



State of New Jersey
Department of Environmental Protection
Division of Water Quality



INSTRUCTIONS FOR COMPLETING FORM WQM003-T

1. **General Information** – Provide the applicant/owner/operator name, facility/site/project name, and facility/site/project address. The information provided in this section should match the information provided on the TWA-1 form accompanying this form as part of the application package.
2. **Certification Checklist** – Complete this section in its entirety, identifying which certifications have been submitted with this form and, for certifications A and C, the number of certifications that were submitted. For certification applicability, refer to the below instructions.

Certification A: Governing Body

Consistent with N.J.A.C. 7:14A-22.6(a)5 and 22.8(a)3, consent from the affected municipality (i.e. governing body) regarding the project must accompany TWA applications. *Note: This certification is required for all TWA applications.*

For this certification, provide the name of the facility/site/project and the name of the municipality or municipal authority. In addition, the authorized representative must provide the necessary certifying information. This information includes their signature, date of signature, printed name, and position. This section must also include the resolution number and date authorizing the representative to certify for the governing body. The resolution must be submitted with this form. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this form.

Important Note: A separate Certification A must be submitted for each municipality (governing body) impacted by the project.

Certification B: Sewage Authority

Consistent with N.J.A.C. 7:14A-22.6(a)5 and 22.8(a)3, consent from the affected sewage authority regarding the project must accompany TWA applications. *Note: This certification must be completed when a sewerage entity (for example, sewerage authority, utilities authority, municipal utilities authority, joint meeting, etc.) has responsibility for regulating the construction and operation of wastewater treatment and conveyance facilities within the municipality. When a sewage authority is not related to the project, this certification is not required.*

For this certification, provide the name of the facility/site/project and the name of the agency. In addition, the authorized representative must provide the necessary certifying information. This information includes their signature, date of signature, printed name, and position. This section must also include the resolution number and date authorizing the representative to certify for the sewage authority. The resolution must be submitted with this form. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this form.

Certification C: Wastewater Conveyance System Owner

Consistent with N.J.A.C. 7:14A-22.6(a)5 and 22.8(a)3, consent from the owner(s) of the applicable wastewater conveyance system(s) associated with the project must accompany TWA applications. *Note: This section must be completed by the owner/operator of the wastewater conveyance system into which the project named herein will directly connect. The owner is typically a municipality or authority.*

For this certification, provide the name of the facility/site/project and the wastewater conveyance system owner. In addition, the authorized representative for the owner must provide the necessary certifying information. This information includes their signature, date of signature, printed name, and position. This section must also include the resolution number and date authorizing the representative to certify for the wastewater conveyance system owner. The resolution must be submitted with this form. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this form.

Important Note: A separate Certification C must be submitted for each wastewater conveyance system owner impacted by the project.

Certification D: Wastewater Treatment Facility Owner

Consistent with N.J.A.C. 7:14A-22.6(a)5 and 22.8(a)3, consent from owner of the receiving wastewater treatment plant associated with the project must accompany TWA applications. *Note: This certification is only required for applications that include a sewer connection/extension. This certification must be completed by the owner of the wastewater treatment facility receiving the wastewater identified in the TWA application.*

For this certification, provide the name of the facility/site/project and the wastewater treatment facility owner. In addition, the authorized representative must provide the necessary certifying information. This information includes their signature, date of signature, printed name, and position. This section must also include the resolution number and date authorizing the representative to certify for the wastewater treatment facility owner. The resolution must be submitted with this form. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this form.

Certification E: Certification by the District Sludge Management Lead Planning Agency

Consistent with N.J.A.C. 7:14A-22.6(a)5 and 22.8(a)3, consent from the district sludge management lead planning agency associated with the project must accompany TWA applications. *Note: This certification is only required for projects that involve construction of residual management units at ultimate residuals management sites.*

For this certification, provide the name of the facility/site/project and the district sludge management lead planning agency. In addition, the authorized representative for the agency must provide the necessary certifying information. This information includes their signature, date of signature, printed name, and position. This section must also include the resolution number and date authorizing the representative(s) to certify for the agency. The resolution must be submitted with this form. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this form.

Additional Information

- Approvals, permits, service contracts, or other reservations of flow capacity issued or agreed to by any participating municipality or sewerage agency do not constitute the required approval of the DEP.
- Pursuant to the NJPDES regulations (N.J.A.C. 7:14A), no application shall be submitted to the DEP if the wastewater treatment facility is not meeting its discharge permit requirements. For computation of actual flow at the receiving wastewater treatment plant, the average flow processed by the facility for the three (3) month period immediately preceding the submission of the application shall be used.
- Any document issued by a sewerage authority or municipality which is a tentative, preliminary, or conditional approval shall not be considered a statement of consent.
- If an applicant is unable to obtain the required consent from the governing body (Certification A above) or the sewerage authority (Certification B above), they may choose to follow the procedures set forth in N.J.A.C. 7:14A-22.8(a)3v.

A completed form, along with accompanying materials, should be submitted to the address identified below and must contain the original wet-ink signatures:

Mail Code: 401-02B
 NJDEP - Division of Water Quality
 Bureau of Ground Water, Residuals and Permit Administration
 Permit Administration Section
 PO Box 420
 Trenton, NJ 08625-0420

IMPORTANT NOTICE: False statements, representations, or certifications, in any application, record, or document are subject to fines and penalties as set forth in the Water Pollution Control Act (N.J.S.A. 58:10A- 10F 2 and 3).



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Statements of Consent for TWA applications

Refer to the attached instructions and provide ALL applicable information. Please attach additional sheets if necessary.

1. GENERAL INFORMATION

Applicant/Owner/Operator: _____

Name of Facility/Site/Project: _____

Street Address/Location: _____

City or Town: _____ State: _____ Zip Code: _____

2. CERTIFICATION CHECKLIST (I.E. CERTIFICATIONS SUBMITTED WITH THIS FORM)

Note: Refer to this form's instructions for certification applicability.

Certification A: Governing Body (i.e. municipality where project is located)

- a. Certification(s) Submitted with this Form? ☐ Yes ☐ No
- b. Number of Certifications Submitted with this Form? _____
(Note: More than one certification is required when multiple governing bodies are impacted by the project.)

Certification B: Sewerage Authority

- a. Certification Submitted with this Form? ☐ Yes ☐ No

Certification C: Wastewater Conveyance System Owner

- a. Certification(s) Submitted with this Form? ☐ Yes ☐ No
- b. Number of Certifications Submitted with this Form? _____
(Note: More than one certification is required when multiple wastewater conveyance system owners are impacted by the project.)

Certification D: Wastewater Treatment Facility Owner

- a. Certification Submitted with this Form? ☐ Yes ☐ No

Certification E: District Sludge Management Lead Planning Agency

- a. Certification Submitted with this Form? ☐ Yes ☐ No

A. CERTIFICATION BY THE GOVERNING BODY (I.E. MUNICIPALITY WHERE PROJECT IS LOCATED)

Note: This certification is required for all TWA applications.

Name of Facility/Site/Project: _____

Certifying Statement:

“As an authorized representative of the below identified governing body, I hereby certify that the municipality consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of all municipal ordinances.”

Name of Municipality or Municipal Authority

Signature of Authorized Representative *

Date

Print or Type Name

Print or Type Position

Email

Telephone

* Authorization to sign for the agency: _____

Resolution #

Date

(Note: Submit the resolution with this certification. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this certification.)

B. CERTIFICATION BY THE SEWERAGE AUTHORITY

Note: This certification is required when a sewerage entity (for example, sewerage authority, utilities authority, municipal utilities authority, joint meeting, etc.) has responsibility for regulating the construction and operation of wastewater treatment and conveyance facilities within the municipality.

Name of Facility/Site/Project: _____

Certifying Statement:

“As an authorized representative of the below identified agency, I hereby certify that the agency consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of this agency.”

Name of Agency

Signature of Authorized Representative *

Date

Print or Type Name

Print or Type Position

Email

Telephone

* Authorization to sign for the agency:

Resolution #

Date

(Note: Submit the resolution with this certification. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this certification.)

C. CERTIFICATION BY THE WASTEWATER CONVEYANCE SYSTEM OWNER

Note: This certification must be completed by the owner/operator of the wastewater conveyance system into which the project named herein will directly connect.

Name of Facility/Site/Project: _____

Certifying Statement:

“By agreeing to accept wastewater from the project, I hereby certify that to the best of my knowledge the wastewater conveyance system, into which the project proposed under this application will connect, has adequate capacity in accordance with N.J.A.C. 7:14A-1.2 ("Adequate conveyance capacity"). Furthermore, I am not aware of inadequate conveyance capacity conditions in any portion of the downstream facilities necessary to convey the wastewater from this project to the treatment plant.”

Name of Municipality or Authority

Signature of Authorized Representative *

Date

Print or Type Name

Print or Type Position

Email

Telephone

* Authorization to sign for the agency: _____

Resolution #

Date

(Note: Submit the resolution with this certification. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this certification.)

D. CERTIFICATION BY THE WASTEWATER TREATMENT FACILITY OWNER

Notes: This certification is required for applications that include a sewer connection/extension. This certification must be completed by the owner of the wastewater treatment facility receiving the wastewater identified in this application.

Name of Facility/Site/Project: _____

Certifying Statement:

"I hereby certify that the committed flow to the below identified wastewater treatment plant does not exceed the presently permitted design capacity and, with the additional flow proposed by this application, the permitted design capacity is not anticipated to be exceeded. For the purposes of this certification, committed flow means the sum of the (1) actual metered flow, (2) flow from DEP approved TWA applications (not yet operational), and (3) flow from locally approved projects that do not require DEP approval. I further certify that the treatment plant is currently complying with its conventional and non-conventional NJPDES permit requirements (see N.J.A.C. 7:14A- 22.17(b)-(d), percent removal and toxicity requirements excluded from this certification) as determined by a rolling average of the three most recent monthly discharge monitoring reports that were required to be submitted to the Department as of this date, and based upon my assessment of all information pertinent to this permit request, is anticipated to continue to do so with the additional flow from this project."

Name of Wastewater Treatment Plant

NJPDES Permit Number

Name of Authority Accepting for Treatment

Signature of Authorized Representative *

Date

Print or Type Name

Print or Type Position

Email

Telephone

* Authorization to sign for the agency:

Resolution #

Date

(Note: Submit the resolution with this certification. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this certification.)

E. CERTIFICATION BY THE DISTRICT SLUDGE MANAGEMENT LEAD PLANNING AGENCY

Note: This certification is only required for applications that involve construction of residual management units at ultimate residuals management sites.

Name of Facility/Site/Project: _____

Certifying Statement:

“As an authorized representative of the below identified agency, I hereby certify that the agency consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of this agency.”

Name of Agency

Signature of Authorized Representative *

Date

Print or Type Name

Print or Type Position

Email

Telephone

* Authorization to sign for the agency:

Resolution #

Date

(Note: Submit the resolution with this certification. If no such resolution granting authority to sign exists, the full resolution, consenting to the project, must be submitted with this certification.)