



CITY OF YAKIMA PRELIMINARY INDUSTRIAL WASTE SURVEY (shortened version)

Please complete this survey in full. 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.** For assistance in completing this form, you may contact the Pretreatment Supervisor at (509) 249-6816.

Business Name: _____

Address of facility discharging wastewater:

Street _____ City _____

Brief description of business and services: _____

Is the facility connected to the public sewer system? Yes ___ No ___ Don't know ___

Utility Services Billing Account # (if known) _____

Based on your answers to these questions you may be asked to provide additional information to the City's Wastewater Division.

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

Signature

Date

Please print name and title

Telephone Number

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