

**FOLLOW UP
INDUSTRIAL WASTE SURVEY
YAKIMA REGIONAL WASTEWATER DIVISION**

Wastewater Generating Characteristics and Chemical Usage

Wastewater Information

Please complete this survey in full. Type or print clearly with ink. Where the required answer is contained in brackets, circle the answer so it remains legible. A Federal and State requirement has been placed on this community to accomplish this inventory. **Failure to submit a completed survey will be in violation of Chapter 7.65 of the City's Municipal Code.** Please request assistance if completing this survey cannot be performed within thirty (30) days. You may contact Scott Schafer or Arlene Carter at (509) 575-6077.

1. Company Name: _____

2. Division Name: _____

3. Address of facility discharging wastewater:

Street _____

City _____ State WA Zip _____

Parcel Number(s) _____

4. Mailing address for correspondence purposes:

Street (or PO Box) _____

City _____ State WA Zip _____

5. Representative completing this form:

Name: _____

Title: _____ Telephone No. (_____) _____

6. Standard Industrial Classification number (SIC Code) _____

7. Please describe the process that will result or may result in wastewater discharge to the domestic or industrial sewer system.

8. a. This facility generates or will generate the following types of wastes.
(Circle all that apply)

<u>Waste Category</u>	<u>Average Gallons Per Day</u>	<u>Est. Meas.</u>
[1] Domestic wastes (restrooms, employee showers, etc.) (EPA suggests 15 Gals per day for each employee for domestic waste)	_____	[E] [M]
[2] Cooling Water, Noncontact	_____	[E] [M]
[3] Boiler/Tower Blowdown	_____	[E] [M]
[4] Cooling Water, Contact	_____	[E] [M]
[5] Process Waste	_____	[E] [M]
[6] Equipment/Facility Washdown Water	_____	[E] [M]
[7] Air Pollution Control Unit Waste	_____	[E] [M]
[8] Storm Water Runoff to Sewer	_____	[E] [M]
[9] Other _____	_____	[E] [M]

- b. Is the facilities waste discharge:

Continuous [C]
or Batch [B]

9. Wastes are discharged or may be discharged to:
(Circle all that apply)

	<u>Waste Category</u>	<u>Average Gallons Per Day</u>	<u>Est or Meas.</u>
[1]	Domestic Sewer	_____	[E] [M]
[2]	Storm Sewer	_____	[E] [M]
[3]	Surface Water	_____	[E] [M]
[4]	Ground Water (on-site disposal)	_____	[E] [M]
[5]	Waste Haulers	_____	[E] [M]
[6]	Other _____	_____	[E] [M]

If 9.[5] is circled above, please provide name and address of waste hauler(s):

10. List all principle materials regularly used in your facility that may be present in your wastewater discharge (such as cleaning agents, solvents, food processing wastes, plating solutions, catalysts, milk wastes, ink, etc.). Identify chemical constituents (if known) and brand name. Attach Material Safety Data Sheets (MSDS) for each material listed.

	<u>Generic Type</u>	<u>Amount Per Year</u>	<u>Chemical Constituents or Brand Name</u>
a.	<u>Example: Degreaser</u>	<u>3 gallons</u>	<u>Trichlorethylene</u>
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____
f.	_____	_____	_____
g.	_____	_____	_____
h.	_____	_____	_____
i.	_____	_____	_____
j.	_____	_____	_____

- k. _____
- l. _____

If additional sheets are attached, please circle [A]

11. Characteristics of Wastewater:

- a. Temperature _____ Fahrenheit Don't know [D]
- b. pH level _____ Don't know [D]
- c. Flammable or explosive materials Yes [Y] No [N] Don't Know [D]
- d. Solid or viscous materials Yes [Y] No [N] Don't Know [D]
- e. Priority pollutants Yes [Y] No [N] Don't Know [D]

12. If your facility employs processes in any of the industrial categories or business activities listed below and any of these processes generate or cogenerate wastewater or waste sludge, circle the number beside the category or business activity (circle all that apply).

a. Industrial Categories:

- | | |
|--|--------------------------------------|
| [1] Adhesives | [19] Nonferrous metals |
| [2] Aluminum forming | [20] Ore mining |
| [3] Auto and other laundries | [21] Organic chemicals |
| [4] Battery manufacturing or recycling | [22] Paint and ink |
| [5] Can Making | [23] Pesticides |
| [6] Coal Mining | [24] Petroleum refining |
| [7] Coil Coating | [25] Pharmaceuticals |
| [8] Copper forming | [26] Photographic supplies |
| [9] Electric and Electronic Components | [27] Plastic and synthetic materials |
| [10] Electroplating | [28] Plastics processing |
| | [29] Porcelain enamel |
| | [30] Printing and publishing |
| [11] Explosives manufacturing | [31] Pulp, paper, and fiberboard |
| [12] Foundries | [32] Rubber |
| [13] Gum and wood chemicals | [33] Soaps and detergents |
| [14] Inorganic chemicals | [34] Steam electric |
| [15] Iron and steel | [35] Textile mills |
| [16] Leather tanning and finishing | [36] Timber products |
| [17] Mechanical products | [37] Waste recycler |

[18] Metal finishing

b. Other Business Activities:

- | | |
|--|------------------------------------|
| [1] Dairy products | [3] Food/edible products processor |
| [2] Slaughter/meat packaging/rendering | [4] Beverage bottler |
| | [5] Other: _____ |

13. If your facility uses any pretreatment devices or processes listed below for treating wastewater or sludge, circle the number beside the device or process (circle all that apply).

- | | |
|---|---|
| [1] Air flotation | [17] Sedimentation |
| [2] Centrifuge | [18] Septic tank |
| [3] Chemical precipitation | [19] Solvent separation |
| [4] Chlorination | [20] Spill protection |
| [5] Cyclone | [21] Sump |
| [6] Filtration | [22] Biological treatment,
type _____ |
| [7] Flow equalization | [23] Rainwater diversion or storage
type _____ |
| [8] Grease or oil separation,
type _____ | [24] Other chemical treatment,
type _____ |
| [9] Grease trap | [25] Other physical treatment
type _____ |
| [10] Grinding filter | [26] Other,
type _____ |
| [11] Grit Removal | [27] No pretreatment provided |
| [12] Ion exchange | |
| [13] Neutralization, pH correction | |
| [14] Ozonation | |
| [15] Reverse osmosis | |
| [16] Screen | |

14. Are any liquid wastes or sludges from this firm disposed by means other than discharge to the sewer system? Yes [Y] No [N]
If "Yes," complete a and b below.

a. These wastes may be described as (please circle all that apply below):

	<u>Waste Type</u>	<u>Amount Per Year</u>	<u>Gallons or Pounds</u>
[1]	Acids and alkali	_____	[G] or [P]
[2]	Heavy metal sludges	_____	[G] or [P]

[3]	Inks/dyes	_____	[G] or [P]
[4]	Oil and/or grease	_____	[G] or [P]
[5]	Organic compounds	_____	[G] or [P]
[6]	Paints	_____	[G] or [P]
[7]	Pesticides	_____	[G] or [P]
[8]	Plating wastes	_____	[G] or [P]
[9]	Pretreatment sludges	_____	[G] or [P]
[10]	Solvents/thinners	_____	[G] or [P]
--	Other hazardous wastes (specify)		
[11]	_____	_____	[G] or [P]
[12]	_____	_____	[G] or [P]
[13]	_____	_____	[G] or [P]
[14]	_____	_____	[G] or [P]

b. For the above checked wastes, does your company practice (circle all that apply):

- [1] On site storage
- [2] Off site storage
- [3] On site disposal
- [4] Off site disposal

Briefly describe the method(s) of storage or disposal checked above.

15. Has any wastewater analysis been performed on the wastewater discharge(s) from your facility within the recent past? Yes [Y] No [N]

If "Yes," attach a copy of the most recent data to this questionnaire. Be sure to include the date of the analysis, name of the laboratory that performed the analysis, and the location(s) from which the sample(s) were taken. Attach sketches, plans, etc. as necessary.

16. Are any process changes or expansions planned during the next three years? Yes [Y] No [N]

If "Yes," attach a separate sheet to this questionnaire describing the nature of planned changes or expansions.

17. Attach a simple schematic drawing of your facility, indicating:
- a. Location and size of all service outlets, process drains, and floor drains.
 - b. Existing sampling manholes or locations where samples may be collected.
 - c. Current or planned flow metering equipment.
 - d. Current or planned automatic sampling equipment.
 - e. Location of pretreatment processes, treated flows, and untreated flows.
 - f. Location and names of pertinent streets.
 - g. Use flow schematic to indicate process and process discharge gpd.

18. Comments: _____

Thank you for your cooperation.

The information provided in this survey is, to the best of my knowledge, true and complete.

Signature

Date

Please print name

Title

Please send completed form within 30 days to:

Pretreatment Office
Yakima Regional Wastewater Division
2220 East Viola
Yakima, WA. 98901