



City of Banning

Business License Division

Industrial Waste Application:

Applicant Name: _____ Applicant Phone Number: _____

Applicant Email Address: _____

Business Name: _____

Business Address: _____

What is the Standard Industrial Classification (SIC) Code(s): _____

Waste Water Information:

1. Major products manufactured or services provided at this location:

2. Types of Waste Discharged to the Sanitary System. Check all that apply:

- | | |
|--|--|
| ☐ Sanitary waste from bathrooms | ☐ Wastewater from dry cleaning equipment |
| ☐ Cleanup waste from floor drains | ☐ Wastewater from painting booth(s) |
| ☐ Kitchen waste | ☐ Wastewater from parts cleaning or preparation |
| ☐ Wastewater from manufacturing process(es) | ☐ Cooling water discharge |
| ☐ Wastewater from laundry equipment or car wash | ☐ Other (please describe on additional sheet) |

(Please note: Restaurants and Automotive business Use Types should fill out the Food Service Survey or Auto Service Survey, respectively.)

3. Water Use (volumetric) at this location:

_____ Thousands of gallons per month or
 _____ Hundreds of cubic feet per month (from utility bill) or
 _____ Gallons per day

4. Are there wastewater pretreatment systems installed at this location? **YES** **NO**

- a. Examples: grease interceptor, oil/sand separator, neutralization, pH correction, reverse osmosis, ion exchange, etc. If yes please describe:



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Chemical Storage:

1. Are bulk chemicals received and stored for use in this business? If yes, please list used or stored chemicals and approximat quality that will be keep on site: _____

2. What methods are in place to prevent toxic and/or hazardous chemicals from entering the sanitary sewer system? _____

3. Is there a spill containment and control plan in use at this location: **YES** **NO**
 a. Please describe how spilled chemicals would be contained and disposed of:

Refuse:

All commercial businesses in the City of Banning are required to subscribe to the mandatory three-container solid waste collection service (trash, recycling, and organics) provided by Waste Management, unless approved as a self-hauler under BMC 8.28.150.

By signing below, the applicant acknowledges understanding of this requirement and agrees to obtain the required commercial waste service and properly sort materials into the designated containers.

Applicant Acknowledgment:

I understand and agree to comply with BMC 8.28.100.

 Name – Authorized Representative

 Signature



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I certify under penalty of law that I have personally examined and am familiar with the information in this application form and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

Name – Authorized Representative

Signature

Official Title

Date