11. OUTFALL NUMBER (Isr) 11. PRODUCTION A. Does an effluent guideline limitation pro YES (complete Item III-B) B. Are the limitations in the applicable effluent guideline, and indicate applicable effluent guideline.	wing table)	discharges described in It	NO (go to Se						
11. OUTFALL NUMBER (Isr) 12. OUTFALL NUMBER (Isr) 13. PRODUCTION A. Does an effluent guideline limitation provided in the provided in the applicable effluence of the second in the applicable effluence of the second in the applicable effluent guideline, and indicate of the second in the applicable effluent guideline, and indicate of the second in the applicable effluent guideline, and indicate of the second in the applicable effluent guideline, and indicate of the second in the second				4, FLOW					
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A. Does an effluent guideline limitation pro YES (complete Item III-B) B. Are the limitations in the applicable efflu YES (complete Item III-C) C. If you answered "yes" to Item III-B, list applicable effluent guideline, and indica a. QUANTITY PER DAY b. UNITS OF B. UNITS OF Machine Dr. Machine	(list)	(specify average)	PER YEAR (specify average)	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	(in days)	
A. Does an effluent guideline limitation pro YES (complete Item III-B) B. Are the limitations in the applicable effluent guideline. YES (complete Item III-C) C. If you answered "yes" to Item III-B, list applicable effluent guideline, and indicate applicable effluent guideline, and									
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A Are you now required by any Federat reatment equipment or practices or an permit conditions, administrative or ent									
A. Are you now required by any Federat reatment equipment or practices or an permit conditions, administrative or entil IDENTIFICATION OF CONDITION, AGREEMENT, ETC.		PA under Section 304 of t			r facility?				
FYES (complete Item III-C) If you answered "yes" to Item III-B, list applicable effluent guideline, and indicated applicable in the property of the pr		<u> </u>	NO (go to Se						
2. If you answered "yes" to Item III-B, list applicable effluent guideline, and indicated applicable applic	-	xpressed in terms of proc]	NO (go to Se		ration)'?				
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Machine Dr	dicate the affected	outfalls. GE DAILY PRODUCTION				T			
Machine Dr		***************************************	c. OPERATION, PRODUCT, MATERIAL, ETC.			2. AFFECTED OUTFALLS (list outfall numbers)			
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Machine Dr Machine Machine Dr Machine Mac	Deied Ten	1) Bleached Papergrade Kraft (40CFR430.20) Fine Paper				001 & 002			
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1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.		Spray Dry Resin Formaldehyde, 50%							
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A. Are you now required by any Federal treatment equipment or practices or an permit conditions, administrative or ent YES (complete the following AGREEMENT, ETC.									
treatment equipment or practices or an permit conditions, administrative or ent YES (complete the following) 1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	teral State or loc	al authority to meet any	implementation	schedule for t	he constructio	n. uparadina o	r operations	of wastewate	
YES (complete the following 1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	r anv other environ	mental programs which r	nay affect the di	scharges descril	ped in this app	lication? This in	ncludes, but is	not limited to	
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AGREEMENT, ETC.	1 IDENTIFICATION OF CONDITION 2 AFFECT		ED OLITEALLS				. 4, FINAL COMPLIANCE DAT		
3. OPTIONAL: You may after h addition			3. BRIEF	DESCRIPTION OF PROJECT		·			
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3 OPTIONAL: You may attach addition	***************************************								
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discharges) you now have underway of	tional sheets desc	cribing any additional wa an. Indicate whether each	ter pollution co	ntrol programs i	(or other envir anned, and inc	ronmental projeticate your actu	ects which ma	ay <i>affect you</i> schedules fo	
construction. MARK "X" IF DESCRIPTION						2	4		