# THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152) The Water (Waste Discharge) Regulations, 1998

#### APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

To be completed in triplicate (3)

\* Delete what is not applicable

Complete this form if you want to apply for a permit to discharge, for a new discharge or for a variation to an existing permit to discharge under the Water (Waste Discharges) Regulations. You will also have to complete Attachment A, B, C, or D. A different form is required for trade effluents discharged to sewer for treatment at Municipal Wastewater Treatment Plant.

A permit is required for each separate discharge. If you currently discharge or propose to discharge from more than one point, then a separate application form must be completed for each and every discharge.

Is this an application for a new discharge or a variation to an existing discharge?

	( ) New	( ) Variation	
Iave you made or doublicity	you intend to make, an app	olication to the Minister for exe	mption from
J	( ) Yes	( ) No	
	AND ADDRESSES		
Address			
		Telephone:	
Designation:			
Acting for Company/Ir	ndividual/NGO/Partnership/Participa	ation/Cooperative Society *	
		Telephone:	
Postal address (if differ			

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#### FOURTH SCHEDULE

**REGULATION 6** 

# THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152) The Water (Waste Discharge) Regulations, 1998

# APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

Address of owner:  Property regime of land:  ) Bonafide Occupant () Mailo () Customary te f leasehold indicate Volume	nure ( ) Freehold o NoPlot No  Plot No a of that land  SE OF WATER US to take water:	( ) Leasehold (in Hectares)
) Bonafide Occupant ( ) Mailo ( ) Customary tee f leasehold indicate Volume	o NoPlot No  ra of that land  SE OF WATER US  to take water:	(in Hectares)
f leasehold indicate Volume	o NoPlot No  ra of that land  SE OF WATER US  to take water:	(in Hectares)
f Mailo or freehold indicate Block No	Plot No	(in Hectares)
3SOURCE OF WATER AND PURPO 3.1 Select the source of water from or to which you wish  ( ) River ( ) Lake ( ) Stream ( ) Lagoon ( ) Swamp ( ) Wetland ( ) Spring ( ) Other. Specify: Common name of the source of water: Specific point where the water is or will be taken: Side of the water uptake (when applicable): District where the water uptake is located (when applicable details of any water permit you hold to discharge with the water uptake (when applicable):  Attach a topographic map 1:50,000, indicating location of the composed use of water: (Tick one or more box.  ( ) Irrigation ( ) Livesto	SE OF WATER US to take water:	(in Hectares)
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( ) Stream ( ) Lagoon ( ) Swamp ( ) Wetland ( ) Spring ( ) Other. Specify: Common name of the source of water: Specific point where the water is or will be taken: Side of the water uptake (when applicable): District where the water uptake is located (when applicable): Give details of any water permit you hold to discharge water at the company of the	<ul><li>( ) Channel</li><li>( ) Ditch</li><li>( ) Borehole</li></ul>	<ul><li>( ) Dam</li><li>( ) Dry river bed</li><li>( ) Dug well</li></ul>
Common name of the source of water:  Specific point where the water is or will be taken:  Side of the water uptake (when applicable):  District where the water uptake is located (when applicable):  Attach a topographic map 1:50,000, indicating location of the water uptake is located (when applicable):  Attach a topographic map 1:50,000, indicating location of the water uptake is located (when applicable):  Attach a topographic map 1:50,000, indicating location of the water uptake is located (when applicable):  Attach a topographic map 1:50,000, indicating location of the water uptake is located (when applicable):  Attach a topographic map 1:50,000, indicating location of the water uptake is located (when applicable):  Attach a topographic map 1:50,000, indicating location of the water uptake is located (when applicable):	<ul><li>( ) Ditch</li><li>( ) Borehole</li></ul>	<ul><li>( ) Dry river bed</li><li>( ) Dug well</li></ul>
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District where the water uptake is located (when applicable Give details of any water permit you hold to discharge was Attach a topographic map 1:50,000, indicating location 6.2 Use or proposed use of water: (Tick one or more box.	( ) Right	( ) Left
Attach a topographic map 1:50,000, indicating location of the company of the comp		
Attach a topographic map 1:50,000, indicating location of the control of the cont	ter into this source:	
2.2 Use or proposed use of water: (Tick one or more box		
( ) Irrigation ( ) Livesto	f the in-take works).	
( ) Irrigation ( ) Livesto	•	
( ) Irrigation ( ) Livesto	11 1	\ TT1 1
		) Urban domestic
( ) Rural domestic ( ) Industri ( ) Services ( ) Power :	eneration (	<ul><li>) Fisheries</li><li>) Recreational</li></ul>
( ) Other. Specify:		) Recreational
( ) Other. Specify.		
OFFICIAL USE ONLY		
Basin: Cate National Grid Reference of point of water uptake: Lo		

### THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152)

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# APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

4 NATURE OF THE DISCHAR	GE
Tick one or more boxes as appropriate State the nature of the discharge:  ( ) Sewage Effluent ( ) Trade Waste	<ul><li>( ) Emergency discharge of sewage effluent</li><li>( ) Any other matter (inc. contaminated surface water)</li><li>Specify:</li></ul>
(b) Highest rate at which it is proposed to operate the	n one day:cubic metre per day ne discharges:l/sec
	be drained:m2
5 MEANS OF DISCHARGE	
Indicate proposed means of discharge:  ( ) Pipe ( ) Channel ( ) Well ( ) Culvert ( ) Soakaway and	<ul><li>( ) Borehole</li><li>( ) Soakaway</li><li>( ) Sub-irrigation system</li><li>( ) Other.</li></ul>
sub-irrigation system.	Specify:
<ul><li>6 TECHNICAL DETAILS OF T Give details as appropriate:</li><li>(a) For pipes, channels, wells and boreholes:</li></ul>	
Diameter:millim	neters. Dimension (s): metres.
(b) For sub-irrigation systems, soakaway pits, wells  Depth:metres  Geological stratum (if known):	
(c) For boreholes:	
Type of lining:	
Depth of perforated lining:metres. Depth o	of unperforated lining:metres.

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# APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

7. RECIPIEN Water to which waste will be discharge(s) are to be made	be discharged directly or indirectly	y. Tick the category to which	h the proposed
	<ul> <li>( ) River or stream</li> <li>( ) Canal</li> <li>( ) Lake or pond</li> <li>( ) Into land (not discharging)</li> </ul>	( ) Into land	nd into groundwater d and watercourse
State name of watercourse	(if known):		
	ole to which the discharge could b  ( ) Yes  If Yes, give reason for not connect	, ,	
Distance from nearest foul	sewer:		metres.
Authority will normally be	G OF THE DISCHARGE required provision for the taking of ( ) At the outlet ( ) See Plan		r sampling chamber
Is permit required for limite	NFORMATION ed period?: ( ) Yes		( ) No
If Yes, g	ive relevant dates:		
On what date do you anticip	pate the discharge will begin to be	e made:	
	an existing discharge: ( ) Yes ive details:		( ) No
	ents for discharge from the premis  ( ) Yes ive details, numbers if known:	ses?: ( ) No	
Please give the details of th	e premises. (Tick as appropriate):  ( ) Vehicle parking area ( ) Fish farm ( ) Sewage treatment works ( ) Other. Specify:	<ul><li>( ) Industrial premise</li><li>( ) Mineral workings</li><li>( ) Water supply</li></ul>	

#### THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152) The Water (Waste Discharge) Regulations, 1998

#### APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

To be completed in triplicate (3)

<b>DECLARATION OF THE APPLICANT</b>	
I certify that the information provided in this	form is correct to the best of my knowledge. I also
agree that no decision will be made pursuan	to this application until I receive a notification
from the Director of Water Development that	I have provided all the necessary information.
Signature	Seal/Stamp

Full names: Date:

#### NOTE

- 1) You must ensure to provide the information on Attachment A, B, C, or D.
- 2) A permit is required for each separate discharge. If you currently discharge or propose to discharge from more than one point, separate application forms must be filled for each and every discharge.
- 3) The Director will return one form to the applicant authenticated with the official seal.
- 4) You must attach CASH or CHEQUE for Ushs..... for processing your application and send them to:

The Director

Directorate of Water Development

P.O. Box 20026

Kampala

The Director may require you to advertise this application at you cost in a way specified by the Director.

OFFICIAL USE ONLY
RECEPTION DATE: (D) (M) (Y) . APPLICATION NUMBER:
Official Stamp and Signature:

# THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152) The Water (Waste Discharge) Regulations, 1998

## APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

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#### **PART A**

### APPLICATION FOR A WASTE DISCHARGE PERMIT

To be completed in triplicate (3)

#### IN THE CASE OF SUB-IRRIGATION SYSTEMS AND SOAKAWAYS:

a) Is any part of the system within 10 metres of the site boundary:	
( ) Yes ( ) No	
b) Is any part of the system within 10 metres of a watercourse:	
( ) Yes ( ) No	
c) Is the land in which the disposal system is to be constructed under-drained discharging to a watercourse or to be so drained?  ( ) Yes ( ) No d) If the answer to either (b) or (c) is YES:  Please state the name of the watercourse or sufficient information to identify e) Attach details of the percolation test carried out.	
DECLADATION OF THE ADDITION OF	
DECLARATION OF THE APPLICANT	
I certify that the information provided in this form is correct to the best of my agree that no decision will be made pursuant to this application until I rec from the Director of Water Development that I have provided all the necessary Signature Seal/Stamp	eive a notification
I certify that the information provided in this form is correct to the best of my agree that no decision will be made pursuant to this application until I rec from the Director of Water Development that I have provided all the necessary	eive a notification
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# THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152) The Water (Waste Discharge) Regulations, 1998

# APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

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#### **PART B**

# **APPLICATION FOR A WASTE DISCHARGE PERMIT**

FOR SEWAGE TREATMENT PLANTS:	
a) State the population served/population equivalent/estimated population	oulation:
All year:	
Wet season	
Dry season	
b) Give details of the treatment plant to be used. Attach extra shee	ts if necessary.
DECLARATION OF THE APPLICANT	
I certify that the information provided in this form is correct to the lagree that no decision will be made pursuant to this application uses	, .
from the Director of Water Development that I have provided all the	
Signature Seal/S	tamp
Full names: Date:	
OFFICIAL USE ONLY	
RECEPTION DATE: (D) (M) (Y) . APPLICATION N	IUMBER:
Official Stamp and Signature:	

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### APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

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#### **PART C**

## APPLICATION FOR A WASTE DISCHARGE PERMIT

To be completed in triplicate (3)

#### FOR TRADE WASTES AND SEWAGE DISCHARGES CONTAINING TRADE WASTES:

		ises and t	he characteristics of the trade waste including the max. min and mean values	
1	BOD and SS of the waste.  num temperature of the waste discharg	ad	°C	
	he waste contain any of the following:		) YES ( ) NO	
			eparately (including maximum. minimum and mean values)	
1.	Aldrin	25.	Iron	
2.	Arsenic	26.	Lead	
3.	Atrazine	27.	Malathion	
4.	Azinphos-ethyl	28.	Mercury and its compounds	
5.	Azinphos-methyl	29.	Nickel	
6.	Boron	30.	Parathion	
7.	Cadmium and its compounds	31.	Parathion-methyl	
8.	Carbon tetra-chloride	32.	PCSD's	
9.	Chloroform	33.	Pentachlorophenol (PCP) and its compounds	
10.	Chromium	34.	Perchloroethylene	
11.	Copper	35.	Permethrin (PH if outside of range 5.5 to 9.0)	
12.	Cyanide	36.	Polychlorinated biphenyls	
13.	Cyfluthrin	37.	Simazine	
14.	DDT	38.	Sulcofuron	
15.	1,2-Dichloroethane	39.	Tetrachloroethylene	
16.	Dichlorvos	40.	Tributyltin compounds	
17.	Dioxins	41.	Trichlorobenzene	
18.	Endosulfan	42.	Trichloroethane	
19.	Fenitothion 43.		proethylene	
20.	Fenthion	44.	Trifluralin	
21	Flucofuron	45.	Triphenyltin compounds	
22.	Hexachlorobenzene (HCB)	46.	Vanadium	
23.	Hexachlorobutadiene (HCBD)	47.	Zinc	
24.	Hexachlorocyclohexane	48.	Isodrin	
\ /	, .		ents contained in the waste especially of any wastes containing chemical Statute or any other law in force (attach separate sheet).	
DECLARA	TION OF THE APPLIC	CANT		
I certify that the	e information provided in this	s form	is correct to the best of my knowledge. I also agree that no	
			until I receive a notification from the Director of Water	
	at I have provided all the neces			
•	•	sary III.		
Signa	ture		Seal/Stamp	
Full n	Full names: Date:			
	OF	FICL	AL USE ONLY	
RECEPTIO	N DATE: (D <u>) (</u> M)	(Y)_	APPLICATION NUMBER:	
O.C. 1.1.04	1.63			
Official Stan	np and Signature:			

#### FOURTH SCHEDULE

**REGULATION 6** 

Answer all except 23

# THE REPUBLIC OF UGANDA THE WATER ACT (Cap. 152) The Water (Waste Discharge) Regulations, 1998

## APPLICATION FOR A WASTE DISCHARGE PERMIT FORM A

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Emergency overflow from sewer

State the type of discharge. Tick one or more boxes as appropriate:-

#### PART D

## **APPLICATION FOR A WASTE DISCHARGE PERMIT**

To be completed in triplicate (3)

#### FOR EMERGENCY DISCHARGES AND CONTAMINATED SURFACE WATERS:

	☐ Answer all except 22
Contaminated surface water	☐ Answer 24,27
Other	☐ Answer as appropriate
If other, please give further details:	
21	
(a) State average flow to pumping station/in sewer	m <sup>3</sup> /day
(b) State maximum flow to pumping station/in sewer	1/sec
Expected frequency of operation	per annum
23 State volume of wet well	m <sup>3</sup>
What provisions have been made to raise alarms	
(e.g telemetry)	
What facilities have been provided to prevent the	
discharge of gross solids?	
(For screens give bar spacing or aperture)	
What provisions have been included to deal with	
(a) power failure?	
(b) mechanical breakdown?	
(c) rising main failure?	
What facilities have been provided for flow	
measurements	
Are there any other factors to be taken into account?	
DECLARATION OF THE APPLICANT	
	:
I certify that the information provided in this to	orm is correct to the best of my knowledge. I also
I certify that the information provided in this for agree that no decision will be made pursuant to	, , ,
agree that no decision will be made pursuant to	this application until I receive a notification from
agree that no decision will be made pursuant to the Director of Water Development that I have	this application until I receive a notification from provided all the necessary information.
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