



CITY OF SPOKANE
WASTEWATER MANAGEMENT DEPARTMENT



NON-SIGNIFICANT CATEGORICAL INDUSTRIAL USER
CERTIFICATION STATEMENT

(must be submitted annually)

BUSINESS NAME is subject to Categorical Pretreatment Standards under 40 CFR Part BLANK, BLANK Point Source Category.

To the best of my knowledge and belief, from DATE to \_\_\_\_\_:
(insert date signed)

- I certify under penalty of perjury of the laws of the State of Washington that BUSINESS NAME has complied with all applicable Pretreatment Standards and Requirements during this reporting period;
I certify that the facility listed above never discharged more than 100 gallons per day of total categorical wastewater...
I understand that discharge of process wastewater...
I understand that untreated, concentrated wastewater is prohibited...
I understand the responsibility to immediately contact City of Spokane Wastewater Management...
I certify that I am familiar with the requirements of the City of Spokane's Wastewater Pretreatment Program...
I certify that this document and all attachments were prepared by me or under my direction or supervision...

Please attach copies of manifests for any liquid waste or wastewater that is hauled from or otherwise disposed of from your facility.

Authorized Representative Printed Name: \_\_\_\_\_

Authorized Representative Title: \_\_\_\_\_

Authorized Representative Signature: \_\_\_\_\_

Company Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_