



## CHEMICAL ADDITIVES NOTIFICATION FORM

Use this form to notify the DEP regional office that issued the NPDES permit of the new or increased use of chemical additives that were not reported on the NPDES permit application and are on DEP's Approved List (see [www.depweb.state.pa.us/chemicaladditives](http://www.depweb.state.pa.us/chemicaladditives)). Use one form per chemical additive and discharge point.

Permittee Name: \_\_\_\_\_  
Permit No.: \_\_\_\_\_

Facility Name: \_\_\_\_\_  
Municipality: \_\_\_\_\_  
County: \_\_\_\_\_

Trade Name of Chemical Additive: \_\_\_\_\_  
 Manufacturer Name: \_\_\_\_\_  
 Intended Use(s): \_\_\_\_\_  
 Location(s) of Use: \_\_\_\_\_  
 Frequency of Use: \_\_\_\_\_  
 Method of Introduction: \_\_\_\_\_  
 Treatment Following Introduction: \_\_\_\_\_  
 Discharge Point (Outfall No.): \_\_\_\_\_  
 Design Flow of Discharge (MGD) <sup>(1)</sup>: \_\_\_\_\_  
 Receiving Stream Name: \_\_\_\_\_  
 Q<sub>7-10</sub> Flow of Stream (cfs) <sup>(2)</sup>: \_\_\_\_\_  
 Calculated WQBEL (mg/L) <sup>(3)</sup>: \_\_\_\_\_  
 Maximum Usage Rate <sup>(4)</sup>: \_\_\_\_\_ Units: \_\_\_\_\_

Will Other Chemical Additives Be Introduced at the Same Time?  YES  NO

- (1) Report the discharge flow that was used to develop effluent limitations for the permit. If unknown use the maximum monthly average discharge rate over the prior year.
- (2) Use the Q<sub>7-10</sub> flow from the latest NPDES permit fact sheet or, if unavailable, estimate Q<sub>7-10</sub> flow using USGS' StreamStats website (<http://water.usgs.gov/osw/streamstats/pennsylvania.html>).
- (3) Determine the governing water quality-based effluent limit (WQBEL) by using DEP's PENTOXSD model and the water quality criteria listed on DEP's Approved List. Attach model input and output results to this form.
- (4) Calculate the maximum allowable usage rate for the chemical additive based on achieving the calculated WQBEL. Attach calculations to this form.

I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Name/Title Principal Executive Officer

Phone: \_\_\_\_\_

Signature of Principal Executive  
Officer or Authorized Agent

Date: \_\_\_\_\_