

**APPLICATION TO OBTAIN EXCLUSION METER FOR
JOHNSON CITY SANITARY SEWER SYSTEM**

Section A - General Information

A.1. Person completing questionnaire: _____

A.2 Company Name, mailing address and telephone number, zip code, telephone no.

A.2 Address of production facility, if same as above, check ()

A.3 Name, title and telephone number of person authorized to represent this firm in official dealings with the Johnson City Water/Sewer Department.

A.4 Alternate person to contact concerning information provided herein:

Name _____ Title _____
Telephone No. _____

A.5 Identify the type of business (auto repair, machine shop, electroplating, painting, meat packing, food processing, etc.)

A.6 Standard Industrial Classification Code (SIC) Number for your facility: _____

A.7 Provide brief narrative description of the manufacturing, production, or service activities your firm conducts. Attach additional pages if more space is needed.

A.8 Your facility generates the following types of waste (s) check all that apply:

	Average Gallons <u>Per Day</u>	<u>Estimate</u>	<u>Measured</u>
1. ___ Domestic wastes restrooms, etc.	_____	_____	_____
2. ___ Cooling water non-contact	_____	_____	_____
3. ___ Boiler/Tower blow-down	_____	_____	_____
4. ___ Cooling water contact	_____	_____	_____
5. ___ Process	_____	_____	_____
6. ___ Equipment/Area wash-down	_____	_____	_____
7. ___ Air Pollution Control Unit	_____	_____	_____
8. ___ Storm Water runoff to sewer	_____	_____	_____
9. ___ Other (describe)	_____	_____	_____
Total A., 8.1-9	_____		

B.8. Include plumbing plan with all "deduct meters" identified.

B.9. Estimated volume of water being deducted from total purchased.

Gallons per month: _____

Gallons per year: _____

Cost savings estimated per year: _____

Signature of person completing application: _____

Date of Application: _____

**JOHNSON CITY, TENNESSEE
DEDUCT METER CERTIFICATION STATEMENT**

This information is submitted under the immediate oversight of the organization's Principal Corporate Official/Executive Officer in Charge. As similarly required with Tennessee Rule 1200-1-7- 02(2) (a) 8 part 10 governing environmental reporting this certification states,

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. This was completed in accordance with a system designed to assure that any Deduct Meter reading (s) submitted to the City of Johnson City herewith and to be used for sewer billing purposes have been obtained by qualified personnel who properly gathered and evaluated the information submitted.

Furthermore, any and all Deduct Meter(s) used for this purpose have no physical water connections placed on "our", customer side of the Deduct Meter. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and completed. I am aware that there are significant penalties for submitting false information, as well as being required to reimburse the City of any and all fees, including payment of interest associated with errors in this information."

Customer: _____

Title of Chief
Executive Official: _____

Name: _____

Signature: _____

Date: _____

Deduct meter number(s) (I.D.) flow volume each, and period of report (date):

METER(S) TO BE CALIBRATED ANNUALLY BY A FACTORY
REPRESENTATIVE