

Application Form – Discharge to Surface Waters

For the Purposes of a Discharge Licence
Review

Local Government (Water Pollution) Acts, 1977 to 2007

APPLICATION FOR A LICENCE TO DISCHARGE TRADE AND/ OR DOMESTIC WASTE WATER TO SURFACE WATER

(FOR THE PURPOSES OF A DISCHARGE LICENCE REVIEW)

Your completed application accompanied by all relevant information and payment is
to be sent to the following address:

| | |
|----------|--|
| Address: | |
| | |
| | |
| | |
| | |
| | |

(The licensing authority is to include the name of the person to which the application is to be sent, the department to which it is to be sent and the licensing authority address)

PART I – DECLARATIONS & SIGNATURES

PART I - Section 1

A. Guidance on Applying for a Discharge Licence

Any person who intends to discharge domestic waste water or trade effluent to surface waters must attain permission to do so from either the Local Authority or the Environmental Protection Agency (EPA) before the discharge is commenced.

Where the discharge is licensable by the Local Authority, this Application Form is to be completed and submitted to the Local Authority in order to provide the information necessary to determine whether it is acceptable to grant permission to discharge.

The Applicant is requested to read the “Guidance on Applying for a Discharge Licence” before completing this licence application form.

B. Completing the Application Form

Guidance on what information is to be included in each Part of the Application Form is provided in the “*Guidance on Applying for a Discharge Licence*”.

The Applicant is asked to contact the Licensing Authority in the event that:

- they are unsure as to whether the discharge is licensable by the Local Authority or the EPA
- they are having difficulty in providing all the information required in the application form
- they are unsure of what information they are to provide in the form
- they are unsure of where to source the information required in the form
- they require any information or guidance on filling out the form

The Licensing Authority WILL NOT be able to process an incomplete application.

Who Should Fill in This Form?

This form is comprised of four separate parts as follows:

- **Part I – Declaration & Signatures**
This part is to be completed by all applicants for a licence to discharge to waters
- **Part II – General Details**
This part is to be completed by all applicants for a licence to discharge to waters.
- **Part III – Effluent Details**
This part is to be completed by all applicants for a licence to discharge to waters
- **Part IV – Discharges to Surface Water**
This part is to be completed by all applicants who propose to discharge trade effluent or domestic waste water (or both) to surface water. For clarification on what constitutes a trade effluent or a domestic waste water refer to the “*Guidance on Applying for a*

B. Completing the Application Form

Discharge Licence". Clarification on what is defined as a surface water is also provided.

Where multiple discharges are proposed, the applicant for a discharge licence must first contact the Licensing Authority for advice on whether one application form will suffice or whether multiple forms need to be submitted.

Additional Sheets

Where any part of the Application Form does not afford sufficient space to provide the required information then the Applicant should attach additional sheets to the form containing such information.

The additional sheets should cross-reference between the Application Form and the sheets. Mark each sheet with the name of the Applicant and the name of the premises from which the discharge is generated and indicate the section and part of the Application Form to which the additional sheets relate. An example of an Additional Sheet cross reference is provided in "*Guidance on Applying for a Discharge Licence*".

Request for Further Information

The Licensing Authority is entitled under Section 7(3) of the *Local Government (Water Pollution) Regulations, 1978* to request the Applicant to submit additional information that the Licensing Authority deems to be necessary for the consideration of an application for a discharge licence.

Where this information is not provided by the Applicant within a three month period of receiving such a request then the Licensing Authority may carry out the necessary investigations to acquire the information, the cost of which is to be borne by the Applicant. Alternatively the Licensing Authority may proceed to make a determination on the application in the absence of such information.

PART I – DECLARATIONS & SIGNATURES

C. Signatures of the Applicant & Agent

Identify the class of discharge to which this application pertains.

**I hereby make an application for a licence to discharge _____* effluent to
Waters / Sewer** *(delete as appropriate)* **under the Local Government (Water Pollution)
Act 1977 in respect of the particulars included in this application on behalf of**
_____*(insert name of the Applicant)*.

Where this application is made by an Agent on behalf of an Applicant, the signature of the Applicant must be provided below confirming the authorisation of the Agent to apply for a licence on their behalf:

I hereby authorise _____ *(name of Agent)* **to apply for a discharge licence on
behalf of _____** *(name of Applicant)*.

Signed: **Date:**

(provide signature of Applicant)

**I hereby declare that I am fully aware of my responsibilities to implement the
conditions of any licence granted on the basis of this application and acknowledge that I
may be subject to criminal liability whereby the terms of the licence are not complied
with.**

Signed: **Date:**

(provide signature of Applicant)

**Refer to the “Guidance on Applying for a Discharge Licence” for definitions of the
Applicant and the Agent.**

PART I – DECLARATIONS & SIGNATURES

PART I - Section 2

A. Disclosure of Information

The Freedom of Information Act, 1997 (as amended) states that every person has a right to access to any record held by a public body. This includes discharge licenses (and associated applications) held by the Local Authority. The Local Authority may refuse to provide access to records held by them where the information was provided to the Local Authority in confidence with the understanding that it is to be treated as confidential. Circumstances under which confidentiality may apply include where information submitted in the application contains commercially sensitive information or matters of National security.

The Applicant is requested to identify all information submitted with the application which is to be treated as confidential and is requested to identify the grounds on which the information may be categorised as confidential.

B. False or Misleading Information

It is an offence under the *Local Government (Water Pollution) Act, 1977* to knowingly submit false or misleading information in the licence application and an Applicant is liable to a fine on summary conviction of such an offence.

Please provide signature of the authorised representatives of the Applicant and where appropriate the Agent confirming that all the information submitted in this application is correct and that they have made themselves aware of the provisions of the Freedom of Information Act.

I/we hereby declare that I/we have made myself/ourselves aware of the provisions of the Freedom of Information Act and that I/we understand that there is a legal obligation on the Local Authority to make this discharge licence application available for inspection by third parties.

I/We hereby declare that to the best of my/our knowledge all of the information provided in this application is true and correct.

Signed: **Date:**

(provide signature of the Applicant)

Signed: **Date:**

(provide signature of the Agent)

PART II – GENERAL DETAILS

PART II – Section 1

| A. Contact Details – Applicant | |
|--|---|
| A. (i) Provide contact details for the Applicant below | |
| The Applicant is: | <input type="checkbox"/> An Individual <input type="checkbox"/> A Group of Individuals <input type="checkbox"/> A Corporate Body |
| Name (Principal Contact)* | |
| Address | <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> |
| Phone Number (day) | |
| Phone Number (night) | |
| Fax | |
| e-mail | |
| * Where the Applicant is a group of individuals or a corporate body, provide the name of one individual to be the principal contact for the purpose of correspondence relating a licence granted by the licensing authority. | |

| A. (ii) Where the Applicant is an Individual provide the following details: | |
|---|---|
| Relationship to the premises from which it is proposed to discharge | <input type="checkbox"/> Owner/occupier <input type="checkbox"/> Landowner <input type="checkbox"/> Responsible for treatment facility <input type="checkbox"/> Other _____ (please specify) |

| A. (iii) Where the Applicant is a Group of Individuals provide the following details: | |
|---|---|
| Type of Group | <input type="checkbox"/> Management Company <input type="checkbox"/> Residents Association <input type="checkbox"/> Voluntary Group <input type="checkbox"/> Club <input type="checkbox"/> Other _____ (please specify) |

| A. (iv) Where the Applicant is a Corporate Body provide the following details: |
|--|
|--|

PART II – GENERAL DETAILS

| | |
|---|--|
| Type of Corporate Body | <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div> Limited Company Public Limited Company Sole Trader Co-operative Partnership Other _____ <i>(please specify)</i> </div> </div> |
| Certificate of Incorporation must be included with the application listing the names of Directors. | |

| B. Contact Details – Agent | |
|--|---|
| B. Where an Agent is making this application on behalf of an Applicant the Agent's contact details must be provided | |
| Name | |
| Address | <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div> |
| Phone Number (day) | |
| Phone Number (night) | |
| Fax | |
| e-mail | |
| Relationship to the Applicant e.g. employee, consultant, partner. | |

PART II – GENERAL DETAILS

PART II – Section 2

| A. Site Details | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|-----------------|--|--|--|--|
| A. (i) Provide details below of the site / activity from which it is proposed to discharge. | | | | | | | | | | | | | |
| Name of Site (where applicable) | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | |
| Site location (Co-ordinates) | Easting | | | | | | | | Northing | | | | |
| Is the site an existing development or a new development? | <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Existing <input style="width: 40px; height: 20px;" type="checkbox"/> New </div> <div style="width: 55%;"></div> </div> | | | | | | | | | | | | |
| Is there any existing discharge license(s) granted in relation to the site? | <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Yes <input style="width: 40px; height: 20px;" type="checkbox"/> No </div> <div style="width: 55%;"> Reference Number _____ Reference Number _____ </div> </div> | | | | | | | | | | | | |
| Is planning permission granted for any proposed / existing development at the site? | <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Granted <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Pending <input style="width: 40px; height: 20px;" type="checkbox"/> Not Applied For </div> <div style="width: 55%;"> Reference Number _____ </div> </div> | | | | | | | | | | | | |
| Have copies of the following maps / drawings been included? | <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Site Location Map <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Site Layout Map <input style="width: 40px; height: 20px; margin-bottom: 10px;" type="checkbox"/> Site Drainage System Drawings <input style="width: 40px; height: 20px;" type="checkbox"/> None of the above </div> <div style="width: 55%;"></div> </div> <p style="margin-top: 20px; font-style: italic; font-size: 0.9em;">Refer to “Guidance on Applying for a Discharge Licence” for details of what is to be included on the maps.</p> | | | | | | | | | | | | |
| Outfall Details | Provide details of the outfall design, size and construction. | | | | | | | | | | | | |
| <i>Provide copies of the outfall drawings.</i> | | | | | | | | | | | | | |

PART II – GENERAL DETAILS

| A. (ii) Identify the sector from which the proposed discharge will be generated. | | | | |
|---|---|--|--|---|
| Type of Premises | <i>Please tick the box as appropriate</i> | | | ✓ |
| | Accommodation | Household / Holiday Home | | |
| | | Hotel / Guesthouse / B&B | | |
| | | Caravan Park / Camp Site | | |
| | | Nursing Home | | |
| | Education | Non-residential facility | | |
| | | Boarding School | | |
| | | College / University | | |
| | Commercial / Service | Office | | |
| | | Hairdresser / Beauty Salon | | |
| | | Doctor Surgery | | |
| | | Dentist | | |
| | | Launderettes and Dry Cleaners | | |
| | | Petrol Station | | |
| | | Hospital | | |
| | | Churches, Monasteries etc. | | |
| | | Amenities (golf course, sport facilities etc.) | | |
| | Food & Drink | Public House (with or without food preparation) | | |
| | | Restaurant / Café / Take Away | | |
| | Transport | Airport | | |
| | | Train station | | |
| | | Bus station | | |
| | Industrial | Dry process industry without canteen | | |
| | | Dry process industry with canteen where food is prepared | | |
| | | Chemicals industry | | |
| | | Wood, paper, textiles and leather | | |
| | | Food and drink | | |
| | | Minerals and other materials | | |
| | | Energy | | |
| | | Metals | | |
| | | Mineral fibres and glass | | |
| | | Fossil fuels | | |
| | | Cement manufacture | | |
| Waste | | | | |
| Surface coatings | | | | |
| Other (Please specify) | e.g. tourism- heritage centre | | | |

PART II – GENERAL DETAILS

A. (iii) Activities Carried Out on Site.

Provide details of the activities carried out on site. Where this involves a process, provide an overview of the process. In particular indicate where domestic waste water / trade effluent is generated.

Provide additional sheets where necessary.

**Process Materials &
Waste Disposal**

Where applicable, complete **Appendix A and Appendix B** of this form.

PART III – EFFLUENT DETAILS

PART III – Section 1

| A. Effluent Details | |
|--|--|
| PART III – Section 1 A is to be completed by All Applicants. | |
| Type of effluent | <div style="margin-bottom: 10px;"><input type="checkbox"/> Domestic Waste water Only</div> <div style="margin-bottom: 10px;"><input type="checkbox"/> Trade Effluent Only</div> <div><input type="checkbox"/> Both Domestic and Trade Effluent</div> |
| Indicate the type of discharge to which this application relates. | <div style="margin-bottom: 10px;"><input type="checkbox"/> New Discharge</div> <div><input type="checkbox"/> Existing Discharge</div> |
| Domestic Waste water only (if relevant) | <div style="margin-bottom: 10px;">Population Equivalent (p.e.) _____</div> <div style="margin-bottom: 10px;">Expected Dry Weather Flow (DWF) _____ m³/day.</div> <div><i>Provide details of how the P.E. & DWF were calculated.</i></div> |
| Trade Effluent only or Domestic & Trade (if relevant) | <div style="margin-bottom: 10px;">Normal volume of effluent discharged per day is _____ m³/day.</div> <div style="margin-bottom: 10px;">Maximum volume of effluent discharged in one day is _____ m³/day.</div> <div>Maximum volume of effluent discharged per hour is _____ m³/hour.</div> |
| <i>Provide details of how the trade effluent flows are calculated.</i> | |
| Effluent Characteristics. | <p>Complete Appendix C and Appendix D of this form.</p> <p><i>Provide additional sheets where necessary.</i></p> |

PART III – EFFLUENT DETAILS

| B. Effluent Details | |
|--|---|
| PART III – Section 1 B is to be completed by All Applicants. <i>Provide additional sheets where necessary.</i> | |
| Discharge Variability | <p>Briefly identify whether there is likely to be variability in the discharge flow or characteristics e.g. due to process changes, due to seasonal variation, due to diurnal changes etc.</p> <p>Where the discharge shows seasonal or other variation, please provide details of flow volumes and times of discharge.</p> <p>Also provide details of varying effluent characteristics in Appendix C and Appendix D.</p> |
| Date of Discharge | <p>Date: _____</p> <p>Identify the proposed date for the commencement of the discharge or where it is an existing discharge identify the date on which the discharge commenced.</p> |
| Fats, Oils and Grease (FOG) (if relevant) | <p>Provide details of control measures proposed for the removal of FOG from the effluent prior to discharge. Provide technical data sheets for any equipment proposed.</p> |
| Food Waste (if relevant) | <p>Provide details of provisions for source segregation and disposal of food waste.</p> |
| Other Discharges | <p>Provide particulars of any other discharges from the premises (e.g. storm water).</p> |
| Water Supply | <p>Provide details of the source of water that will form part of the discharge e.g. mains, borehole, river etc.</p> |
| | <p>The estimated volume of water used per day is _____m³/day</p> |
| Other Effluent Details | <p>You may be required to furnish such other particulars as the Licensing Authority may reasonably require for consideration of the application e.g. effluent toxicity testing, bioaccumulation testing, biodegradation testing.</p> |

PART III – EFFLUENT DETAILS

PART III – Section 2

| A. Effluent Treatment | |
|--|--|
| PART III – Section 2 A is to be completed where the effluent is to be treated prior to discharge. | |
| Operator of Treatment System | Where the treatment system is to be maintained and operated by a third part please provide the following: |
| | Contact Name |
| | Company Name |
| | Address |
| | Phone Number (day) |
| | Phone Number (night) |
| | Fax |
| | e-mail |
| | Registered Company Details |
| | Waste Water Treatment System Overview |
| Provide copies of the treatment system process drawings. | |

PART III – EFFLUENT DETAILS

B. Effluent Treatment

PART III – Section 2 B is to be completed where the effluent is to be treated prior to discharge.

Provide additional sheets where necessary.

Treatment System Maintenance

Provide details of the proposals for the treatment system maintenance.

Plant Failure

Identify how any failure of the treatment system will be detected.

Sludge

Provide details of proposals for dealing with sludge (where relevant).

PART III – EFFLUENT DETAILS

PART III – Section 3

| A. Effluent Monitoring | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|-----------------|--|--|--|--|--|
| PART III – Section 3 A is to be completed by All Applicants. Provide details of the monitoring proposed for the effluent discharge <i>Provide additional sheets where necessary.</i> | | | | | | | | | | | | | |
| Monitoring the Discharge. | Provide details of any proposals to monitor the discharge e.g. <ul style="list-style-type: none"> ○ Parameters to be analysed; ○ Monitoring programme; ○ Details of any sampling equipment to be used. | | | | | | | | | | | | |
| Location of sampling point(s) (Co-ordinates) | Easting | | | | | | | Northing | | | | | |
| Effluent Flow Monitoring | Provide details of any proposals to monitor the discharge flow. | | | | | | | | | | | | |
| Licensing Authority Monitoring | Provide a description of how the Licensing Authority will be provided access to the effluent in order to take samples and indicate the point at which such samples may be taken e.g. last manhole before outfall. <i>(Provide grid reference below).</i> | | | | | | | | | | | | |
| Location of Licensing Authority sampling point(s) (Co-ordinates) | Easting | | | | | | | Northing | | | | | |

PART III – EFFLUENT DETAILS

B. Pollution Control

PART III – Section 3 B is to be completed by All Applicants.

Provide details of any pollution control measures proposed.

Provide additional sheets where necessary.

Accidental Discharges

Provide details of arrangements to prevent accidental discharges.

Provide below, details of emergency procedures, contact persons and facilities available to respond to unexpected incidents.

Emergency Response

| |
|---------------------|
| Contact Name |
|---------------------|

Phone Number (day)

Phone Number (night)

| |
|---|
| Provide details of any emergency procedure. |
|---|

Environmental Management Plan

Is there an Environmental Management Plan in place in respect of the site?

☐ Yes

☐ No

If 'Yes' please submit a copy with this application.

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If 'Yes' please submit a copy with this application.

PART IV – DISCHARGE TO SURFACE WATER

PART IV – Section 1

| A. General Details | |
|--|---|
| Identify why it is not feasible to discharge to sewer in this case. | |
| Provide details of the newspaper notice. | <p>Name of Publication _____</p> <p>Date of Print _____</p> <p><i>Please include one original plus the required copies of the notice.</i></p> |

PART IV – DISCHARGE TO SURFACE WATER

PART IV – Section 2

| A. (i) Receiving Water Details - Discharge to Inland Surface Water | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|-----------------|--|--|--|--|--|
| PART IV – Section 2 A is to be completed where the application pertains to a discharge to inland surface waters i.e. streams / rivers / lakes. | | | | | | | | | | | | | |
| Name of Receiving Water | | | | | | | | | | | | | |
| Location of Discharge (Co-ordinates) | Easting | | | | | | | Northing | | | | | |
| <i>Add additional rows where necessary.</i> All discharge locations to be indicated clearly on OS Map. | | | | | | | | | | | | | |
| Existing Uses | The receiving water is a tributary of _____ (<i>insert waterbody name</i>). <hr style="border-top: 1px dashed black;"/> Water uses are _____ (<i>e.g. angling, recreational, navigation etc.</i>) | | | | | | | | | | | | |
| Designation* | The receiving water is located within the boundary of : (<i>tick as appropriate</i>) <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div> An SAC, site code _____. An SPA, site code _____. None of the Above </div> </div> <div style="font-size: small; margin-bottom: 10px;"> <i>* Note: Where the discharge is located within the boundary of a Natura 2000 site (SAC or SPA), an Appropriate Assessment must be submitted with this application as required by Council Directive 92/43/EEC on the Conservation of Natural Habitats and of Wild Fauna and Flora (Habitats Directive).</i> </div> <hr style="border-top: 1px dashed black;"/> The receiving water is designated as: (<i>tick as appropriate</i>) <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div> A Salmonid Water An Inland Bathing Water A Pearl Mussel Water A Drinking Water A Sensitive Water None of the Above </div> </div> | | | | | | | | | | | | |

PART IV – DISCHARGE TO SURFACE WATER

| A. (i) Receiving Water Details - Discharge to Inland Surface Water (continued) | |
|--|--|
| Name of River Basin District | Provide the name of the River Basin District in which the discharge is located _____. |
| Water Framework Directive Waterbody Status | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> No Status <input type="checkbox"/> Bad <input type="checkbox"/> Poor </div> <div style="width: 45%;"> <input type="checkbox"/> Moderate <input type="checkbox"/> Good <input type="checkbox"/> High </div> </div> |
| Refer to “Guidance on Applying for a Discharge Licence” for sources of information. | |
| Receiving Water Flow Data. | <p><i>Where available include information from existing hydrometric station / flow estimation tool.</i></p> <p>_____ m³ /sec Dry Weather Flow (DWF).</p> <p>_____ m³ /sec Mean flow.</p> <p>_____ m³ /sec 95%ile flow.</p> <p>Source of Information:</p> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> EPA <input type="checkbox"/> OPW </div> <p>Hydrometric Station Reference Number: _____</p> <hr/> <p><i>Include information from on-site flow measurement where it has been undertaken.</i></p> <p>Flow: _____ m³/sec Date: _____</p> <p>Flow: _____ m³/sec Date: _____</p> <p>Flow: _____ m³/sec Date: _____</p> <p><i>Provide information on rainfall for a minimum of six days preceding each flow measurement.</i></p> |

PART IV – DISCHARGE TO SURFACE WATER

| A. (ii) Receiving Water Details - Discharge to Inland Surface Water | | |
|--|---|---------------|
| Receiving water background chemical data. | Parameter | Result (mean) |
| | BOD ₅ mgO ₂ /l | |
| | Suspended Solids mg/l | |
| | pH (pH units) | |
| | Dissolved Oxygen mg/l O ₂ | |
| | Temperature °C | |
| | Total Ammonia as mg/l N | |
| | Un-ionised Ammonia as mg/l N | |
| | Orthophosphate as mg/l P (unfiltered MRP) | |
| | Total Phosphorus as mg/l P | |
| | Nitrite as mg/l N | |
| | Nitrate as mg/l N | |
| | Total Nitrogen mg/l N | |
| | Chloride mg/l | |
| | Sulphate mg/l | |
| Refer to “Guidance on Applying for a Discharge Licence” for guidance on reporting monitoring data and on sampling. | | |

PART IV – DISCHARGE TO SURFACE WATER

| B. (i) Receiving Water Details - Discharge to Transitional / Coastal Water | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|-----------------|--|--|--|--|--|
| PART IV – Section 2 B is to be completed where the application pertains to a discharge to coastal or transitional waters i.e. estuaries / marine waters. | | | | | | | | | | | | | |
| Name of Receiving Water | | | | | | | | | | | | | |
| Location of Discharge (Co-ordinates) | Easting | | | | | | | Northing | | | | | |
| <i>Add additional rows where necessary.</i> | | | | | | | | | | | | | |
| All discharge locations to be indicated clearly on OS Map. | | | | | | | | | | | | | |
| Designation* | <p>The receiving water is located within the boundary of (or the discharge point is in the boundary of or within 3km of): <i>(tick as appropriate)</i></p> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> An SAC, site code _____. </div> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> An SPA, site code _____. </div> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> None of the Above </div> <p><i>* Note: Where the discharge is located within the boundary of or is within 3km of an SAC/SPA, an Appropriate Assessment must be submitted with this application as required by Council Directive 92/43/EEC on the Conservation of Natural Habitats and of Wild Fauna and Flora (Habitats Directive).</i></p> <hr style="border: 0; border-top: 1px dashed black;"/> <p>The receiving water is designated as: <i>(tick as appropriate)</i></p> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> A Shellfish Water </div> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> A Bathing Water </div> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> A Sensitive Water </div> <div style="margin-bottom: 10px;"> <input style="margin-right: 10px;" type="checkbox"/> None of the Above </div> | | | | | | | | | | | | |
| Name of River Basin District | Provide the name of the River Basin District in which the discharge is located _____. | | | | | | | | | | | | |
| Water Framework Directive Waterbody Status | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input style="margin-bottom: 5px; margin-right: 10px;" type="checkbox"/> No Status </div> <div style="width: 45%;"> <input style="margin-bottom: 5px; margin-right: 10px;" type="checkbox"/> Moderate </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input style="margin-bottom: 5px; margin-right: 10px;" type="checkbox"/> Bad </div> <div style="width: 45%;"> <input style="margin-bottom: 5px; margin-right: 10px;" type="checkbox"/> Good </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input style="margin-bottom: 5px; margin-right: 10px;" type="checkbox"/> Poor </div> <div style="width: 45%;"> <input style="margin-bottom: 5px; margin-right: 10px;" type="checkbox"/> High </div> </div> | | | | | | | | | | | | |
| Refer to “Guidance on Applying for a Discharge Licence” for sources of information. | | | | | | | | | | | | | |

PART IV – DISCHARGE TO SURFACE WATER

| B. (i) Receiving Water Details - Discharge to Transitional / Coastal Water (continued) | |
|---|---|
| Position of outfall | <p>The outfall is/will be positioned _____ metres above/below <i>(delete as appropriate)</i> Mean High Water Spring Tide</p> <p>and</p> <p>The outfall is/will be positioned _____ metres above/below <i>(delete as appropriate)</i> Mean Low Water Spring Tide</p> |
| Bathymetric Survey | <p>A bathymetric survey has/has not <i>(delete as appropriate)</i> been undertaken.</p> <p><i>Where a bathymetric survey has been undertaken, please include a copy with this application.</i></p> |
| Foreshore Licence | <p>A Foreshore Licence is:</p> <div style="margin-left: 40px;"> <input type="checkbox"/> Granted <input type="checkbox"/> Pending <input type="checkbox"/> Not Applied For <input type="checkbox"/> Not Required </div> <p><i>Where the Foreshore Licence has been granted, please include a copy with this application.</i></p> |

PART IV – DISCHARGE TO SURFACE WATER

B. (ii) Receiving Water Details - Discharge to Transitional / Coastal Water

PART IV – Section 2 B is to be completed where the application pertains to a discharge to coastal or transitional waters i.e. estuaries / marine waters.

| Receiving water background chemical data. | Parameter | Result (mean) |
|---|--|---------------|
| | Chlorophyll a µg/l | |
| | Transparency Secchi depth | |
| | Salinity psu | |
| | Temperature °C | |
| | Dissolved Oxygen % saturation | |
| | Dissolved Inorganic Nitrogen mg/l N | |
| | Un-ionised Ammonia as mg/l N | |
| | Orthophosphate as mg/l P | |
| | Total Phosphorus as mg/l P | |
| | Nitrite as mg/l N | |
| | Nitrate as mg/l N | |
| | Total Nitrogen mg/l N | |
| | BOD ₅ mg/l (Transitional Waterbody) | |
| | Refer to “Guidance on Applying for a Discharge Licence” for guidance on reporting monitoring data and on sampling. | |

PART IV – DISCHARGE TO SURFACE WATER

PART IV – Section 3

| A. Impact of Discharge - Discharge to Inland Surface Waters | |
|---|---|
| PART IV – Section 3 A is to be completed where the application pertains to a discharge to Inland Surface Waters. | |
| Have any of the following assessments been carried out in terms of your proposed discharge / receiving waters? | <div style="display: flex; flex-direction: column; gap: 10px;"> <div><input type="checkbox"/> Toxicity Testing</div> <div><input type="checkbox"/> Bioaccumulation Testing</div> <div><input type="checkbox"/> Biodegradation Testing</div> <div><input type="checkbox"/> Aquatic / Fisheries Study</div> <div><input type="checkbox"/> Modeling of Mixing Zone</div> <div><input type="checkbox"/> Other _____(please specify)</div> </div> <p style="margin-top: 10px;"><i>If 'Yes' please submit a copy of the report with this application.</i></p> |
| B. Impact of Discharge - Discharge to Transitional / Coastal Waters | |
| PART IV – Section 3 B is to be completed where the application pertains to a discharge to Transitional / Coastal Waters. | |
| Have any of the following assessments been carried out in terms of your proposed discharge / receiving waters? | <div style="display: flex; flex-direction: column; gap: 10px;"> <div><input type="checkbox"/> Toxicity Testing</div> <div><input type="checkbox"/> Bioaccumulation Testing</div> <div><input type="checkbox"/> Biodegradation Testing</div> <div><input type="checkbox"/> Aquatic / Fisheries Study</div> <div><input type="checkbox"/> Dispersion Modeling</div> <div><input type="checkbox"/> Other _____(please specify)</div> </div> <p style="margin-top: 10px;"><i>If 'Yes' please submit a copy of the report with this application.</i></p> |
| Effluent Dispersion | <p>Provide details for proposals for the dispersion of effluent.</p> <p style="margin-top: 20px;"><i>Provide additional sheets where necessary.</i></p> |

PART IV – DISCHARGE TO SURFACE WATER

PART IV – Section 4

| Checklist for Applicant when applying for a licence to discharge to Water | |
|--|--------------------------------|
| Details to be Submitted | Tick Box where included |
| 1. Fully completed, signed and dated application form (One original plus 5 copies) | |
| 2. Name & address of Applicant & Agent | |
| 3. Has the type of discharge been identified i.e. new or existing / domestic or trade? | |
| 4. Has location of discharge been identified | |
| 5. Newspaper Notice (One original plus 5 copies) | |
| 6. Application fee | |
| 7. Site location map at scale 1:50,000 | |
| 8. Site layout map at scale of 1:2500 | |
| 9. Drainage system drawings at scale no greater than 1:2500 | |
| 10. Description of process giving rise to trade effluent | |
| 11. Description of the proposed method of effluent treatment (including measures for the control of FOG where appropriate) | |
| 12. Treatment system process drawings | |
| 13. Outfall details and drawings | |
| 14. Treatment system operation & maintenance details | |
| 15. Effluent quality, discharge volume and flow details | |
| 16. Receiving water quality assessment (physico-chemical & biological) and flow calculations | |
| 17. Assessment of the impact of the discharge on the receiving water <ul style="list-style-type: none"> - Assimilative capacity calculations - Details of designated areas (including designation of waters) - Details of sensitivity of waters | |
| 18. Proposals for dealing with sludge (where relevant) | |
| 19. Emergency procedures in case of plant breakdown or pollution incident (including details of storage facilities onsite). | |
| 20. Has one original plus 5 copies of the application form and all associated documentation been included? | |

Please include any additional information which you deem to be pertinent to the application / discharge.

APPENDICES

[illegible]

Ref. European Communities (Classification, Packaging, Labelling and Notification of Dangerous Substances) Regulations, 1994

APPENDICES

Appendix B - Off-site Waste Disposal

| Waste Description | EWC. Catalogue No. | Quantity (Tonnes per annum) | Name of site accepting waste | Reference Number of site environment licence | State whether recycling, recovery or disposal |
|-------------------|--------------------|-----------------------------|------------------------------|--|---|
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |

APPENDICES

Appendix C - Characteristics of Trade and/or Domestic Effluent

The following list of parameters is indicative only. Additional physical, chemical or other characteristics as are pertinent to the effluent in question should also be identified.

Complete for all applicable sections, giving concentration ranges where available.

Emission Point co-ordinates (One table per emission point):

| Parameter Concentrations in mg/l unless otherwise stated | | Prior to Treatment (if any) | | | As discharged | | | |
|---|---|------------------------------------|-----------------------|-------------|------------------------|-----------------------|-------------|------------------|
| Characteristic Note: Section A = to be completed where discharging domestic effluent only Section A-E = to be completed where discharging a trade effluent. | | Max. Hourly | Max. Daily | Mg/l | Max. Hourly | Max. Daily | Mg/l | % Removal |
| A | Temperature °C | | | | | | | |
| | pH | | | | | | | |
| | Biological Oxygen Demand (5 day) | | | | | | | |
| | Chemical Oxygen Demand | | | | | | | |
| | Suspended Solids | | | | | | | |
| | Total Ammonia (as N) | | | | | | | |
| | Nitrate (as N) | | | | | | | |
| | Total Phosphorus (as P) | | | | | | | |
| | Conductivity | | | | | | | |
| | Molybdate Reactive Phosphorus (MRP) | | | | | | | |
| | Oils, Fats and Greases | | | | | | | |
| | Sulphates (as SO ₄) | | | | | | | |
| | Chlorides (as Cl) | | | | | | | |
| | Phenols (as C ₆ H ₅ OH) | | | | | | | |
| | Detergents (as Lauryl Sulphate) | | | | | | | |
| | Faecal Coliforms CFU | | | | | | | |
| B | Metals µg/l | | | | | | | |
| | Arsenic | | | | | | | |

APPENDICES

| | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| | Chromium | | | | | | | |
| | Copper | | | | | | | |
| | Cyanide | | | | | | | |
| | Fluoride | | | | | | | |
| | Lead | | | | | | | |
| | Nickel | | | | | | | |
| | Zinc | | | | | | | |
| | Other (<i>please specify</i>) | | | | | | | |
| C | Pesticides & Solvents: | | | | | | | |
| | Atrazine | | | | | | | |
| | Dichloromethane µg/l | | | | | | | |
| | Simazine µg/l | | | | | | | |
| | Toluene µg/l | | | | | | | |
| | Xylenes µg/l | | | | | | | |
| D | Organohalogen Compounds (Specify) | | | | | | | |
| | Organophosphorus Compounds (Specify) | | | | | | | |
| | Organotin Compounds (Specify) | | | | | | | |
| | Mineral Oils or Hydrocarbons of petroleum origin | | | | | | | |
| | Other toxic substances (Specify) | | | | | | | |
| | Colour (degrees hazen) | | | | | | | |
| E | Other: | | | | | | | |
| | Other relevant characteristics including fish toxicity data from tests carried out on all or part of the effluent | | | | | | | |

APPENDICES

Appendix D - Dangerous Substances

| Are any of the following chemicals used in the process or stored on the premises | Yes/No | Are residual chemical process materials or chemical tailings from a process recovered or discharged? |
|---|--------|--|
| EDC (1, 2 dichloroethane (C ₂ H ₄ Cl ₂)) | | |
| TRI trichloroethylene (C ₂ HCl ₃); | | |
| PER perchloroethylene (C ₂ Cl ₄); | | |
| TCB trichlorobenzene | | |
| Carbon tetrachloride, DDT and pentachlorophenol | | |
| Aldrin, dieldrin, isodrin, HCB (hexachlorobenzene), HCBD (hexachlorobutadiene) and CHCl ₃ (chloroform) | | |
| Cadmium | | |
| >100 kg of raw asbestos | | |
| Atrazine | | |
| Dichloromethane | | |
| Simazine | | |
| Toluene | | |
| Tributyltin | | |
| Xylenes | | |
| Arsenic | | |
| Chromium | | |
| Copper | | |
| Cyanide | | |
| Fluoride | | |
| Lead | | |
| Nickel | | |
| Zinc | | |

THIS SECTION OF THE APPLICATION FORM IS FOR LICENSING AUTHORITY OFFICE USE ONLY

| A. Checklist - Application for a licence to discharge to Water | |
|--|-----------------|
| Details to be Submitted | Tick Box |
| 1. Has the newspaper notice been published two weeks before making the application | |
| 2. Has the newspaper notice been published in a newspaper circulating in the area | |
| 3. Does the newspaper notice contain all the required information (as detailed in S.I. No. 108 of 1978) | |
| 4. Is one original and five copies of the newspaper notice included | |
| 5. Has a fully completed, signed and dated original copy of the application form plus five copies been submitted | |
| 6. Has the application fee (€380) been submitted | |
| 7. Is the name & address of the Applicant & Agent included | |
| 8. Is the address of facility from which it is proposed to discharge included | |
| 9. In the case of an application submitted by a company, has a certificate of incorporation been included? | |
| 10. Where appropriate, does the licence application include a statement that the application relates to an existing discharge | |
| 11. Have six copies of the site location map at scale 1:50,000 been submitted showing <ul style="list-style-type: none"> - The boundary of the premises from which it proposed to discharge - The point of discharge(s) to waters - The name of the receiving waters - The name of the Townland in which the discharge occurs | |
| 12. Have six copies of the site layout map at scale of 1:2500 been submitted showing <ul style="list-style-type: none"> - The site boundary - The extent of the development, showing building locations and any underground construction - The location and layout of the treatment system - The location of the outfall | |
| 13. Have six copies of the drainage system drawings been submitted showing <ul style="list-style-type: none"> - Existing and new foul and storm drainage showing manhole locations and indicating whether gravity or rising mains - The location of the treatment system - Pipe diameters and levels - Volumes of storage tanks - Location of discharge point | |
| 14. Have six copies of the treatment system process drawings including outfall details been submitted | |
| 15. Has a description of the treatment process been included | |
| 16. Are details of the effluent composition and volume included | |
| 17. Are quality and flow data of the receiving water included | |
| 18. Has an assessment of the impact of the discharge on the receiving water been included | |

For Licensing Authority use only

Date Received:

Reference Number: