## **GENERAL DYNAMICS**

## MOSSOO

## WASTEWATER DISCHARGE REQUEST

I. Proposed Discharge Information: Complete this section and fax to Environmental Engineering at 619.744.1088. For assistance in completing this form, contact Environmental Engineering at 619.544.7506.

Name:		Department/Company:		
Request Date:		Phone:		
Fax:		Cell Phone:		
Describe Process Generating Wastewater:				
Location:				
Vessel/Hull:		Bilge	☐ Bilge ☐ Ballast ☐ Hydroblasting	
Source: Fresh/City Water Sea/Salt Water		Estimated Volume to be Discharged (gallons):		
	Rain Water Other:			
Expected Start Date: Expected Er		d Date:		
Describe any  Contaminants, Pollutants, or Additives:  Oil Fuel Metals Acid AFFF  Other, Describe:				
Proposed	None		Proposed Discharge	
Treatment: (Check all the	I I Sonaration in Dortanio Lanv		Location/Connection:	
apply)	☐ Oil/Water Separator			
	☐ Wastewater Treatment Facility by:	☐ Truck		
	☐ Pipeline			
II. Environmental Engineering Review:				
Sample Required: No Yes:				
The request has been reviewed and the proposed discharge has been approved has not been				
approved.				
Signature Date				
Additional Comments/Restrictions: Profile Number:				
III. Discharge Record: Discharger to complete this section and submit to Environmental Engineering after completion of				
discharge.				
	Start Date:			
<u> </u>	End Date:			
	Total Volume Discharged (gallons):			

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