OhioEPA

State of Ohio Environmental Protection Agency
Division of Surface Water
Division of Environmental & Financial Assistance

Supplement to Form A – B4
Attachment I

Permit-to-Install/Plan Approval Application

Attachment I: WWTP Pumping Stations

Note: A separate copy of this form should be used to describe each different type of pumping station proposed.

Pumping Station Type:　☐ Influent　　☐ Intermediate　　☐ Effluent

1. Pumps	New	Existing
a. Number of Pumps		
b. Type		
c. Capacity (gpm, each)		
d. TDH (feet)		
e. Speed (RPM)		
f. Motor HP		
g. Will a 3-inch sphere pass the pumps?	☐ Yes	☐ No
h. Emergency power supply to the pumps is provided?	☐ Yes	☐ No

2. Pumping Station Control Room/Dry Well　☐ N/A

a. Are stairways or access ladders with treads of non-slip material provided?	☐ Yes	☐ No	☐ N/A
b. Are stairways or safety landings provided every 10 feet?	☐ Yes	☐ No	☐ N/A
c. Is positive ventilation with outside controls provided?	☐ Yes	☐ No	☐ N/A
If **Yes**, number of air changes per hour = _____			
d. Is dehumidification provided?	☐ Yes	☐ No	☐ N/A
e. Is a sump pump provided?	☐ Yes	☐ No	☐ N/A

3. Pumping Station Wet Well　☐ N/A	New	Existing	
a. Number of wet wells			
b. Surface area dimensions (feet, each)			
c. Side water depth (feet, each)			
d. High water alarm (feet, each)			
e. Capacity (gallons)			
f. Detention time (hrs & min at ADF)			
g. Does a bypass or an overflow exist?	☐ Yes	☐ No	☐ N/A
If **Yes**, is treatment provided?	☐ Yes	☐ No	☐ N/A
h. Is a flow meter provided?	☐ Yes	☐ No	
If **Yes**, what type? (totalizing, elapsed time, etc.) _____			