



Mission Springs Water District

66575 Second St.
Desert Hot Springs, CA 92240
(760) 329 5169- MSWD Engineering Department

Sewer Interceptor Waste Discharge Waiver Application

Property Owner's Name: _____

-Address: _____

-Phone Number: _____

Facility User's Name _____

-Address: _____

-Phone Number: _____

Facility Address: _____

Business Name: _____

Provide (attach) all documentation and proof that the quality and or quantity of the wastewater from your facility is exempt from District requirements to have a Sewer Interceptor Waste Permit (i.e., Provide all necessary information regarding the facility operation for the District to evaluate the necessity of whether or not a interceptor or treatment unit is needed. Use a separate sheet(s) of paper as necessary to provide sufficient information to process this application. For questions or if you need assistance in completing this form please contact the District Engineering Department at the number listed above):

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manages 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.

Applicant's Signature _____

Name _____

Title _____

Date _____

NOTE: The information provided herein is not confidential in nature and can be shared with the public.

Approved _____ Denied _____ District Representative _____ Date _____ Fee Pd. _____

Water, the Jewel of the Desert - Treasure It!

66575 Second Street, Desert Hot Springs, CA 92240 • Tel 760.329.6448 • Fax 760.329.2482

