		INSTRL	JCTIONS	
1.				
Cincinnati, Ohio 45202-	inal and one copy of this form with to 5215. This form must be completed Revenue Center or are attached to	d and submitted even	n or other document, to the Director, National Revenue Center, 550 Main St, Ste 800: h though three copies of the required certification or waiver have been sent	
3. DISPOSITION. After final action taken on the related application or other document, the copy of this form will be returned to the applicant. APPLICATION RELATED TO THIS RIDER				
1. FORM NUMBER	2. APPLICATION DATE	3. SERIAL NUMBER		
6. DESCRIBE ACTIVITY 1	TO BE CONDUCTED IN WHICH	THE ALCOHOL AN	D TOBACCO TAX AND TRADE BUREAU HAS AN INTEREST.	
ACTIVITY DESCRIBE	O IN ITEM 6, INCLUDING THE BI	IOLOGICAL, CHEM	NATERS WHICH MAY RESULT FROM THE CONDUCT OF THE ICAL, THERMAL, OR OTHER CHARACTERISTIC OF THE DISCHARGE	
AND THE LOCATIONS	S AT WHICH SUCH DISCHARGE	: MAY ENTER NAV	IGABLE WATERS.	
			NITOR THE QUALITY AND CHARACTERISTICS OF THE DISCHARGE THE TREATMENT OR CONTROL OF WASTES OR OTHER EFFLUENTS.	
AND THE OF ENAMOR	OF EQUITMENT ON FACILITIE	LO LIVII LOTED IIV	THE TREATMENT ON CONTROL OF WASTES ON OTHER EFFECTIVES.	

TTB F 5000.30 (10/2008)