

208 CONSISTENCY REVIEW

APPLICANT: PLEASE COMPLETE SECTIONS 1-10

Application Submittal: submit application to the 208 Program. Email application to emv@azdeq.gov; call (602) 771-4606 for assistance, or go to http://azdeq.gov/node/458 for further information. Along with this completed application, the applicant MUST submit a map with the information noted in item 4 below. Failure to include the map will result in the application being considered incomplete.

Part A. Is your application for any of the following: Please answer yes or no in the boxes.			
		A new domestic (publicly or privately owned) Wastewater Treatment Plant (WWTP)	
		An existing domestic (publicly owned or privately owned) WWTP that is adding an AZPDES discharge outfall or changing the location of a previously approved AZPDES discharge outfall	
		More than a 10% increase in permitted design flow	
		Expansion of the service area	
		Change of ownership of a domestic (publicly or privately owned) WWTP (Pima County only)	
		Sewage generated by an on-site wastewater treatment facility 3,000 – 24,000 gpd.	

If you answered "yes" to any question above, please complete the remainder of this form.

Part B. Facility	Information	Explanation (Provide a brief description)
	Name of Owner	
1 Facility Name	Name of Applicant	
1. Facility Name	Contact Phone Number	
	Contact Email Address	
	a. AZPDES (existing or new)	
	b. APP (existing or new)	
2. Permit Type	c. If AZPDES, give name of surface water receiving the discharge	Current surface water discharged to:
		Future surface water discharged to:
3. Facility Location	County	
	Latitude/Longitude (for AZPDES, lat/long of the outfall)	
	Township, Range and Section	

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4. Attach a map that includes at minimum	c. Other disposal options	include current and future area)				
	a. New WWTP facility					
	b. New outfall or change in outfall location					
5. Describe the application action	1 71 77					
checked in Part	d. Expansion of service area					
above.	e. Change in WWTP ownership (Pima County only)					
	f. Sewage generated by an on- site wastewater treatment facility 3-24,000 gpd					
6. Facility Information	b. Design capacity (annual ave	Current; Future; Future; Future; Future; Future; Future; Future;				
	a. Municipal/public utility	Name:				
7. What type of		Name:				
entity will opera the facility?	c. Semi-public (sanitary district, improvement district)	Name:				
	d. Other (explain)	Explain type: Name:				
Application Submittal by one of the following:						
Applicant:		Date:				
Permit Writer:		Date:				
		Illution Control Act, Arizona Administrative Code R18-9-108(B)				
(10), and Reviewed By:	quest for 208 Conformance Review has been completed.					
nevieweu by.		Date:				
Manager:		Date:				

Please note that Permits will not be issued solely on the basis of a review. However, this review is based on the facility applying for, and receiving, the appropriate permits to start and maintain operation under compliance with federal and state regulations.