



## INDUSTRIAL WASTEWATER PRETREATMENT QUESTIONNAIRE AND DISCLOSURE FORM

*Complete all applicable sections. Information must be typewritten or clearly printed.  
Attach requested information as needed. Signing official must have the authorization to provide such information on behalf of the company, corporation, or partnership.*

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Address of facility in Port Angeles (if different than above): \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

1. Type of Industry: \_\_\_\_\_ N. America Industry Classification System (NAICS) Code: \_\_\_\_\_

2. Type of Product(s) or Service(s) produced; rate of production; process used:

<u>Type of product</u>	<u>Rate of production</u>	<u>Process</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Product Volume: \_\_\_\_\_ 4. Water Use (gallons/day): Average \_\_\_\_\_ Maximum \_\_\_\_\_

5. Number of Employees: \_\_\_\_\_ 6. Operation Pattern: (hrs/day) \_\_\_\_\_ (days/yr) \_\_\_\_\_ (mo/yr) \_\_\_\_\_

7. **Wastewater Discharge to Sewers:** [List the principal materials (cleaning agents, solvents, plating solutions, catalysts, process chemical, etc) by their generic name and principal chemicals that are regularly used in your facility and that will or might be discharged to the City sewer system]

TYPE OF MATERIAL OR CHEMICAL	AVERAGE DISCHARGE			MAXIMUM DISCHARGE		
	GAL. PER DAY	TIME & DURATION	CONC. (MG/L)	GAL. PER DAY	DURATION	CONC. (MG/L)
a) Process						
b) Cooling						
c) Sanitary						
d) Others listed below:						
example: Degreaser (Trichloroethylene)	3	3PM; 30 min/day	0	3	10 AM; 10 min/day	0.001
Total Discharge						

8. Are there seasonal variations to the above discharges? \_\_\_\_\_

**INDUSTRIAL WASTEWATER PRETREATMENT  
QUESTIONNAIRE AND DISCLOSURE FORM (CONTINUED)**

9. Does your company sample and analyze your wastewater?  Yes  No If yes, what is the nature of that sampling program? \_\_\_\_\_
10. **Discharge to sewerage system:** Attach as "Exhibit 1" a plan of your property showing accurately the site plan, floor plan, mechanical and plumbing plans and details showing all sewers, connections to the City systems, inspection manholes, sampling manholes, and appurtenances by size, location and elevation.
- a) How many wastewater discharge points does your company have connected to the City's sanitary sewer collection system? \_\_\_\_\_
- b) Where are your discharge points located? \_\_\_\_\_
11. Does your company have any plans for expansion?  Yes  No. If yes, when and how would expansion alter your industrial wastes? \_\_\_\_\_
12. Do you provide any pretreatment of wastewater streams prior to discharge to a sanitary sewer?  Yes  No
13. Do you have an accidental discharge / slug discharge control plan (AD/SDCP) for your company?  Yes  No
14. Does your company have or plan to provide a parking lot, with a drain system to collect run off?  Yes  No
15. Do you dispose of any chemicals, solvents or hazardous materials to other than the sewer?  Yes  No
16. If yes, provide a description of each material, giving the composition, solids content, annual quantity, means of disposal, and ultimate disposal location: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
17. Does your company have the necessary Safety Data Sheets (SDS) on file?  Yes  No
18. List any prohibited pollutants being discharged as regulated by the City's Industrial Pretreatment Ordinance:
- | <u>Pollutant</u> | <u>Daily Max. Concentration (mg/L)</u> | <u>Daily Avg. Concentration (mg/L)</u> |
|------------------|--|--|
| _____            | _____                                  | _____                                  |
| _____            | _____                                  | _____                                  |
| _____            | _____                                  | _____                                  |
19. List any environmental control permits that are held by or for your facility: \_\_\_\_\_  
\_\_\_\_\_
20. If additional pretreatment and/or operation and maintenance activities are required in order to comply with the City's Industrial Pretreatment Ordinance, then the discharger shall provide a compliance schedule attached to this form which describes how the facility will conform to the requirements.

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*The information contained in this questionnaire and disclosure statement is familiar to me and to the best of my knowledge and belief, such information is true, complete and accurate.*

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

NOTE: Attach additional pages, if needed.

**RETURN TO:** City of Port Angeles Wastewater Treatment Plant  
Attn: Source Control Specialist  
321 E. 5<sup>th</sup> Street  
Port Angeles, WA 98362-3206