

CITY OF PORTALES RESOURCE/SERVICE PERMIT APPLICATION GUIDE

OWNER NAME:

CONTACT INFORMATION:

NAME OF BUSINESS/INDUSTRY:

ATTACH COPY OF BUSINESS REGISTRATION:

BILLING ADDRESS:

PHYSICAL ADDRESS:

BUSINESS TYPE/ INDUSTRY PROCESS:

FEE

RESOURCES/SERVICES REQUESTED:

POTABLE WATER:

PROCESS AND "DOMESTIC"

AVERAGE DEMAND BY MONTH:

PEAK DEMAND BY MONTH:

AVERAGE DAILY DEMAND:

PEAK DAILY DEMAND:

FIRE PROTECTION:

WATER LOSS PLAN:

WATER CONSERVATION PLAN:

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WASTEWATER:

TYPE AND PROFILE OF WASTE STREAM:

T.S.S.

B.O.D.5

PHOSPHOROUS

Ph

TEMPERATURE

FATS/OILS/GREASE

ORGANIC CONTAMINANTS

INORGANIC CONTAMINANTS

METALS

TOXINS

PETROLEUM BASED WASTES

PHARMACEUTICALS

ESTIMATED MONTHLY AVERAGE FLOW

ESTIMATED PEAK MONTHLY FLOW

ESTIMATED AVERAGE MONTHLY FLOW

ESTIMATED AVERAGE DAILY FLOW

OTHER REQUIRED INFORMATION (DETERMINED BY CITY STAFF)

INFILTRATION CONTROL PLAN.

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SOLID WASTE:

TYPE AND PROFILE OF WASTE STREAM

ESTIMATED AMOUNT OF SOLID WASTE GENERATED

NUMBER OF CONTAINERS

NUMBER OF PICK-UPS

LOCATION AND ACCESS TO CONTAINERS

VECTOR CONTROL PLAN

STREETS:

IMPACT TO CITY ROADWAYS AND ALLEYS

IMPACT TO TRAFFIC PATTERNS

TYPE AND NUMBER OF EQUIPMENT/VEHICLES EXPECTED TO UTILIZE CITY ROADS/ALLEYS

INGRESS/EGRESS ROUTES FOR EQUIPMENT/VEHICLES AND DELIVERIES/SHIPMENTS