

City of Tempe Municipal Utilities Department
Water Utilities Division Environmental
Services Section

Zero Discharge Certification Form

Name of Facility: _____

Address of Facility: _____

Contact Person: _____

Contact Title: _____ Contact Phone: _____

“I certify that any waste has not discharged to the POTW that, if disposed of by other means, would be a hazardous waste. I certify under penalty of law that this document and all attachments were prepared under my direction of supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluated 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.”

_____ Date

_____ Signature of Responsible Company Official

_____ Print or type Name of Above Official

_____ Title of Above Official