## (OnBase Form TVP1)

# Initial Data Verification for Proprietary On-lot Alternate Technology Approval

### Instructions

This form consists of five sections which need to be completed in full by the applicant. Incomplete forms will be rejected. If you are applying for more than one technology, please complete separate forms.

#### Part I - General Information

This section contains information about the corporation or other entity responsible for the manufacturing of this proprietary component/system and the individual designated to represent the manufacturer throughout the application process. Please include any other pertinent contact information.

#### Part II - Proprietary Technology

Please complete the four sections of Part II to the best of your knowledge. Use section 4 to describe the unique technology that your product uses and what makes this product compatible with on-lot septic systems in Pennsylvania (PA). Do not include any advertisements, brochures, manuals, technical specifications, or any other product material with this submission.

#### Part III - Classification Request

- 1.Indicate if your technology was ever approved in PA, even if the approval is no longer valid.
- 2. Select all the applicable categories and/or add new ones in the "other" if applicable to your product.
- 3. If you ever had an application rejected by DEP for the classification as an on-lot alternate technology/system in PA, please use this section to provide a full description of the reasons for rejection.
- 4. From the drop-down list, choose the level of treatment your product achieves (primary, secondary, advanced secondary, or N/A), as defined from Appendix A1 of the TVP document (TGD #385-2208-003).
- 5. Choose only one of the following options from Appendix A1 of the TVP document: FC-1, FC-2, FC-3, FC-4, N/A.
- 6. Choose only one of the following options from Appendix A1 of the TVP document: TN-1, TN-2, or N/A.

#### Part IV - Third-party Certification Information

1. If applicable, please provide information indicating the type of certification previously achieved by the proposed technology. Please attach documents related to the obtained certification, such as: the certification report in the same format provided by the test center; and all the data in the certification report in a Excel spreadsheets.

2. If your technology was not certified by any testing organization, please provide an explanation in section 2; otherwise, if you have third-party certification testing, select N/A.

#### Part V - Certification

Please sign and date this form before sending it to the DEP, electronic signatures are accepted; unsigned forms will not be processed.