



# Eastern Idaho Regional Sewer District

## COMMERCIAL/INDUSTRIAL USER Application for Connection Permit

A wastewater discharge permit is required by the Eastern Idaho Regional Sewer District (EIRSD) sewer ordinance. The ordinance stipulates that an user shall submit an Application for Connection Permit and provide sufficient information concerning the nature, concentration, and quantity of his waste or such other information as may be reasonably necessary for the District Manager to ensure compliance with the ordinance. Upon receipt of this application, the District Manager shall review the same and, if necessary, inspect the property and facilities of the applicant to determine if said facilities comply with the provisions of the ordinance. Upon making such determination, the District Manager shall forthwith issue a permit to the applicant authorizing discharge of waste to the public sewer.

The discharge limits of this permit may be revised at any time as necessary to ensure compliance with State or Federal regulations or limits.

Printed Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date of Application: \_\_\_\_\_

This permit shall become effective \_\_\_\_\_

This permit shall expire \_\_\_\_\_

*Permit must be renewed every 5 years.*

*Permittee shall reapply on or before 180 days before this permit expires.*

*If the applicant has not begun discharging within 1 year from the approval signature date of the Authorized Representative of EIRSD, this permit shall expire.*

## Identifying Information:

Legal Name of User Entity: (Individual, Corporation, etc.)	_____	(Name)	
Address of Facility: (mailing address)	_____	(Street Address)	
	_____	(City, State, Zip)	
	Phone: (    )    -		
Email: _____	@		
Legal Description: (Insert or attach copy of recorded legal description)	.		
Address of User Entity: (mailing address)	_____	(Street Address)	
	_____	(City, State, Zip)	
Name of Owner(s):	Owner 1.	_____	(First, Middle, Last)
	Owner 2.	_____	(First, Middle, Last)
	Owner 3.	_____	(First, Middle, Last)
Name of Operator:	_____	(First, Middle, Last)	
	Phone: (    )    -		

## Type of Discharger:

Commercial \_\_\_\_\_

Industrial \_\_\_\_\_

Institutional \_\_\_\_\_

Type of Industry \_\_\_\_\_

Food Service \_\_\_\_\_

\_\_\_\_\_

Retail \_\_\_\_\_

\_\_\_\_\_

Recreational \_\_\_\_\_

Other (specify) \_\_\_\_\_

## Description of Operations:

<b>Description of Operations:</b>		
<b>Standard Industrial Classification (SIC) Code:</b>		
New connection _____		
Change of use _____		
<b>Average Daily Rate of Production:</b>		
<b>Maximum Daily Rate of Production:</b>		
<b>Number of Employees:</b>		
<b>Hours of Operation:</b>		
	<b>Average Day</b>	<b>Maximum Day</b>
<b>Raw Materials Used:</b>	1.	1.
	2.	2.
	3.	3.
	4.	4.
	5.	5.
	6.	6.
<b>Chemicals Used/Stored:</b>	1.	1.
	2.	2.
	3.	3.
	4.	4.
	5.	5.
	6.	6.
<b>Time of Discharge:</b>		
<b>Flow (gpd)</b>		
<b>Biological Oxygen Demand (BOD) (ppd)*</b>		
<b>Total Suspended Solids (TSS) (ppd)*</b>		

\*For industrial permit applications. Provide additional sheets as required.

**Computation of Equivalent Residential Units (ERUs):**

Calculate the ERU value to be used for billing using Method 1 and 2 below, subject to confirmation by EIRSD’s District Manager.

Method 1: Using the ERU Schedule (Attachment A), calculate the number of ERUs for the proposed connection:

- User Type: \_\_\_\_\_
- Evaluation Unit: \_\_\_\_\_
- Number of Evaluation Units (A): \_\_\_\_\_
- Number of ERUs per Evaluation Unit (B): \_\_\_\_\_
- Calculated ERUs (A x B) = \_\_\_\_\_

Method 2: If the strength of the proposed discharge will exceed the strength of domestic wastewater strength as defined in EIRSD’s Sewer Ordinance, Section 1.2, use the average daily values for the maximum month in the past 12 months to calculate the ERUs based on each of the parameters listed below. See EIRSD Sewer Ordinance, Section 14.4, for more details.

Parameter	Max Month Avg Daily Value	ERU Value	Calculated ERUs = [gpd]/[ERU value]
Flow	gpd	218 gpd/ERU	
	mgd		
	Max Month Avg Daily Value	ERU Value	Calculated ERUs = [[mgd]x[ppm]x8.342]/[ERU value]
BOD	ppm	0.636 ppd/ERU	
TSS	ppm	0.636 ppd/ERU	
TP	ppm	0.013 ppd/ERU	
TKN	ppm	0.091 ppd/ERU	
Ammonia	ppm	0.055 ppd/ERU	

Where: BOD – Biological Oxygen Demand; TSS – Total Suspended Solids; TP – Total Phosphorus; TKN – Total Kjeldahl Nitrogen

Enter the highest number of ERU’s calculated above for listed parameters = \_\_\_\_\_ ERUs

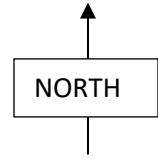
Enter the highest ERU value from Methods 1 and 2: \_\_\_\_\_ ERUs

## Specific Limitations and Monitoring Requirements:

Permit Effluent Limits					
Parameter	Effluent Limitations		Monitoring Requirements		
	Daily Average	Daily Max	Sample location	Sample frequency	Sample type
Flow (gpd)					
BOD <sub>5</sub> (mg/l)					
TSS (mg/l)					
PH					
Temperature (°C)					
Color					
Turbidity (NTU)					
Arsenic (mg/l)					
Cadmium (mg/l)					
Chromium (mg/l)					
Copper (mg/l)					
Cyanide (mg/l)					
Lead (mg/l)					
Mercury (mg/l)					
Nickel (mg/l)					
Oil and grease (petroleum based or mineral oil) (mg/l)					
Oil and grease (animal and vegetable based) (mg/l)					
Silver (mg/l)					
Stoddard solvent (mg/l)					
1,1,1-trichlorethylene (mg/l)					
Zinc (mg/l)					

### Sketch Plan:

Provide a sketch plan below depicting the lot boundaries, the planned location of the structure, the planned location (with dimensions) of the sewer service lateral and connection point to the public sewer main, and any other features pertinent to the construction of the sewer connection.



## Special Requirements:

1. The permittee shall submit the results of sampling and analysis identifying the nature and concentration (or mass where required) of regulated pollutants identified in EIRSD's Sewer Ordinance, as appropriate in the discharge. Both daily maximum and average concentration (or mass, where required) shall be reported. The sample shall be representative of daily operations and shall conform to sampling and analytical procedures outlined in EIRSD's Sewer Ordinance.
2. The permittee shall take regular samples to compile that data necessary to comply with the requirements of this permit. Copies of all compliance reports and supporting data must be kept for five (5) years.
3. The permittee shall submit an operations and maintenance plan of all pretreatment facilities within 90 days of the effective date of this permit.
4. The permittee shall submit a Quality Assurance Plan (QAP) for all monitoring required by this permit within 90 days of the effective date of this permit. At a minimum, the QAP must include: a map indicating the location of each sampling point, the qualification and training of sampling personnel, name address and phone of the laboratories used by the permittee.
5. To ensure the effluent limits of this permit are not violated at times other than when routine samples are taken, the permittee must collect additional samples as soon as possible and at the appropriate sampling points whenever any discharge occurs that may reasonably be expected to cause or contribute to a violation that is unlikely to be detected by routine sampling. The permittee must analyze the additional samples for those parameters listed in this permit and report the findings to the District Manager.
6. The permittee must report by phone within 2 hours from the time the permittee becomes aware of any noncompliance that may endanger human health or the environment, any discharge of a chemical spill or a discharge resulting from a fire or other emergency action.
7. The permittee must notify the District Manager in writing prior to the introduction of any chemicals not listed on the application. This notification must include at a minimum the MSDS data, anticipated concentration and mass loading rates, and the expected impact the new chemical will have on the character of the permittees discharges.
8. Permittee must allow the District Manager or his designee, upon presentation of credentials, access to the permittee's premises for the purpose of conducting sampling, inspection of monitoring and control equipment, and to copy at reasonable times any records that must be kept under the conditions of this permit.
9. The permittee must give notice as soon as possible of any planned changes in the facility or process that could change the nature or increase the discharge of pollutants to the POTW.

**Certification:**

Sign the following statement signifying the permit has been reviewed by an authorized representative of the User and that the User understands requirements of this permit and agrees to comply with these requirements as stated in the current applicable ordinances and permit application.

*“I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly 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.”*

\_\_\_\_\_  
(Name, Print)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

STATE OF IDAHO )

: ss.

County of \_\_\_\_\_)

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me the undersigned, a Notary Public for the State of Idaho, personally appeared \_\_\_\_\_, known to me to be the person(s) whose name(s) is / are subscribed to the within instrument and acknowledged to me that they executed the same and that they had authority to exercise such authority.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year first above written.

\_\_\_\_\_  
Notary Public  
Residing at:  
My commission expires:

## Compliance Schedule:

The permittee shall comply with EIRSD's adopted ordinances, bylaws, policies, and standards, copies of which can be obtained from EIRSD's District Manager or at [www.eirsd.org](http://www.eirsd.org). This includes construction of the service connection(s) in accordance with EIRSD's Design and Standards Manual.

If additional pretreatment or operation and maintenance will be required to meet the applicable pretreatment standards the User shall submit a Compliance Schedule indicating the shortest schedule by which the User will provide such additional pretreatment and/or operation and maintenance. The completion date in this schedule shall not be later than the compliance date established pursuant to EIRSD's Sewer Ordinance.

Pretreatment Standard	Operation & Maintenance	Compliance Schedule
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

**Approvals:**

The following approval signatures are required prior to discharge:

**Entity Owner of Collection System Receiving Discharge**

Name of Entity: \_\_\_\_\_

Authorized Representative

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

**EIRSD**

Authorized Representative

Name: Scott Barry Title: District Manager

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

**Consulting Engineer for EIRSD (only needed for Industrial User permits)**

Name of Firm: \_\_\_\_\_

Authorized Representative

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

# **ATTACHMENT 1**

## **ERU Schedule**

**THE ATTACHED DOCUMENT MAY BE AMENDED AND REVISED FROM TIME TO TIME AND SHOULD NOT BE CONSIDERED AS THE CURRENT VERSION. CONTACT THE EIRSD DISTRICT OFFICE FOR THE CURRENT VERSION.**



# EASTERN IDAHO REGIONAL SEWER DISTRICT EQUIVALENT RESIDENTIAL UNIT (ERU) SCHEDULE

**CUSTOMER:**  
**Contact:**  
**Street Address**  
**City, State, Zip**  
**Phone No.**  
**Approved:**

**Reviewed:**

ERU SCHEDULE AND ERU CALCULATOR					
USER TYPE	DESCRIPTOR	EVALUATION UNIT	NUMBER OF UNITS	EQUIVALENT UNIT ERU	CALCULATED EQUIVALENT UNITS ERU
<b>Residential Dwelling</b>					
Single Family Home		Single Home		1.000	0
Mobile Home		Single Mobile Home		1.000	0
Multi-plex Unit		Single Living Unit		1.000	0
Apartment		Single Apartment		1.000	0
<b>Commercial Residential</b> Minimum of 1 ERU Rounded Down if Decimal is Below 0.25 and Rounded Up if Above 0.25					
Hotel		Room		0.250	0
Motel		Room		0.250	0
Motel/Hotel with Kitchenette		Room		0.500	0
Boarding /Ro					0
<b>Institutional</b>					
Church/Asse					0
Church/Asse					0
Clinic/Massai					0
Hospital					0
Extended Ca					0
Daycare Facility		Child/Student/Employee		0.040	0
School	with Cafeteria and Gym	Student		0.050	0
School	With Cafeteria only	Student		0.033	0
School	No Cafeteria or Gym	Student		0.025	0
School	Resident Staff	Employee		0.125	0
School	Non-resident Staff	Employee		0.050	0
<b>Food Service</b> Minimum of 1 ERU Rounded Down if Decimal is Below 0.25 and Rounded Up if Above 0.25					
Restaurant - with Seating		Seat		0.100	0
Restaurant - Fast Food (paper plates and cups)		Seat		0.050	0
Restaurant - Drive Thru Only		Establishment		2.000	0
Drinking Establishment		Seat		0.063	0
Dining Hall		Seat		0.063	0
<b>Commercial</b> Minimum of 1 ERU Rounded Down if Decimal is Below 0.25 and Rounded Up if Above 0.25					
Service Station/Convenience Store	No Public Restroom	Establishment		1.000	0
	with Public Restroom	Public Restroom***		1.500	0
	with Food Preparation Facilities	Additive category		1.000	0
Bowling Alley		Lane		0.400	0
Barber/Beauty Shop		Seat		0.330	0
Laundry Self Service		Washer		0.250	0
Public Transportation Terminal	with Private or Public Restroom	Restroom***		1.500	0
Garage or Maintenance Shop		Service Bay		0.250	0
Car Wash - Conveyor (Tunnel Auto)	reduce # of bays by 50% if recycling	Bay		8.400	0
Car Wash - In-bay (Touchless Auto)	reduce # of bays by 50% if recycling	Bay		10.300	0
Car Wash - Self-serve (Wand)	reduce # of bays by 50% if recycling	Bay		3.000	0
Grocery Store		Employee		0.050	0
	plus Butcher Shop	Establishment		2.000	0
	plus Public Rest Room	Public Restroom***		1.500	0
Shopping Center/Mall (No food or laundry)	Addition to Individual shop category	Parking Space		0.004	0
	plus Public Rest Room	Public Restroom***		1.500	0
Retail Store		Employee*		0.040	0
	plus Public Rest Room	Public Restroom***		1.500	0
Fitness Center/Club	with Private or Public Restroom	Restroom***		1.500	0
	plus Showers	Shower		0.500	0
Theatre - Auditorium		Seat		0.010	0
Theatre - Drive-in		Space		0.033	0
Other Performing Arts building	with Private or Public Restroom	Restroom***		1.500	0
Warehouse (Dry Goods)		Employee*		0.040	0
	plus Showers	Employee		0.100	0
Contracted Services		Employee		0.040	0
	plus Showers	Employee		0.100	0
Offices		Employee*		0.040	0
Factory/Dry Goods Manufacturer		Employee*		0.040	0
	plus Showers	Employee		0.100	0
	plus Cafeteria	Employee		0.100	0
Dance Studio (evening sessions only)	If all day sessions, assess as School	Establishment		1.000	0
<b>Recreational and Public Service</b> Minimum of 1 ERU Rounded Down if Decimal is Below 0.25 and Rounded Up if Above 0.25					
Fairground (peak day attendance)		Person		0.007	0
Arcade	with Private or Public Restroom	Restroom***		1.500	0
Amusement Park (peak day attendance)		Customer		0.007	0
Trailer Camp	RV Hookup	Space		0.400	0
Campground	Toilet/no Shower	Space		0.200	0
Campground	Toilet and Shower	Space		0.330	0
RV Facility	Dump Station	Station (Engineer Review Recom.)		5.000	0
Stadium		Seat		0.010	0
Swimming Pool		Person		0.040	0
Rest Area	Toilets	Person		0.025	0
Rest Area	Toilets & Showers	Person		0.100	0
Public Rest Room		Public Restroom***		1.500	0
<b>Industrial</b> Minimum of 1 ERU Rounded Down if Decimal is Below 0.25 and Rounded Up if Above 0.25					
Designed or Calculated flow		gpd per ERU value (max month)	218	0.00	0
Assigned ERU value shall be the highest calculated value based on max month values relative to residential values for flow (200 gpd, BOD (350 mg/L), or TSS (350 mg/L))					
<b>Misc. Category</b> Minimum of 1 ERU Rounded Down if Decimal is Below 0.25 and Rounded Up if Above 0.25					
Designed or Calculated flow		gpd per ERU value (max month)	218	0.00	0
<b>TOTAL CALCULATED ERU VALUE</b> 0					

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\* Due to rounding in the calculations, all employees will round up when the decimal is at 0.24 (6 employees)

\*\*Minimum of 1 ERU assessed if a stand-alone business. If daycare facility is a private in-home facility, then residence is assessed 1 ERU and the minimum ERU does not apply. Additional ERUs are assessed starting at 6 children/students/employees. Please note that the worksheet will assess 1 ERU at below 6 children/students/employees - if this is the case, ERU = 0; at 6 children/students/employees and above follow the worksheet calculation.

\*\*\*See definition of Restroom and differentiation between "private" and "public" restroom on the Reference tab under Recreational and Public Service / Public Restroom.