

## Industrial User (IU) Change in Condition Report Form

The District's Code of Ordinances, Title 2 Article II Section 12 states in part:

“Any IU which adds to or significantly increases the discharge loading of any regulated pollutant shall notify the District of this change in condition prior to such discharge.”

Before your permit can be rewritten, any changes that have occurred in the following areas must be described. After review of this information, the District will decide if your permit needs to be amended.

Pretreatment System (check either a. or b., if applicable)

- a. New System<sup>1</sup> \_\_\_\_\_, for what pollutants?  
Method of Pretreatment \_\_\_\_\_
- b. Modification<sup>1</sup> \_\_\_\_\_  
Description \_\_\_\_\_

Industrial Process Change:

- a. Addition to \_\_\_\_\_, or Elimination of \_\_\_\_\_, or other \_\_\_\_\_
- b. Nature of process change \_\_\_\_\_
- c. Types of pollutants involved \_\_\_\_\_
- d. Is this process subject to categorical pretreatment standards? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, what National Categorical Point Source Category is it subject to: 40 CFR Part \_\_\_\_\_

Discharge Flow Volume:

- a. Flow Increase \_\_\_\_\_, or Decrease \_\_\_\_\_  
Approximate flow volume increase/decrease (GPD) \_\_\_\_\_
- b. Reason for flow increase/decrease \_\_\_\_\_  
\_\_\_\_\_
- c. Total plant flow after increase/decrease \_\_\_\_\_

If changes to flow reported, then Pages 2 & 3 of this form must be completed and submitted with this report.

Analytical lab results: \_\_\_\_\_

Effective date of the changes (check as appropriate)

These changes will be effective on \_\_\_\_\_, or effective gradually starting on \_\_\_\_\_ and ending \_\_\_\_\_

Please return this form and any applicable attachments to Alice Ohrtmann, Industrial Waste Surveillance Supervisor, RRWRD, PO Box 7480, Rockford, IL 61126-7480.

Company \_\_\_\_\_

Person Completing This Form \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ Wastewater Discharge Permit No. \_\_\_\_\_

RRWRD STAFF ONLY: Amendment to permit required: Yes \_\_\_\_\_ No \_\_\_\_\_

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

<sup>1</sup> IU will need to get a construction/operation permit from IEPA. Contact the Water Pollution Compliance Division, Permit Section (217) 782-0610 to get the necessary application forms. RRWRD will have to sign off the form before it is returned to the IEPA in Springfield, Illinois.

List average wastewater discharge, maximum discharge, and type of discharge (batch, continuous, or both), for each plant process ***that discharges to sanitary sewer***. Include the reference number from the process schematic that corresponds to each process. [New facilities should provide estimates for each discharge]

Categorical Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch/continuous)	List Area In Which The Process Water Discharges To
Local Limit Regulated Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch/continuous)	List Area In Which The Process Water Discharges To
AIR SCRUBBER WATER				
Unregulated Process	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (batch/continuous)	List Area In Which The Process Water Discharges To
Sanitary				
Boiler Blow Down				
Cooling Water				
Other (List)				

**SECTION II**  
**WASTEWATER FLOW RATES**

A. The following wastewater flow rates *to the sanitary sewer* are to be provided by the Industrial User and must be physically measured unless other verifiable techniques are approved by the Rock River Water Reclamation District due to cost or non-feasibility.

<b>Maximum Daily Flow to the Sanitary Sewer</b> (Gals/Day)	<b>Annual Daily Average Flow to the Sanitary Sewer</b> (Gals/Day)

**WATER USE AND DISPOSAL**

Show the estimated average quantity of water received and wastewater discharged daily.

			<b>Discharged To</b>		
	<b>Supply From</b>		RRWRD	Other	
<b>Water Used For</b>	<b>Gals/Day</b>	<b>Source (1)</b>	<b>Gals/Day</b>	<b>Gals/Day</b>	<b>Discharge To (2)</b>
<b>Sanitary</b>					
<b>Process</b>					
<b>Cooling</b>					
<b>Lawn Sprinkling</b>					
<b>Boiler</b>					
<b>Scrubber Water (Air Pollution Control)</b>					
<b>Other (3)</b>					
<b>Total Gal/Day</b>					

(1) Enter the appropriate code letter indicating the source:

- a. Rockford Water Department
- b. Loves Park Water Department
- c. North Park Water Department
- d. Private Well
- e. Recycled or Reclaimed water
- f. Other

(2) Enter the appropriate code letter indicating the discharge point

- a. Surface Waters
- b. Storm Sewer
- c. Product
- d. Evaporation
- e. Hauled by Wastewater Hauler

(3) Other: (Please describe) \_\_\_\_\_