



**CITY OF SANTA BARBARA
DIRECT WASTEWATER DISCHARGE
Permit Application**

Section A: Identification

Company Information

Business Name: _____

Owner Name(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Section B: Description of Operations

Pollutants Known or Suspect to be Present:

Expected Volume of Wastewater Generated: _____

Type of Treatment Prior to Discharge to Sewer: _____

Anticipated Commencement of Discharge: _____

Anticipated Duration of Discharge: _____

Proposed Discharge Location (attach separate sheet if necessary):

Section C: Certification

I certify under penalty of perjury that this document and all attachments to it were prepared under my direction or supervision and in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or persons directly responsible for gathering the information, I believe that this information is accurate and complete to the best of my knowledge. I am aware that there are significant penalties for submitting false information including the possibility of fines and imprisonment for having knowledge of violations and withholding such information.

Print Name

Title

Signature

Date

Please Send Completed Application and Fee to:

**Mary C. Thompson
Laboratory Analyst Coordinator
Pretreatment/ Industrial Waste
El Estero Wastewater Treatment Plant
520 E. Yanonali St.
Santa Barbara, CA 93103**

Application fee is \$160.00. Please make check payable to City of Santa Barbara.