



The City of New York
Department of Environmental Protection
Bureau of Customer Services

**Application for Evaporative Cooling Tower
Wastewater Allowance**

~~~PLEASE PRINT OR TYPE ALL INFORMATION~~~

Property Address:

Borough:

Block:

Lot:

Type of Business:

Water/Wastewater Account Number:

Cooling Tower Meter No.:

Cooling Tower Meter Remote No.:

Proposed Location of Remote Receptacle:

Owner/Authorized Agent Name (Attach Authorization Letter):

Owner/Authorized Agent Address (if different than Property Address):

Daytime Phone Number:

Fax Number:

Email:

I recognize that, if eligible, I will receive a wastewater allowance for the above identified meter as set forth in the New York City Water Board Water and Wastewater Rate Schedule, Part III, Section 7, Wastewater Allowances: **Commercial or Industrial Property**.

\_\_\_\_\_  
Owner/Authorized Agent's Signature

\_\_\_\_\_  
Owner/Authorized Agent Name (Print)

Date \_\_\_\_\_

**Note:** This application must include written documentation demonstrating that (i) the cooling tower is registered on New York City's Cooling Tower Portal at [coolingtowers.cityofnewyork.us](http://coolingtowers.cityofnewyork.us), and (ii) is in current compliance with the requirements of both the New York City Department of Buildings and the New York City Department of Health and Mental Hygiene. DEP may reject any Application which, at the time of filing, is incomplete.

Please return this application and all supporting documentation to the BCS office in your Borough:

Manhattan: 55 West 125<sup>th</sup> Street, 9th Floor, New York, NY 10027

Bronx: 1932 Arthur Avenue, 6th Floor, Bronx, NY 10457

Brooklyn: 345 Adams Street, 9th Floor, Brooklyn, NY 11201

Queens: 59-17 Junction Blvd., 9th Floor, Flushing, NY 11373 (Call 718-595-3258 for appointment)

Staten Island: 60 Bay Street, 6th Floor, Staten Island, NY 10301