



## ZERO DISCHARGE CERTIFICATION STATEMENT

NAME OF FACILITY: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

ZERO DISCHARGE ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

LIST OF NON CATEGORICAL  
DISCHARGING PROCESS(ES): \_\_\_\_\_

LIST OF CATEGORICAL ZERO  
DISCHARGING PROCESS(ES): \_\_\_\_\_

<u>Certification Due Date</u> (Check Due Date and Complete Monitoring Years)	June 30, 20____	Monitoring Period: *December 1, 20____ to May 31, 20____
	December 31, 20____	Monitoring Period: June 1, 20____ to November 30, 20____
* Note: The December 1 <sup>st</sup> Monitoring <u>Year</u> must be the previous year from the Certification Due Date <u>Year</u>		

### CATEGORICAL ZERO DISCHARGE PROCESS CERTIFICATION STATEMENT

Based on my inquiry of the person or persons directly responsible for managing compliance with industrial waste discharge requirements, I certify that to the best of my knowledge and belief, this facility does not discharge industrial wastewater to the sanitary sewer system from any categorical discharge processes conducted at this facility.

I further understand that an annual inspection, as well as any necessary non-routine inspections, may be conducted by an Environmental Inspector from the San José-Santa Clara Water Pollution Control Plant. During these inspections, I shall make available copies of waste manifests and any other records that support zero discharge of categorical process industrial wastewater (e.g., sludge manifest records, chemical solution replenishment records, and water bills).

I certify under penalty of law that this document and any attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. 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 complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

#### CERTIFYING OFFICIAL:

\_\_\_\_\_  
*Signature* *Date*

\_\_\_\_\_  
*Printed Name and Title*

#### EXECUTIVE OFFICER:

\_\_\_\_\_  
*Signature* *Date*

\_\_\_\_\_  
*Printed Name and Title*