



San Francisco
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Services of the San Francisco Public Utilities Commission

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Dental Wastewater Discharge Permit
BMPs Certification Form

Mandatory Best Management Practices (BMPs) Certification Form

SAN FRANCISCO PUBLIC UTILITIES COMMISSION

BUREAU OF ENVIRONMENTAL REGULATION AND MANAGEMENT

3801 THIRD STREET, SUITE 600, SAN FRANCISCO, CA 94124 • TEL. (415) 695-7310 • FAX (415) 695-7388

Mandatory Best Management Practices (BMPs)
Certification Form

SECTION A – BUSINESS NAME AND ADDRESSES

Name of Dental Practice:			
Site Address:		Mailing Address (If Different):	
City, State:	Zip Code:	City, State:	Zip Code:
Total number of chairs:		Total number of chairs where amalgam placement/removal occurs:	
Facility contact for amalgam waste issues:		Title:	
Name:	Phone:	Email:	

This dental facility serves one of these primary functions:

Oral Pathology ____ Oral and Maxillofacial Radiology ____ Oral and Maxillofacial Surgery ____ Orthodontics ____
 Periodontics ____ Prosthodontics ____
If So Only Complete Sections A and E Only

SECTION B – AMALGAM SEPARATOR DESCRIPTION

This dental facility has installed one or many ISO 11143 or ANSI / ADA 108-2009 compliant amalgam separators or equivalent technologies that capture all amalgam waste from the chairs in which it is placed/removed as indicated above in section A.

Make	Model	Year Installed

This dental facility uses an equivalent device:

Make	Model	Year Installed	Avg. Removal Efficiency, per 40 CFR441.30(a)(2)-i-iii

This facility has one or many current non-ISO 11143 compliant amalgam separators that were installed prior to July 14, 2017 at the number of chairs stated in section A where amalgam placement/removal occurs. This practice understands that it must be replaced with one or more ISO 11143 compliant amalgam separators or an equivalent device, such separators must be replaced to meet the requirements of 441.30(a)(1) or 441.30(a)(2) after their useful life has ended and no later than June 14, 2027, whichever is sooner.

Make	Model	Year Installed

SECTION C – DESIGN, OPERATION AND MAINTENANCE OF AMALGAM SEPERATOR (OR EQUIVALENT DEVICE)

<input type="checkbox"/> Yes the amalgam separator/equivalent device is operated and designed to meet the requirements set by 40 CFR § 441.30 or § 441.40.	
<input type="checkbox"/> A third-party service provider is under contract with this facility to ensure proper operation and maintenance in terms of § 441.30 or § 441.40. If Yes provide name of service provider _____	
<input type="checkbox"/> If No please provide a description of what practices done at this facility are done to make sure maintenance and proper operating conditions under CFR § 441.30 or 441.40.	

SECTION D – MANDATORY BEST MANAGEMENT PRACTICES (BMPs) CERTIFICATION

<p>This dental practice certifies that it has implemented the following mandatory best management practices (BMPs):</p> <input type="checkbox"/> The above named dental practice is implementing the following BMPs as specified in 40 CFR § 441.30(b) or § 441.40 and will continue to do so into the future.
<p>EPA Required BMP's</p> <ol style="list-style-type: none"> 1. Waste amalgam including, but not limited to, dental amalgam from chair side traps, screens vacuum pump filters, dental tools, cuspidors, or collection devices, must not be discharged to a publicly owned treatment works (e.g., municipal sewer system). 2. Chair side traps, dental water lines, and vacuum lines that discharge amalgam process wastewater to a publicly owned treatment works, must not be cleaned using oxidizing or acidic cleansers, including but not limited to chlorine, bleach, peroxide and iodine that have pH levels lower than 6 or greater than 8.
<p>City of San Francisco Required BMP's</p> <ol style="list-style-type: none"> 1. Eliminate all use of bulk elemental Mercury. 2. Install plastic disposable chair side amalgam traps in both the vacuum system and cuspidor of each operatory where restoration work is done. Never rinse these traps in the sink. 3. Routinely Inspect the amalgam separator, per the manufacturer's operating manual. Maintain a log for all inspections. Change vacuum pump filters and screens at least once per month or as directed by the manufacturer. Seal the vacuum screen and any water in its plastic container, and store it in an airtight container with other amalgam waste. 4. Properly discard amalgam waste, recycling is the preferred method for discarding amalgam waste. For recycling or disposal as a hazardous waste, have a licensed recycling contractor or hazardous waste hauler remove your amalgam waste, or use a mail-in-service. Obtain and maintain documentation for all amalgam recycling and disposal. 5. Maintain a written or computerized log of amalgam waste that you generate, and of amalgam waste that you remove from your vacuum system or plumbing. In addition, obtain and maintain all receipts, manifests, and documents related to amalgam waste disposal. 6. Train staff in the proper handling, management, and disposal of mercury-containing materials. Maintain a training log including name of instructor, date and personnel trained. 7. Maintain all Records, logs and receipts for a minimum of three years. Make them available upon request.

SECTION E – CERTIFICATION STATEMENT

Per § 441.50(a)(2), the one-time certification form must be signed and certified by a responsible corporate officer, a general partner or proprietor if the dental facility is a partnership or sole proprietorship, or a duty authorized representative in accordance with the requirements of § 403.12(l).

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 ensure that qualified personnel properly gather and evaluate 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.

Printed Name

Title

Signature

Date

Send the completed original certification form to the address below.

SFPUC-WWE-CSD
Bayview Plaza
3801 - 3rd Street, Suite 600
San Francisco, CA 94124
Attention: Dental Mercury Reduction Program