Foirm Iarratais Scardadh isteach in Uisce Dromchla



**Discharge to Surface** Water Application Form

Tá an fhoirm seo le fáil i gcló mór chomh maith

This form is also available in large print

# Tá míle fáilte an fhoirm seo a líonadh i nGaeilge

Local Government (Water Pollution) Acts, 1977& 1990 Application for a Licence to Discharge Trade and/or Domestic Waste Water to Surface Water

# Part I – Declarations & Signatures

## 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.

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 to sewer 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 as to what information they are to provide in the form they are unsure as to 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

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, the Applicant should attach additional sheets to the form containing such information.

The additional sheets should be cross-referenced to the appropriate section in the Application Form. 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 -Groundwaters".

## **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 additional 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.

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 Surface Waters 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).
* indicate whether trade, domestic or both
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)     Date:
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 term <u>s of the licence are not complied with.</u>
Signed: Date:
(provide signature of Applicant)
Refer to the "Guidance on Applying for a Discharge Licence" for definitions of the Applicant and the
Responsible Body

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#### A. Disclosure of Information

The Freedom of Information Act, 1997 (as amended) states that every person has a right to access 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 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 also 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:	(provide signature of the Applicant)	Date:	
Signed:	(provide signature of the Agent)	Date:	

Part II – Section 2	1
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A. Contact Details - Applicant		
A (i) Provide contact details for the Applicant below		
The Applicant is:	An Individual	
	A Group of Individuals	
	A Corporate	
Name (Principal Contact)*		
Address		
Postcode		
Phone Number (day)		
Phone Number (night)		
Fax		
E-mail		
* Where the Applicant is a group of individuals or a co	rporate body, provide the name of one individual to	

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 to a licence granted by the licensing authority.

A (ii) Where the Applicant is an Individual provide the	e following details:
Relationship to the premises from which it is	
proposed to discharge	Owner/occupier
	Landowner
	Responsible for treatment facility
	Other(please
	specify)

A (iii) Where the Applicant is a Group of Individuals provide the following details:	
Type of Group	Management Company
	Residents Association
	Voluntary Group
	Club
	Other(please specify)

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A (iv) Where the Applicant is a Corporate Body provi	de the following details:
Type of Corporate Body	Limited Company
	Public Limited Company
	Sole Trader
	Co-operative
	Partnership
	Other(please specify)
Certificate of Incorporation must be included wi	th 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		
Postcode		
Phone Number (day)		
Phone Number (night)		
Fax		
E-mail		
Relationship to the Applicant e.g. employee,		
consultant, partner.		
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	
Postcode	
Site location (Co-ordinates)	Easting Northing

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Is the site an existing development or a new development?	Existing	New
Is there any existing discharge license(s)	Yes	No
granted in relation to the site?	Reference No:	Reference No:
Is planning permission granted for any proposed / existing development at the site?	Granted Granted Pending	Reference Number
Have copies of the following maps / drawings been included?	details of what is to be inclu	ing for a Discharge Licence" for ded on the maps.
Outfall Details	Provide details of the outfall	I design, size & construction
Provide copies of the outfall drawings		

A (ii) Identify the sector(s) from which	the proposed discharge v	will be generated.	
Type of Premises		Please tick the box as appropriate	٧
	Accommodation	Household / Holiday Home	
		Hotel / Guesthouse / B&B	
		Caravan Park / Camp Site	
		Nursing Home	
	Education	Non-residential facility	
		Boarding School	
		College / University	
	Commercial /	Office	
	Service	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
<b>Other</b> (Please	e.g. tourism – heritage centre,
specify)	quarry activities

### 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 &	Where applicable, complete Appendix A and Appendix B of this form.
Waste Disposal	

Part III – Section 1

A. Effluent Details	
PART III – Section 1 A is to be completed by All Applicants.	

Type of effluent	Domestic Waste Water Only
	Trade Effluent Only
	Both Domestic & Trade Effluent
Indicate the type of discharge to which this	New Discharge
application relates.	Existing Discharge
Domestic Waste water	
(if relevant)	Population Equivalent (p.e.)
	Expected Dry Weather Flow (DWF)
	m³/day.
	Provide details of how the P.E. & DWF were
	calculated.
Trade Effluent only or Domestic & Trade	Normal volume of effluent discharged per day is
(if relevant)	m³/day.
	Maximum volume of effluent discharged in one day ism <sup>3</sup> /day.
	Maximum volume of effluent discharged per hour is
	m³/hour.
Provide details of how the trade effluent flows are a	calculated.
Effluent Characteristics.	Complete Appendix C and Appendix D of this form.
	Provide additional sheets where necessary.

B. Effluent Details	
PART III – Section 1 B is to be completed by All Applic	cants.
Provide additional sheets where necessary.	
Discharge Variability	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.
	Where the discharge shows seasonal or other variation, please provide details of flow volumes and times of discharge.
	Also provide details of varying effluent characteristics in Appendix C and Appendix D.
Date of Discharge	Date:
	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.
Fats, Oils and Grease (FOG)	Provide details of control measures proposed for the
(if relevant)	removal of FOG from the effluent prior to discharge. Provide technical data sheets for any equipment proposed.
Food Waste (if relevant)	Provide details of provisions for source segregation and disposal of food waste.

Other Discharges	Provide particulars of any other discharges from the						
	premises (e.g. storm water).						
Water Supply	Provide details of the source of water that will form						
	part of the discharge e.g. mains, borehole, river etc.						
	The estimated volume of water used per day is						
	m³/day						
Other Effluent Details	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.						

Part III – Section 2

Part III – Section 2A 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							
	Postcode							
	Phone Number (day)							
	Phone Number (night)							
	Fax							
	E-mail							
	Registered Company							
	Details							
Waste Water Treatment System Overview	Provide particulars of the	existing / proposed effluent						
	treatment system.							

Provide additional sheets where necessary.

Provide copies of the treatment system process drawings.

B. Effluent Treatment	
PART III – Section 2 B is to be co	mpleted where the effluent is to be treated prior to discharge.
Provide additional sheets where	necessary.
Treatment System	Provide details of the proposals for the treatment system maintenance.
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).
Sludge	riovide details of proposals for dealing with siddge (where relevant).

A. Effluent Monitoring											
PART III – Section 3 A is to be co	mpleted by All	l Appl	ican	its.							
Provide details of the monitoring	g proposed for	r the e	efflu	ient d	liscł	harge					
Provide additional sheets where	necessary.										
Monitoring the Discharge.	Provide details of any proposals to monitor the discharge e.g.										
	Parar	neter	s to	be a	naly	vsed;					
	<ul> <li>Moni</li> </ul>	toring	g pro	ogran	nme	e;					
	• Detai	ls of a	ny	samp	ling	gequipment to be used.					
Location of sampling point(s)	Easting					Northing					
(Co-ordinates)											
Effluent Flow Monitoring	Provide deta	ils of	any	prop	osa	ls to monitor the discharge	flo۱	N			<u>.                                    </u>
Licensing Authority Monitoring	access to the	e efflu ample	ent es m	in or nay b	der e ta	he Licensing Authority will I to take samples and indicat ken e.g. last manhole befor nce below).	te tl	he p	ooir	nt a	
Location of Licensing Authority sampling point(s) (Co-ordinates)	Easting					Northing					

B. Pollution Control								
PART III – Section 3 B is	PART III – Section 3 B is to be completed by All Applicants.							
Provide details of any p	Provide details of any pollution control measures proposed.							
Provide additional sheets where necessary.								
Accidental	Provide details of arrangements to prevent accidental discharges.							
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	Is there an Environmental Management Plan in place in respect of the site?
Management Plan	Yes No
	If 'Yes' please submit a copy with this application.

Part IV – Section 1

A. General Details	
Identify why it is not feasible to discharge to sewer.	
Provide details of the newspaper notice.	Name of Publication:
	Date of Print:
	(Please include one original plus the required copies
	of the notice)

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 Wa	ter										
Location of Discharge	Easting					Northing					
(Co-ordinates)											
Add additional rows where necessary.											
All discharge locations	to be indicate	d clearly or	n a 1	-250	) OS	Map.					

Existing Uses	The receiving water is a tributary of (insert waterbody name).
	Water uses are (e.g. angling, recreational, navigation etc.)
Designation*	The receiving water is located within the boundary of : <i>(tick as appropriate)</i> An SAC, site code An SPA, site code None of the Above

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	* Note: Where the discharge is located within the boundary of a Natura 2000 site (SAC or SPA), an Appropriate Assessment (Natura Impact Statement) 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).						
	The receiving water is designated as: <i>(tick as appropriate)</i> A Salmonid Water An Inland Bathing Water						
	A Pearl Mussel Water						
	A Drinking Water						
	A Sensitive Water None of the Above						
Name of River Basin District	Provide the name of the River Basin District in which the discharge is located						
Water Framework Directive Waterbody Status	No Status Moderate						
	Bad Good						
Refer to "Guidance on Applying for a	I Discharge Licence" for sources of information						
Receiving Water Flow Data.	Where available include information from existing hydrometric station / flow estimation tool.						
	m <sup>3</sup> /sec Dry Weather Flow (DWF).						
	m <sup>3</sup> /sec Mean flow.						
	m <sup>3</sup> /sec 95%ile flow.						
	Source of Information:						
	EPA OPW						

	Hydrometric Station Reference Number:
	 Include information from on-site flow measurement where it has been undertaken.
	Flow at proposed discharge: m <sup>3</sup> /sec Date: Flow at proposed discharge: m <sup>3</sup> /sec Date:
	Flow at proposed discharge: m <sup>3</sup> /sec Date:
	Flow at nearby hydrometric station: m <sup>3</sup> /sec Date:
	Flow at nearby hydrometric station: m <sup>3</sup> /sec Date:
	Flow at nearby hydrometric station: m <sup>3</sup> /sec Date:
	<i>Provide information on rainfall for a minimum of six days preceding each flow measurement.</i>
Where a discharge is to a lake dispers	sion modelling is likely to be required. The Applicant should consult

with the Licensing Authority.

Receiving water background	Parameter	Result (mean)
chemical data.	BOD <sub>5</sub> mgO <sub>2</sub> /I	
	Suspended Solids mg/l	
	pH (pH units)	
	Dissolved Oxygen mg/I O <sub>2</sub>	
	Temperature <sup>o</sup> C	
	Total Ammonia as mg/l N	
	Un-ionised Ammonia as mg/l N	
	Orthophosphate as mg/I P (unfiltered MRP)	
	Total Phosphorus as mg/l P	
	Nitrite as mg/I N	
	Nitrate as mg/I N	
	Total Nitrogen mg/l N	
	Chloride mg/l	
	Sulphate mg/l	
Refer to "Guidance on Applying f	or a Discharge Licence" for guidance on reporting mo	onitoring data and
sampling.		

B. (i) Receiving Water Details - Discharg	e 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	e waters.
Name of Receiving Water	
Location of Discharge Easting	Northing
(Co-ordinates)	
Add additional rows where necessary.	
All discharge locations to be indicated cle	early on a 1-2500 OS Map.
Designation*	The receiving water is located within the boundary of (or the
	discharge point is in the boundary of or within 3km of): (tick as
	appropriate)
	An SAC, site code
	An SPA, site code
	None of the Above
	* Note: Where the discharge is located within the boundary of or is within 3km of an SAC/SPA, an Appropriate Assessment (Natura Impact Statement) 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).
	The receiving water is designated as: (tick as appropriate)
	A ShellfishWater
	A Bathing Water
	A Sensitive Water
	None of the Above
Name of River Basin District is which the	Provide the name of the River Basin District in which the
discharge is located	discharge is located
aischarge is localed	

Water Framework Directive Waterbody					
Status	No Status	Moderate			
	Bad	Good			
	Poor .	High			
Refer to "Guidance on Applying for a Disch	harge Licence" for sources of informatio	n.			
Position of outfall	The outfall is/will be positioned	metres above/below			
	<i>(delete as appropriate)</i> Mean High Wa	iter Spring Tide			
	and				
	The outfall is/will be positioned	metres above/below			
	(delete as appropriate) Mean Low Wa				
Bathymetric Survey	A bathymetric survey has/has not (del	<i>ete as appropriate)</i> been			
	undertaken.				
	Where a bathymetric survey has been	undertaken, please			
Foreshore Licence	<i>include a copy with this application.</i> A Foreshore Licence is:				
	Granted				
	Pending				
	Not Applied For				
	Not Required				
	Where the Foreshore Licence has been	granted, please include a			
	copy with this application.				
Receiving water background chemical	Parameter	Result (mean)			
data.					
	Chlorophyll a μg/l				
	Transparency Secchi depth				
	Salinity psu				
	Temperature <sup>o</sup> C				
	Dissolved Oxygen % saturation				

	Dissolved Inorganic Nitrogen mg/I N
	Un-ionised Ammonia as mg/l N
	Orthophosphate as mg/I P
	Total Phosphorus as mg/I P
	Nitrite as mg/l N
	Nitrate as mg/I N
	Total Nitrogen mg/l N
	BOD <sub>5</sub> mg/l (Transitional
	Waterbody)
Refer to "Guidance on Applying for a Disch	harge Licence" for guidance on reporting monitoring data and on

### Part IV – Section 3

sampling.

A. Impact of Discharge - Discharge to Inland Surface Waters				
PART IV – Section 3 A is to be completed where	e the application pertains to a discharge to Inland Surface			
Waters.				
Have any of the following assessments been				
carried out in terms of your proposed	Toxicity Testing			
discharge / receiving waters?				
	Bioaccumulation Testing			
	Biodegradation Testing			
	Aquatic/Fisheries Study			
	Modeling of Mixing Zone			
	Other(please specify)			
	If 'Yes' please submit a copy of the report with this			
	application.			

B. Impact of Discharge - Discharge to Transitional / Coastal Waters			
PART IV – Section 3 B is to be completed where	e the application pertains to a discharge to Transitional /		
Coastal Waters.			
Have any of the following assessments been			
carried out in terms of your proposed	Toxicity Testing		
discharge / receiving waters?			
	Bioaccumulation Testing		
	Biodegradation Testing		
	Aquatic/Fisheries Study		
	Dispersion Modeling		
	Other(please specify)		
	If 'Yes' please submit a copy of the report with this		
	application.		
Effluent Dispersion	Provide details for proposals for the dispersion of effluent.		
	Provide additional sheets where necessary.		

## Part IV – Section 3

Checklist for Applicant	
Details to be Submitted	✓
<ol> <li>Fully completed, signed and dated application form (1 hard copy and one electron forwarded by email to environment@galwaycoco.ie. If the document is too large email please contact the Environment Section for instruction on how to submit do via One Drive).</li> </ol>	to send by
2. Name & address of Applicant (& Agent where appropriate)	
3. Has the type of discharge been identified i.e. new or existing / domestic or trade?	
4. Has location of discharge been identified on a location map?	
5. Newspaper Notice (One original plus one hard copy)	
6. Application fee of €380	
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 fo of FOG where appropriate)	r the control
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 calcu	lations
<ul> <li>17. Assessment of the impact of the discharge on the receiving water <ul> <li>Assimilative capacity calculations</li> <li>Details of designated areas (including designation of waters)</li> <li>Details of sensitivity of waters</li> </ul> </li> <li>18. Proposals for dealing with sludge (where relevant)</li> </ul>	
19. Emergency procedures in case of plant breakdown or pollution incident (including storage facilities onsite).	details of
Please include any additional information which you deem to be pertinent to the	application / discharge.

Substance	EC Number	Nature of Use	Amount Stored (tonnes)	Annual Usage (tonnes)	Danger Classification	Risk Phrase	Safety Phrase
		+					
		-					
						/	

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

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

### 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		Prior to Treatment (if any)		As discharged				
Concentrations in mg/l unless otherwise stated								
Characteristic								
Note: Section A = to be completed where		Max. Hourly	Max. Daily	Mg/I	Max. Hourly	Max. Daily	Mg/l	% Removal
discharging domestic effluent only								
Section A-E = to be completed where discharging to								
a trade effluent								
А	Temperature <sup>°</sup> C							
	рН							
	Biological Oxygen Demand (5 day)							
	Chemical Oxygen Demand							
	Suspended Solids							

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	Total Ammonia (as N)	Τ	T		 	
	Nitrate (as N)					
	Total Phosphorus (as P)					
	Conductivity					
	Molybdate Reactive Phosphorus					
	(MRP)					
	Oils, Fats and Greases				 	
	Sulphates (as SO <sub>4</sub> )				 	
	Chlorides (as Cl)				 	
	Phenols (as $C_6H_5OH$ )				 	
	Detergents (as Lauryl Sulphate)				 	
	Faecal Coliforms CFU					
В	Metals μg/l				 	
	Arsenic					
	Chromium					
	Copper					
	Cyanide					
	Fluoride					
	Lead					
	Nickel					
	Zinc					
	Other (please specify)					
С	Pesticides & Solvents:					
	Atrazine					
	Dichloromethane µg/l				 	
	Simazine µg/l				 	
	Toluene μg/l	<u> </u>			 	
				+	 	+

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	Organophosphorus Compounds (Specify)				
	Organotin Compounds (Specify)		· - <u></u>	 	 
	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				

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 <sub>2</sub> H <sub>4</sub> C1 <sub>2</sub> )) TRI trichloroethylene (C <sub>2</sub> HC1 <sub>3</sub> ); PER perchloroethylene (C <sub>2</sub> C1 <sub>4</sub> ); TCB trichlorobenzene						
Carbon tetrachloride, DDT and pentachlorophenol Aldrin, dieldrin, isodrin, HCB (hexachlorobenzene), HCBD (hexachlorobutadiene) and CHCl <sub>3</sub> (chloroform)						
Cadmium >100 kg of raw asbestos Atrazine						
Dichloromethane Simazine						

Seirbhísí Custaiméara Chomhairle Chontae na Gaillimhe – Cultúr barr feabhais a chothú i ndáil le soláthar Seirbhísí Custaiméara Galway County Council Customer Services – To foster a culture of excellence in delivering Customer Services

Toluene		
Tributyltin		
Xylenes		
Arsenic		
Chromium		
Copper		
Cyanide		
Fluoride		
Lead		
Nickel		
Zinc		

Seol an fhoirm ar ais chuig:	Return to:	Tel. (091) 509510	
Ionad timpeallachta	Environment Unit	Fax. (091) 769590	
Comhairle Chontae na Gaillimhe	Galway County Council		
Áras an Chontae	Áras an Chontae	environment@galwaycoco.ie	
Cnoc na Radharc	Prospect Hill	www.gaillimh.ie	
Gaillimh	Galway	www.galway.ie	
H91 H6KX	H91 H6KX		