

DEPARTMENT OF PUBLIC WORKS
WASTEWATER DIVISION
40 SOUTH PORTER STREET
BRADFORD, MA 01835-7646
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WILLIAM J. PAUK, P.E.
SUPERINTENDENT / ENGINEER
WATER / WASTE WATER

CITY OF HAVERHILL
MASSACHUSETTS 01830

Date: _____

**SANITARY WASTEWATER DISCHARGE PERMIT
(ZERO PROCESS DISCHARGE)**

Permit # _____

The Permit Discharger agrees to comply with the terms of the City's Sewer Use Ordinance (Chapter 208).

1. Name of Discharger: _____

2. Address of Discharger: _____

3. Nature of Activity: _____

4. Sanitary Waste Discharge
Only Sources *-see note below. (Yes or No)
Sinks: _____
Toilets: _____
Showers: _____

Total Sanitary Discharge Volume per day: _____ gallons.

5. Maximum Number of People Occupying Premises: _____

Issuing Date: _____ Expiration Date: _____

Signed: _____ Date: _____
Discharger

Approved: _____ Date: _____
City Official

*- No process wastewater discharge, no contact or non-contact cooling water discharge, no boiler blowdown discharge allowed.