

VIRGINIA POLLUTION ABATEMENT APPLICATION

FORM D

MUNICIPAL EFFLUENT AND BIOSOLIDS

PART D-III EFFLUENT CHARACTERIZATION FORM

- 1. Facility Name: \_\_\_\_\_
- 2. Source or Generator: \_\_\_\_\_
- 3. Type of Treatment: \_\_\_\_\_
- 4. Degree of Treatment: \_\_\_\_\_
- 5. Provide at least one analysis for each parameter listed under effluent. Upon review, additional analyses may be required by DEQ.

<u>Parameter</u>	<u>Effluent</u>
BOD <sub>5</sub>	_____ mg/l
TSS	_____ mg/l
TRC	_____ mg/l
Percent Solids	_____ %
pH	_____ S.U.
Nitrogen, (Nitrate)	_____ mg/l
Nitrogen, (Ammonium)	_____ mg/l
Nitrogen, (Total Kjeldahl)	_____ mg/l
Phosphorus, (Total)	_____ mg/l
Potassium, (Total)	_____ mg/l
Sodium	_____ mg/l

- 6. Provide at least one analysis of any other pollutants which you believe may be present in the effluent. Upon review, additional analyses may be required by DEQ.

<u>Parameter</u>	<u>Effluent</u>
Lead	_____ mg/l
Cadmium	_____ mg/l
Copper	_____ mg/l
Nickel	_____ mg/l
Zinc	_____ mg/l
Other	_____ mg/l
	_____