| This application form must be signed by an authorised signatory of the company responsible for the wastewater discharge as detailed in section 3 above. Section 129 of the 1991 Act provides for the discharge of wastewater through agreement. Section 204 of the 1991 Act requires that information regarding the discharge must be provided and failure to provide such information is an offence.  I declare that the information given in the application form and any accompanying information is correct to the best of my knowledge and belief and is sufficient to specify all matters (pursuant to S119 (2) of the 1991 Act).  I acknowledge that there may be a requirement to provide and maintain suitable inspection chambers/effluent treatment/monitoring equipment and for reporting information on the composition and volume of wastewater discharged to sewer. |
| Signature …….……………………………………………….. |
| Date (dd/mm/yyyy) …….………………..………………………………  Full name (in capitals) …………………………..………………………….  Role in the company or job title ......….…………………..…………………………..  For and on behalf of (company name) ………………………………..……………………..  Telephone number …………………..…………………………………..  Email address …………………..………………………………….. |

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| 14. Consent from the Retailer to contact the Non-Household Customer | |
| The Wholesaler may wish to contact the Non-Household Customer to arrange a visit to the premises or to ask questions in relation to the discharge. Please indicate below your contact preference. | |
| 🞏 | Please tick if you wish to be present at the visit to the premises of the discharge |
| 🞏 | Please tick if you wish the Wholesaler to contact the Non-Household Customer to arrange a visit |
| 🞏 | Please tick if you will undertake to arrange the visit |
| Please tick if you consent to the Wholesaler contacting the Non-Household Customer directly in relation to detailed follow up questions | |
| 🞏 | Yes |
| 🞏 | No |

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| 15. Declaration by the Retailer |
| **I believe the information given above is true and accurate.** |

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| Signature ……………………………………………….. |
| Date (dd/mm/yyyy) ………………………………………………..  Full name (in capitals) ………………………………………………..  Role in the company or job title ……………………………………………….. |

**Annex 1: Schedule of substances to be discharged / stored on site**

Please complete in full the list of substances to be discharged and stored on site. Please provide further information as requested below.

**Table**

| List of substances | Discharged  (tick) | Stored  (tick) | Further information  (concentration, volumes) |
| --- | --- | --- | --- |
| 1,1,1-Trichloroethane |  |  |  |
| 1,1,2-Trichloroethane |  |  |  |
| 1,2-Dichloro-ethane |  |  |  |
| 2,4-Dichloro-phenol |  |  |  |
| 4-Chloro-3-methyl-phenol |  |  |  |
| Abamectin |  |  |  |
| Alachlor |  |  |  |
| Aldrin |  |  |  |
| Anthracene |  |  |  |
| Arsenic |  |  |  |
| Atrazine |  |  |  |
| Azinphos-methyl |  |  |  |
| Bentazone |  |  |  |
| Benzene |  |  |  |
| Benzo(a)-pyrene |  |  |  |
| Benzo(b)-fluor-anthene |  |  |  |
| Benzo(g,h,i)-perylene |  |  |  |
| Benzo(k)fluor-anthene |  |  |  |
| Biphenyl |  |  |  |
| Boron |  |  |  |
| Brominated diphenylether |  |  |  |
| Bromine |  |  |  |
| Bromoxynil |  |  |  |
| Butylbenzyl phthalate |  |  |  |
| Cadmium |  |  |  |
| Carbendazim |  |  |  |
| Carbon tetrachloride |  |  |  |
| Chlorfenvinphos |  |  |  |
| Chloride |  |  |  |
| Chlorine |  |  |  |
| Chloronitro toluenes |  |  |  |
| Chlorothalonil |  |  |  |
| Chlorotoluron |  |  |  |
| Chlorpropham |  |  |  |
| Chlorpyrifos |  |  |  |
| Chlorpyrifos-ethyl |  |  |  |
| Chromium (III) |  |  |  |
| Chromium (IV) |  |  |  |
| Cobalt |  |  |  |
| Copper |  |  |  |
| Coumaphos |  |  |  |
| Cyanide |  |  |  |
| Cyfluthrin |  |  |  |
| Cypermethrin |  |  |  |
| DDT total |  |  |  |
| Demetons |  |  |  |
| Di(2-ethylhexyl)-phthalate |  |  |  |
| Diazinon |  |  |  |
| Dibutyl phthalate |  |  |  |
| Dichlorobenzene |  |  |  |
| Dichloro-methane |  |  |  |
| Dichlorvos |  |  |  |
| Dieldrin |  |  |  |
| Diethyl phthalate |  |  |  |
| Diflubenzuron |  |  |  |
| Dimethoate |  |  |  |
| Dimethyl phthalate |  |  |  |
| Dioctyl phthalate |  |  |  |
| Diuron |  |  |  |
| Doramectin |  |  |  |
| EDTA |  |  |  |
| Endosulfan |  |  |  |
| Endrin |  |  |  |
| Fenchlorphos |  |  |  |
| Fenitrothion |  |  |  |
| Flucofuron |  |  |  |
| Fluoranthene |  |  |  |
| Fluoride |  |  |  |
| Formaldehyde |  |  |  |
| Hexachloro- benzene |  |  |  |
| Hexachloro-butadiene |  |  |  |
| Hexachloro-cyclohexane |  |  |  |
| Hydrogen sulphide |  |  |  |
| Indeno(1,2,3-cd)-pyrene |  |  |  |
| Ioxynil |  |  |  |
| Iron |  |  |  |
| Isodrin |  |  |  |
| Isoproturon |  |  |  |
| Ivermectin |  |  |  |
| Lead and its compounds |  |  |  |
| Linuron |  |  |  |
| Malachite green |  |  |  |
| Malathion |  |  |  |
| Mancozeb |  |  |  |
| Maneb |  |  |  |
| MCPA |  |  |  |
| Mecoprop |  |  |  |
| Mercury |  |  |  |
| Methiocarb |  |  |  |
| Mevinphos |  |  |  |
| Napthalene |  |  |  |
| Nickel |  |  |  |
| Nonylphenol |  |  |  |
| NTA |  |  |  |
| Octylphenol |  |  |  |
| Omethoate |  |  |  |
| Para-para DDT |  |  |  |
| PCSDs |  |  |  |
| Pendimethalin |  |  |  |
| Pentachloro-benzene |  |  |  |
| Pentachloro-phenol |  |  |  |
| Permethrin |  |  |  |
| Phenol |  |  |  |
| Pirimicarb |  |  |  |
| Pirimiphos-methyl |  |  |  |
| PAHs |  |  |  |
| Prochloraz |  |  |  |
| Propetamphos |  |  |  |
| Propyzamide |  |  |  |
| Silver |  |  |  |
| Simazine |  |  |  |
| Styrene |  |  |  |
| Sulcofuron |  |  |  |
| Sulphate |  |  |  |
| Tecnazene |  |  |  |
| Tetrachloro-ethylene (vi) |  |  |  |
| Thiabendazole |  |  |  |
| Tin |  |  |  |
| Toluene |  |  |  |
| Monochlorophenols |  |  |  |
| Triallate |  |  |  |
| Triazophos |  |  |  |
| Tributyl phosphate |  |  |  |
| Tributyltin compounds |  |  |  |
| Tributyltin-cation |  |  |  |
| Trichloro-benzene |  |  |  |
| Trichloro-ethylene (vi) |  |  |  |
| Chloroform |  |  |  |
| Trifluralin |  |  |  |
| Triphenyltin |  |  |  |
| Vanadium |  |  |  |
| Xylene |  |  |  |
| Zinc |  |  |  |
| C10-13 Chloroalkanes |  |  |  |
| 2,4 -D (non ester) |  |  |  |
| 2-Chlorophenol |  |  |  |
| 3-Chlorophenol |  |  |  |
| 4-Chlorophenol |  |  |  |