



Application For Trade Waste Discharge

Pursuant to the Stratford District Council Trade Waste Bylaw

For Office Use Only:

Trade Waste Consent Number:

Assigned To:

Application Received Date:

SECTION A: GENERAL INFORMATION

A1: COMPANY/PREMISE DETAILS

Legal Name: _____

Trade Name: _____

Occupier/Discharger: _____

Physical Address: _____

Post Code: _____

Postal Address: _____

Post Code: _____

Phone: _____

Fax: _____

Mobile: _____

Email: _____

A2: THIS APPLICATION RELATES TO

- Temporary Discharge
- Proposed New Discharge
- Renewal of a Consent
- Variation to an Existing Consent:

Nature of Variation

COUNCIL CONNECTIONS:

Council Wastewater Network: Yes / No

A3: DESCRIPTION OF MAIN TRADE ACTIVITY

IMPORTANT: Attach site drainage plans showing process areas, trade waste drains, domestic wastewater drains, stormwater drains, pre-treatment device location, flow measuring devices, sampling point and water meter (s).

SECTION B: NATURE OF THE TRADE WASTE

B1: GENERAL CHARACTERISTICS OF TRADE WASTE

Does the discharge meet the Permitted Characteristics specified in Schedule 1A of the Stratford District Council Trade Waste Bylaw? Yes / No

If No, please refer to Sections 15.1.1 –Consideration Criteria and provide all the necessary information to address all the items specified. Please attach the additional information with this application.

B2: OPERATIONAL DAYS/DISCHARGE HOURS

Days Operating: Monday Tuesday Wednesday Thursday Friday Saturday
 Sunday

Hours of Operation: _____

B3: TRADE WASTE DISCHARGE VOLUME

Continuous Discharge OR Batch Discharge

Maximum Daily Discharge Volume (m³/day): _____

Maximum Instantaneous Flow Rate (litres/second): _____

Batch Discharge Volume (m³): _____

Frequency of Batch Discharge (if applicable): _____

B4: TRADE WASTE DISCHARGE VOLUME FLOW MEASUREMENT

Proposed method of flow measurement:

- Permanent installation of Council-approved waste flow measuring equipment
- Based on water usage as measured by a Council meter

Proposed Water Loss Factor: _____

Note: Attach supporting information regarding the calculation of the water loss factor

B5: PROCESS AND POLLUTANTS

List any substances which are stored, used and/or generated on the premise (e.g. chemicals, oil solvents, waste products, etc.). Attach Material Safety Data Sheets (MSDS) if necessary.

Describe mitigation measures employed to prevent accidental spillages of these substances from entering the public sewer or stormwater systems. Attach additional information if necessary

SECTION C: PRE-TREATMENT SYSTEMS

C1: PROPOSED/EXISTING PRE-TREATMENT DEVICES

- Screens Grease Removal System Flow Balance First-flush Diversion pH adjustment Amalgam Separator Chemical/Biological Treatment Oil and Grit Interceptor Balance/Holding Tank Complex Filtration System Other Pre-treatment - Specify: _
- _____

C2: SPECIFICATION OF PRE-TREATMENT SYSTEM(S):

- Attach specification of proposed/existing pre-treatment device(s)

Type: _____ Make/Model: _____

Size: _____ (litres)

C3: PRE-TREATMENT SERVICING

Contractor: _____

Contact Phone Number: _____

Frequency of Service: _____

SECTION D: LIQUID WASTE REMOVAL FROM SITE

List all Liquid Waste(s) removed from site: _____

Contractor: _____

Contact Phone Number: _____

Frequency: _____

SECTION E: REDUCING LIQUID AND SOLID WASTE

List all waste (liquid and solid wastes) minimisation and cleaner production initiatives that will be implemented in the premise; Attach further information if necessary.

SECTION F: HEALTH AND SAFETY

Is there an induction required? Yes / No

Health and Safety (induction requirements, hazard registers, PPE requirements, etc.) requirement(s) for Council staff prior to entering site:

PLEASE NOTE:

The Local Government Act 2002 and the Stratford District Council's Trade Waste Bylaw allows all Authorised Officers or Authorised Agents of the Council, or any analysts, to enter any premise believed to be discharging trade waste at any time in order to determine any characteristics of any actual or potential discharge by:

- a) Taking readings or measurements;
- b) Carrying out site inspection audits; and/or
- c) Taking samples for testing, of any solids, liquid or gaseous material or any combination or mixture of such materials.

PRIVACY

The information supplied in this application form will be held and used by the Stratford District Council. The information will not be disclosed by the Stratford District Council unless legally required under the Local Government Official Information and Meetings Act 1987 or for one of the purposes in connection with its collection. The information supplied will be used for:

- a) Assessing and processing this application;
- b) Administration purposes; and
- c) Updating the Stratford District Council records to ensure all records are accurate.

You have right to request access and correction of information collected.

DECLARATION

Do you agree to the Stratford District Council taking more than 15 working days to complete processing this application, provided you can continue to exercise the existing operations until processing of this application is completed?

Yes

No

SIGNATURE

- 1) I am duly authorised to make this application
- 2) I believe that all the information contained in this application is true and correct.

Full Name: _____

Position: _____

Signed: _____ Date: _____

An initial application fee of \$205 fee must be received with the application form. Payment made is an initial deposit towards the final cost of processing the application. Processing of the application will begin when the deposit is received. The final cost of processing is based on actual and reasonable staff time. The final cost (less the deposit) is invoiced at the end of the application process, but there may also be interim invoices during the process.

Please return completed form and fee to:

**The Trade Waste Officer
Stratford District Council
61-63 Miranda Street
P O Box 320, Stratford 4352**

FOR OFFICE USE ONLY

Debtor Number: _____

Building Consent No.: _____

Environmental Health Referral: **Yes / No** _____

High Water User (> 15m³ per day) **Yes / No** _____

Council Meter Referral: **Yes / No** _____

Permitted/Controlled

Conditional

Tankered

Individual Agreement