

County Service Area 31 Flag City



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Please type or print clearly. A	ttach additional sheets if needed.
Date:	
SECTION I: GENERAL INFO	RMATION:
Name of proposed business:	·
Address of proposed Flag City business:	,
Contact Phone and name:	()
Present address of Business or home office:	
Phone:	
Type of business operation(s)	<u> </u>
	erations? Yes No if yes, explain
Name of similar business(es)	in other cities where you operate:
Name(s):	
Address(es):	
	·
	·

This business will have the following wastewater (se	wer) needs:	
Wastes other than "domestic sewage" (sinks, toilets	YES	NO
Manufacturing, processing or other industrial wastes		·
Use of grit/grease traps (interceptors)		
Batch discharges of waste		
Hazardous wastes/chemical use on-site		
Brines or other wastes from water softeners or		
water treatment devices	П	
Other - please describe:	. [
NOTE: Due to the salinity restriction, there is a b softener systems within the CSA 31 District.	an on installation of s	self-regenerating water
SECTION III: DETAILED WASTEWATER (SEWER (REQUIRED WHEN ONE OR MORE "YES" ANSW		
Estimated peak daily discharge:	gallons per day _	(peak months)
Estimated annual wastewater discharge:	_ gallons per year	(peak monute)
Estimated strength (concentration) of wastewater dis (Biochemical Oxygen Demand (BOD) and Total Sus parts per million)		milligrams per liter (mg/L) or
BOD mg/L	TSS mg/L	
What kinds of materials may be discharged into the chemicals, heavy metals, oil or grease, sand or inert solvents, boiler or cooling chemicals, high temperatudissolved solids, etc.)	materials, pH above 8	5 or below 6.5, organics,
Other wastewater discharge needs or circumstances etc.)	? (i.e. cooling water, su	ump pumps, batch discharges,
Yes No If yes, explain:		
SIGNATURE: I attest that the information given is	s correct to the best o	
Signature:	Date:	
Type/print Name:	Title:	