Data Disclosure/Permit Application Form
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NOTE: If you do not discharge or plan to discharge any wastewaters besides normal domestic waste into the city’s collection system, complete only Section I and return it to the city. Please read the general instructions on page 2 and contact the city if you have any questions.
General Instructions

This form serves as a multi-purpose document. Section I should be filled out by all existing and proposed new non-domestic facilities (industrial and commercial establishments). The other sections only need to be completed if the affected facility has process wastewater discharges or proposes to discharge process wastewaters, i.e., the wastewater is not domestic in origin. Process wastewater includes such discharges as spent solvents and chemicals dumped down floor drains, sinks, etc. The city will be verifying data submitted in this form through phone calls and site visits. Please take the time to fill out the form thoroughly.

Section I -- General Information: All questions should be answered. If you answer “No” to question #30, Simply sign the form and submit it to the City at 2025 Riverton Rd, Blackfoot, Idaho 83221. If you answered “Yes” please request sections II – VI, complete and attach these to section I. Proposed new businesses must answer question #31 and, if process wastewaters will be discharged, provide best estimates to appropriate questions in Sections II and III.

Section II -- Water/Wastewater Data: completed by all users discharging or proposing to discharge process wastewater.

Section III -- Plant Process Data & Wastewater Treatment: completed by all users discharging or proposing to discharge process wastewater. (See categorical user discussion below.)

Section IV -- Wastewater Characteristic/sampling data: to be completed by existing non-categorical users.

Section V -- Baseline Monitoring Report: to be completed by existing categorical users.

Section VI -- Final Compliance Report:

- Existing categorical facilities are required to submit this report within 90 days of the final compliance date contained in the federal categorical standard. New categorical facilities must submit this report within 30 days of commencement of discharge.
- Existing non-categorical facilities are required to submit this report within 90 days of the final compliance date specified by the city. New non-categorical facilities are required to submit this report within 30 days of commencement of discharge.

Attachment A — Listing of toxic pollutants (priority pollutants).
Attachment B — Listing of electroplating & metal finishing operations.
Attachment C — Questionnaire on raw materials utilized.
Attachment D — Process Schematic flow diagram
Attachment E — Building Layout diagram

New Customers Proposing to Discharge Wastewater:

Please supply as much information as possible, providing best estimates where appropriate. Section VI requires submittal of wastewater data as part of the final compliance report. Remove and retain this section and submit previous sections to the city. Section I requires that a date for commencement operations and discharge be provided. The city requires you to sample your discharge effluent upon commencement of discharge and to submit Section VI with the sampling data within 30 days of commencement of discharge.
**Final Compliance Report (Section VI):**

For existing facilities for which EPA’s final compliance date for a particular categorical standard has not been reached, or the final date supplied by the city has not been reached, and for new facilities (as discussed above), simply remove that Section VI for submittal as required by the city.

**Categorical Users:**

EPA has published specific federal “categorical pretreatment standards,” which apply effluent discharge limits to specific categories of industries. There are a total of twenty-six different sets of regulations. Industrial facilities regulated by these standards are commonly called “categorical users.” Facilities not regulated under one of these standards are called “non-categorical users” in this document. The categorical industries are listed on page 5 (Question 10) under part a.

**Compliance with Pretreatment Standards:**

Industrial and commercial facilities that have or will have a process wastewater discharge are required to comply with federal standards and local standards (general and specific prohibitions and specific limits for such pollutants as heavy metals and cyanide), whichever apply or are more stringent. Sections IV, V, and VI require that you make a statement regarding compliance with the “applicable pretreatment standard.” In most cases, you may not know which standards apply until the city reviews the general information that you provide. If this is the case, you may wish to submit Sections I through III and request that the city provide additional information so that you can complete the remaining sections.

**Note to Signing Official**

Information must be typewritten or clearly printed. Attach additional sheets keyed to section and item number if needed to provide complete information. Signing officials must have authorization to provide such information on behalf of the company, corporation, or partnership. Please complete a form for each facility that discharges to the city sanitary sewer system.

Please forward the completed form to the address shown below. If you have further questions contact the city at (208) 785-8616. Thank you for your cooperation.
**Instructions**

**Section I—General Information**

Numbers below refer to the corresponding line numbers starting on page 1 (one) of the Data Disclosure Form (Permit Application).

1. Enter the name or title of your business.

4. Enter facility address where discharge occurs/will occur, if different than No. 3.

6. Give the name of the person who is thoroughly familiar with the facts reported on this form and whom the city staff can contact.

9. Enter the average number of office and production employees at the premises daily. If more than one shift exists, provide employee count per shift.

10. A facility that checks off activities listed under 10.a is subject to the Environmental Protection Agency’s (EPA) categorical pretreatment standards and the city’s local pretreatment standards. These facilities are called “categorical users.” Businesses that check-off activities listed under “b” are called “non-categorical users” and are covered by the city’s local pretreatment standards. If you have any questions regarding how to categorize your business activity, contact the city for technical guidance.

12. Include all numbers that apply to business. Leave blank if not known.

13. If multiple types of oil and grease trap are present please detail each.

15. Examine your raw materials and chemicals lists and your Material Handling Sheet to assist in completing the attachment.

18. An onsite disposal system could be a septic system, lagoon, holding ponds (evaporative-type).

19. Provide a listing of all primary raw materials and chemicals used (or planned) in the facility’s operations. Avoid the use of trade names of chemicals. If trade names are used, provide information regarding the active ingredients.

22. Type of permits could be: air, hazardous waste, NPDES for discharges to surface waters.

30. Process wastewater could be discharged via a direct connection to the city’s collection system through floor drains. If you answer yes, subsequent sections must be appropriately completed. Refer to the general instructions at the beginning and specific instructions for each of the following sections.

The qualified professional certification pertains to the actual preparer of the report if different from the authorized representative.

The authorized representative may be either a corporate official, a partner, a fiduciary or other duly authorized representative if this person is responsible for the overall operation of the facility from which the discharge originates or if this person is responsible for environmental matters for the facility.
Section II—Water/Wastewater Data

PROVIDE CALCULATIONS TO SUPPORT ALL DATA IN TABLE 1.

1. Water Use and Distribution—Provide the daily average flows of water received and wastewater discharged in gallons per day for the last 12 months by dividing the total flows by the number of days that a discharge of water occurred (or number of operating days). For the water that is received from other than Water District services or discharged to other than sanitary sewers, enter the location in the column headed “Source” or “Discharge To.” Other source locations can include wells and rivers. Other discharge locations can include dry wells and receiving streams. Hourly and daily water supply meter readings may be used, provided the filling and discharge of storage tanks, process vats, etc., are taken into consideration.

For estimating sanitary flow, use 15 gallons per day for each employee. Categorical users: Complete item 6, providing flows for each of the regulated processes (process lines).

2. A batch discharge is one that results from the draining of storage tanks or process tanks, intermittent boiler blow-down, etc.

Section III—Business/Facility description

1. Business Activity—Describe the principal activity on the premises. For the purpose of completing this Part, an activity is a major class of manufacturing. Enter the Standard Industrial Classification (SIC) Code Number, as found in the 1987 Edition of Standard Industrial Classification Manual, prepared by the Executive Office of the President, Office of Management and Budget, which is available from the Government Printing Office. DO NOT USE PREVIOUS EDITIONS OF THE MANUAL. Copies are also available for examination at most public libraries. If you do not know your SIC code, leave the space blank.

   (a) & (b) If not already provided in Attachment C, list all primary raw materials and chemicals used in the facility’s operations. Avoid use of trade names of chemicals. If trade names are used, provide information regarding the active ingredients.

   ©Product—List the types of products, giving the common or brand name and the proper or scientific name. Provide from your records the average daily production for each calendar year and the estimated daily production for this calendar year. Attach additional pages if necessary.

   (d)Description—Describe the wastewater generating processes occurring on the premises, including any seasonal variation in wastewater discharge volumes, plant operations, raw materials, and chemicals used in the processes and/or production.

   (e)Substances Discharged—Give common (brand names) and technical names (chemical, scientific or proper names) for each raw material and product discharged to the sewer. Briefly describe the physical (e.g. color) and chemical (e.g. reacts with water) properties of each substance.

2. Discharge Period:

   (a) Enter the hours of the day for each day during which wastewater from this Business Activity will be discharged to the sewer, e.g. from 6 a.m. to 5 p.m.

   (b) Enter the time and duration of discharges other than continuous flows (e.g. 15 minutes every hour).

3. Variation in Operation:

   Indicate whether the business activity is continuous throughout the year or if it is seasonal. If the activity is seasonal, circle the months of the year during which discharge occurs. Make any comments you feel are required to describe the variation in operation of your business activity.

4. Go to Attachment D for form, instructions and examples.
5. Go to Attachment E for form, instructions and examples.

Sections IV through VI:

The remaining three sections will provide the necessary wastewater discharge data to enable the city to establish appropriate pretreatment limits and requirements.

Existing facilities: If you provide sampling data and certify in either Section IV or
V that the facility is presently in compliance with the city’s local limits and/or federal categorical pretreatment standards, you do not need to complete Section VI.

New Facilities (categorical and non-categorical: new businesses moving into existing facilities and new business proposing to construct a new building): Because no discharge of process wastewaters has occurred, Sections IV and V cannot be completed. Instead, retain Section VI and complete it when the facility begins operation and commences discharging. A new facility should be in compliance with applicable pretreatment standards upon commencement of discharge and is required to sample and submit the final compliance report within 30 days of commencement of discharge.

Contact the city if there are any questions on what limits apply to the discharge, what pollutants to sample, sampling requirements, and where to take samples.

Section IV—Wastewater Characterization: to be completed by existing non-categorical facilities. Attach additional sheets if needed. Contact the city before sampling, if not sure of pretreatment standards, sampling protocols, etc.

1(a) Pollutants—List specific pollutants regulated in the city code across the top of the table (use abbreviations).

Daily Maximum and Monthly Average - Refer to the city code for pretreatment standards for the specific pollutants. Most cities have daily maximum pretreatment standards (limits) and not monthly averages.

Reported maximum: Report the highest maximum concentration for the samples collected and analyzed.

Reported average: If more than one sample was taken, average all the individual results and report the average.

Indicate type of samples (i.e., grab, flow proportioned composite, etc.), analytical methods, and number of samples taken. Indicate whether samples were taken of combined waste streams. The industrial user must ascertain whether it can meet the pollutant standards. The type of discharge, i.e., batch, continuous, routine historical information (e.g. existing data pollutant discharge) is a factor that should guide the industrial user regarding the number of samples to be taken to ascertain compliance. Where feasible, samples should be flow-proportional composites. Additionally, the time, date of sampling, and methods of analysis must be reported. Analytical methods must be performed in accordance with 40 CFR Part 136 and any amendments thereto. It is important that the samples be representative and taken during full production.

Each daily composite shall be analyzed separately.

1 (b). Compare the sample results against local pretreatment standards provided by the city (contained in city code).

Describe any additional O&M or pretreatment required and provide an expeditious compliance schedule. Specify the major events needed to achieve compliance, as well as the dates for completion of each event (i.e., hiring an engineer, completing preliminary plans, completing final plans, executing contracts, commencing construction, completing construction, etc.). The shortest possible schedule should be provided.

2. The qualified professional certification pertains to the actual preparer of the report if different from the authorized representative.

The authorized representative may be a corporate official, a partner, a fiduciary or other duly authorized representative if this person is responsible for the overall operation of the facility from which the discharge originates or for environmental matters at the facility.

Section V—Baseline Monitoring Report: to be completed by existing categorical industries.

1. a. If a BMR has already been submitted, please indicate this.

b. If more than one report was submitted, specify how many, as well as the submittal dates of each and to what agency. Attach the most recent report submitted.
c. Facilities that submitted a BMR that showed that they were out of compliance with the pretreatment standards are required to submit periodic compliance reports. The discharger should complete Item (d) if reports were submitted to one of the agencies. If a schedule was not developed, but construction has occurred, complete Item (e) and indicate completion dates. If the facility submitted a BMR, but not the necessary compliance schedule or progress reports, complete Sections f & g with projected completion dates.

2. List each regulated process, the production rate (i.e., 10,000 lbs. of (product name/unit of time (week, month, year), the category, and subpart of the applicable Categorical Pretreatment Standard, as well as the SIC code for each process.

3. Each industrial user must sample, analyze, and report on all pollutants regulated (refer to regulations for regulated pollutants). Where mass limits exist, the facility must report results in mass limits (concentration x regulated process flow in million gallons/day x 8.34 lbs/gal). The BAT pretreatment standards are process-related. i.e., a facility must comply with the standard at the end-of-the regulated process. However, EPA recognizes that many facilities combine their wastewater process lines, cooling water, and sanitary discharge prior to treatment and discharge to municipal sewers. Therefore, a facility may sample at a combined point but will need to adjust the categorical limit it must meet by employing the Combined Waste stream Formula that is contained in 40 C.F.R. §403.6(e). If you must employ the formula; you must provide additional data for calculations. Contact the city for guidance. (Also see Attachment A.) List in the table the regulated pollutant, the applicable average and maximum limits or adjusted limits as calculated by use of the combined waste stream formula, and the results of the sampling (average and maximum values). REVIEW THE INSTRUCTIONS FOR SECTION IV ON HOW TO REPORT THE VALUES.

Indicate type of samples (i.e., grab, flow-proportioned composite, etc.), analytical methods, and number of samples taken. Indicate whether samples were taken of combined waste streams. The industrial user must ascertain whether it is complying with its applicable limits. The type of discharge, i.e., batch, continuous, is a factor that should guide the industrial user regarding the number of samples to be taken to ascertain compliance. Where feasible, samples of most pollutants should be flow-proportioned composites. Additionally, the time, date of sampling, and 40 CFR Part 136 analytical methods. It is important that the samples be representative and taken during full production. Minimum sampling requirements are:

- Process flows less than 250,000 GPD --- 3 samples within 2-week period
- Process flows greater than 250,000 GPD --- 6 samples within 2-week period

4. Facilities subject to a TTO pretreatment standard must sample initially for TTOs to determine compliance. Analyses only need to be performed on toxic organics suspected of being present. Contact city for list of toxics applicable to your operations.

(a) Facilities that utilized none of the toxic organics can provide a certification statement in lieu of having to monitor for toxics.

(d) Facilities, whose sampling results indicate compliance with TTO standards can develop a solvent management plan in lieu of needing to periodically sample for toxic organics. Contact the city for guidance.

5. In order to determine compliance with published or calculated mass-based categorical standards, a facility will need to compare its allowable mass limit (e.g., 0.0261 lbs of Pb/1,000 lbs of steel x 200 lbs of steel produced= 0.533 lb of Pb allowed) against the actual mass loading derived from sampling (i.e., concentration X regulated process flows x 8.34 lbs/gal = lbs discharged). If categorical standards are published in concentration, then a facility only needs to compare the concentration of its effluent against the regulated standards for the particular pollutant.

(c) Describe any additional O&M or pretreatment requirements and include a compliance schedule. Specify the major events needed to achieve compliance, as well as the dates for completion of each event (i.e., hiring an engineer,
completing preliminary plans, completing final plans, executing contracts, commencing construction, completing construction, etc.). The shortest possible schedule should be provided.

6. The qualified professional certification pertains to the actual preparer of the report if different from the authorized representative.

The authorized representative may be a corporate official, a partner, a fiduciary, or other duly authorized representative if this person is responsible for the overall operation of the facility from which the discharge originates or is responsible for environmental matters for the facility.

Section VI—Final Compliance Report: provides the sampling data that show that a NEW facility is in compliance.

Note: Please contact the city before sampling, if you are unsure of pretreatment standards, sampling protocols, etc.

EXISTING USERS -

Non-categorical users
Submit the requested information within 90 days of the final compliance date specified by the city. If you indicate in Section IV that you are in compliance with the city’s local pretreatment standards, you do not need to fill out Section VI; however, if you indicate in Section IV that you are not complying with the standards, the city may impose another deadline date and a date for submittal of the information in Section VI.

Categorical users
Submit the information requested within 90 days of the final compliance date specified in the applicable federal categorical pretreatment regulations. If the final compliance date has passed and you indicate in Section V that you are in compliance, you do not need to fill out Section VI. However, if the deadline date has passed and you indicate in Section V that you are not complying, you must fill out Section VI. The city may give you a revised final compliance date and due date for the final compliance report.

NEW FACILITIES -

• Categorical and non-categorical

Retain this Section VI, but complete all previous sections and return them to the city. Section VI should be completed and returned to the city within 30 days after commencement of discharge.

For non-categorical users, samples should be taken of the final effluent prior to discharge to the city’s collection system. If there are multiple discharges of process wastewater to the city’s sewer system, provide the analytical results for the multiple discharges on separate pages.

For categorical users, samples must be taken of the effluent from all regulated process (after treatment, if applicable). Provide the analytical data for the regulated processes in the space provided. Attach additional sheets if necessary. If you are reporting adjusted limits, submit all appropriate calculations and flow data on additional sheets.

2(a) List each regulated process line and process flow.

Pollutants: Across the top, list specific pollutants regulated in the city code.

Daily Maximum and Monthly Average: Refer to the city code for pretreatment standards for the specific pollutant. Most cities have daily maximum local limits, not monthly averages.
Reported maximum: Report the highest maximum concentration for the samples collected and analyzed.

Reported average: If more than one sample was taken, average all the individual results and report the average in the spaces provided for each of the pollutants listed.

For non-categorical users, sample and report on all pollutants specified by the city. Where mass limits apply, the facility must report results on a mass limit basis (concentration x regulated process flow). Attach all calculations. Samples collected must be of representative discharges and taken during peak production. Three samples must be collected each day for three consecutive days. Each daily composite shall be analyzed separately.

For categorical users, sample and report on all pollutants regulated specific to each process (refer to appropriate subcategory in regulations for regulated pollutants). Where mass limits apply, the facility must report results in mass limits (concentration x regulated process flow in million gallons/day x 8.34 lbs/gal). The BAT pretreatment standards are process-related, i.e., a facility must comply with the standard at the end of the regulated process. However, EPA recognizes that many facilities combine their wastewater process lines, cooling water, and sanitary discharge prior to treatment and discharge to municipal sewers. Hence, a facility can sample at a combined point, but will need to adjust the categorical limit it must meet by (i.e. calculate adjusted limits) employing the Combined Waste stream Formula that is contained in 40 C.F.R. §403.6(e). If this is the case with your facility you must employ the formula and provide additional data for calculations. Contact the city for more guidance. Where feasible, samples should be flow-proportional composites. Additionally, the time, date of sampling, and 40 CFR Part 136 analytical methods must be reported. Samples must be taken of discharges representative of typical discharge and must be taken during full production. Each daily composite must be analyzed separately.

Process flows less than 250,000 GPD --- 3 samples within 2-week period

Process flows more than 250,000 GPD --- 6 samples within 2-week period

Indicate type of samples (i.e., grab, flow-proportioned composite, etc.), analytical methods, and number of samples taken. Indicate whether samples were taken of combined waste streams. The industrial user must ascertain whether it can meet the applicable pretreatment standards. The type of discharge, i.e., batch, continuous is a factor that should guide the industrial user regarding the number of samples to be taken to ascertain compliance.

3(a) For non-categorical users, compare the sample results against local pretreatment standards set by the city.

For categorical users:

If categorical standards are published in concentration units (mg/l), a facility only needs to compare the concentration of the pollutant in its effluent against the published standard for the pollutant.

If categorical standards are published as mass-based limits, a facility will need to compare its allowable mass limit (e.g., Pb = (0.002661 lbs Pb/1000 lbs. of steel produced) x 200 lbs of steel produced/day = 0.00053 lbs Pb allowed/day) against the actual mass loading derived from sampling (i.e., [concentration] x regulated process flows (gals/day) x 8.34 lbs/gal = lbs of Pb discharged/day).

4. Describe any additional O&M or pretreatment needed and provide compliance schedule. Specify the major events needed to achieve compliance. as well as the dates for completion of each event (i.e., hiring an engineer, completing preliminary plans, completing final plans. executing contracts, commencing construction. completing construction, etc.). The shortest possible schedule should be provided.

5. The certification pertains to the actual preparer of the report if different from the authorized representative.
The authorized representative may be either a corporate official, a partner, a fiduciary, or other duly authorized representative if this person is responsible for the overall operation of the facility from which the discharge originates or has environmental management responsibility for the facility.

**Attachment D—Schematic Diagram**

A separate drawing should be completed for each major business activity. A line drawing (schematic flow diagram) of each major business activity is to be completed in the space provided or drawn on an attached sheet of paper (all sheets should be letter size). Number each process which generates wastewater using the same numbering as in the building layout or plant site plan shown in the building layout schematic.

To determine your average daily volume and maximum daily volume of wastewater flow, you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measurable.

**Attachment E—Building Layout**

A building layout or plant site plan of the premises is required to be completed. Approved building plans may be substituted. An arrow showing North as well as the map scale must be shown. The location of each existing and proposed sampling manhole and side sewer must be clearly identified as well as all sanitary and wastewater drainage plumbing. Number each unit process discharging wastewater to the municipal sewer. Use the same numbering system shown in the Schematic Flow Diagram.
DATA DISCLOSURE FORM
(Permit Application)

Section I - General Information
1. Company Name:_____________________________________________________________________________________
2. Division:__________________________________________________________________________________________
3. Mailing address:
   a. Street or P.O. Box___________________________________________________________
   b. City, State, and Zip Code_____________________________________________________
4. Facility address:
   a. Street or P.O. Box___________________________________________________________
   b. City, State, and Zip Code_____________________________________________________
5. Person to be contacted about this form:
   a. Name_______________________________________________________________________
   b. Title_______________________________________________________________________
   c. Phone #___________________________________________  Fax #________________________________
   d. E-mail address_________________________________________________________________
6. Person to be contacted in case of emergency:
   a. Name_______________________________________________________________________
   b. Title_______________________________________________________________________
   c. Phone #___________________________________________  Fax #________________________________
   d. E-mail address_________________________________________________________________
7. For existing businesses:
   a. Is the building presently connected to the public sewer system? Yes [ ] No [ ]
   b. If yes, sewer account number:___________________________________________________
   c. If no, have you applied for a sewer hookup? Yes [ ] No [ ]
8. For new businesses:
   a. Will you be occupying an existing building (such as in an industrial park)? Yes [ ] No [ ]
   b. If a new facility will be constructed, have you applied for a building permit? Yes [ ] No [ ]
      Building permit no__________________________________________
   c. Will you be connected to the public sewer system? Yes [ ] No [ ]
9. Number of employees:__________ Normal operating schedule: _________ hours/day _________days/week

10. If your facility employs or will be employing processes in any of the industrial categories or business activities listed below (regardless of whether they generate wastewater, waste sludge, or hazardous wastes), place a check beside the category or business activity (check all that apply).

   a. **Industrial Categories**

      [ ] Aluminum forming
      [ ] Battery manufacturing
      [ ] Builders’ paper & board mills
      [ ] Can making
      [ ] Carbon black manufacturing
      [ ] Coal mining
      [ ] Coil coating
      [ ] Copper forming
      [ ] Electrical & electronic components
      [ ] Electroplating (if checked, please complete Attachment B)
      [ ] Fertilizer manufacturing
      [ ] Foundries (metal molding and casting)
      [ ] Glass manufacturing
      [ ] Industrial laundries
      [ ] Ink formulating
      [ ] Inorganic chemicals manufacturing
      [ ] Iron & steel manufacturing
      [ ] Leather tanning & finishing
      [ ] Metal finishing (if checked, please complete Attachment B)
      [ ] Metal molding & casting
      [ ] Nonferrous metals manufacturing
      [ ] Nonferrous metals forming & metal powders
      [ ] Oil & gas extraction
      [ ] Organic chemicals, plastics, & synthetic fibers manufacturing
      [ ] Paint formulating
      [ ] Paving & roofing materials (tars & asphalt)
      [ ] Pesticide chemicals manufacturing, formulating, packaging, & repackaging
      [ ] Petroleum refining
      [ ] Pharmaceutical manufacturing
      [ ] Plastics molding & forming
      [ ] Porcelain enameling
      [ ] Pulp, paper, and paperboard manufacturing
      [ ] Rubber manufacturing
      [ ] Steam electric power generating
      [ ] Textile mills
      [ ] Timber products processing -- List operations:_________________________________________

   b. **Other Business Activity**

      [ ] Adhesives
      [ ] Auto repair
      [ ] Beverage bottler
      [ ] Dairy products (such as cheese mfg., milk), specify: _________________________________
      [ ] Explosives manufacturing
      [ ] Food/edible products processor (e.g. fresh pack, potato processor), specify:_____________
      [ ] Food establishment
      [ ] Gum & wood chemicals
      [ ] Hospital
      [ ] Lawn and fertilizing applicators
      [ ] Military installation
      [ ] Pesticide applicator
11. Standard Industrial Classification Number(s) (SIC Code)________________________________________________

12. Do you or will you discharge oils, grease, or fats to the public sewer?  Yes [   ]  No [   ]

13. Is there (or will there be) an oil and grease trap in your sewer connection?  Yes [   ]  No [   ]
   a. What type(s) (under sink grease trap, in ground grease interceptor, sump, etc)? _________________
   b. Location of trap(s) ____________________________________________________________________

14. What is your normal frequency of cleaning the oil and grease trap? ______________________________
   Where do you dispose of trapped oil and grease? ________________________________________________


16. Raw materials list: Please provide a listing in Attachment C.

17. Are any liquid wastes or sludges from this facility disposed of by means other than discharge to the sewer system?  Yes [   ]  No [   ]  If “no,” skip Items 18 thru 22.

18. These wastes may be described as: Estimated gallons or pounds per year

   [   ] Acids and alkalis _________________________________

   [   ] Heavy metal sludges _________________________________

   [   ] Inks/dyes _________________________________

   [   ] Oil and/or grease _________________________________

   [   ] Organic compounds _________________________________

   [   ] Paints _________________________________

   [   ] Pesticides _________________________________

   [   ] Plating wastes _________________________________
[ ] Pretreatment sludges

[ ] Solvents/thinners

[ ] Other hazardous wastes (specify)

[ ] Other wastes (specify)

19. For the above checked wastes, indicate your storage and disposal practices:

[ ] Onsite storage
[ ] Offsite storage
[ ] Onsite disposal
[ ] Offsite disposal

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

21. For offsite storage and disposal, provide name of hauler and facility receiving wastes:

___________________________________________________________________________________________________

22. Have you been issued a local, state, or federal environmental permit? Yes [ ] No [ ]
If yes, please list the permit(s):

___________________________________________________________________________________________________

23. Do you or will you have chemical storage containers, bins, or ponds at your facility? Yes [ ] No [ ]
If yes, please attach a description of their location, contents, size, type, and frequency and method of cleaning. Indicate if buried metal containers have cathodic protection.

24. Do you or will you have floor drains in your manufacturing or chemical storage area? Yes [ ] No [ ]

25. If you have chemical storage containers, bins, or ponds, or floor drains in your manufacturing area, could an accidental spill lead to a discharge to:

An onsite disposal system? [ ]

Public sewer system (e.g. through a floor drain)? [ ]

Storm drain? [ ]

To ground? [ ]

Other? [ ] specify:

Not applicable? (No possible discharge to any of the above routes) [ ]

26. Do you have an accidental spill prevention program to prevent spills of chemicals or slug discharges from entering the city’s collection system? Yes [ ] No [ ]
No floor drains or discharge only domestic wastes [ ] (submit ASPP if applicable)
27. Do you or will you discharge wastewater (other than domestic waste from bathrooms, toilets, etc.) to an onsite disposal system? Yes [ ] No [ ]
If yes, please attach a description of the discharge and onsite disposal system. Also indicate if the contents are removed, by whom, and the ultimate disposal site.

28. Are any process changes or expansions planned during the next three years? Yes [ ] No [ ]
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

29. Please describe on a separate sheet previous spill events and remedial measures taken to prevent their recurrence.

30. Do you or will you discharge wastewater (other than domestic waste from bathrooms, toilets, etc.) to the public sewer system? Yes [ ] No [ ]

If you answered YES, please answer all applicable questions on the following pages.
If you answered NO, no further information is required; simply sign on the appropriate spaces on the following page.

31. New businesses (not operating yet or proposing to discharge): If you plan on discharging process wastewater, complete appropriate parts of Sections II & III with your best estimates. Retain Section VI and complete it within 30 days of commencement of discharge.

   a. Are you:
      i. A new business planning to occupy an existing vacant building? [ ]
      ii. A new business planning to construct a new building? [ ]
      iii. An existing business proposing to discharge process wastewater? [ ]

   b. If you plan on discharging process wastewater, will a pretreatment system be constructed to treat the proposed discharge? Yes [ ] No [ ] If yes, describe the treatment system. (Provide a copy of plans and specifications to the city.)

   c. Provide below a compliance schedule for the following applicable items (best estimate): 1) construction and completion of physical structure (building) and manufacturing process lines; 2) construction schedule for pretreatment system sampling manhole and monitoring instrumentation (flow meters, pH meters, etc.); 3) proposed date for operation of manufacturing operation; 4) proposed date for commencement of discharge; and 5) development of an Accidental Spill Prevention Program (ASPP).
      i. Construction of facility and manufacturing process lines (commencement and completion dates):

      ii. Construction of pretreatment facility and sampling manhole and monitoring instrumentation (commencement and completion dates):

      iii. Operational date:

      iv. Date for commencement of discharge:

      v. Date for submittal of ASPP:

Confidentiality
Please indicate those sections of this questionnaire that you wish to remain confidential and your basis for requesting confidentiality.
Qualified Professional Certification:
I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the federal General Pretreatment Regulations and amendments thereto and in the city’s sewer use ordinance. I certify that Pretreatment Standards are being met on a consistent basis, and, if not, that the following operation and maintenance changes and/or additional pretreatment measures will be required to meet the Pretreatment Standards and Requirements. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Additional measures needed:

Name (print) ___________________________________________

Phone_____________________________

Signature ______________________________________________________

Title _____________________ Date ___________________________________

Authorized Representative Statement:
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. I have personally examined and I am familiar with the information in this report and all attachments therein. Furthermore, based on my inquiry of those persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that the sampling results reported are representative of normal work cycles and expected pollutant discharges.

Name (print) ______________________________________________________

Phone_____________________________

Signature________________________________________________________

Title ______________________ Date _________________________________
Section II - Water/Wastewater Data
1. Water use and distribution—average flow of water received and wastewater discharged daily in gallons per day (for new businesses, estimate flows).

<table>
<thead>
<tr>
<th>WATER USED FOR:</th>
<th>SUPPLY FROM</th>
<th>DISCHARGED TO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Water District</td>
<td>Other</td>
</tr>
</tbody>
</table>

Sanitary
Processes (see #6 for categorical users)

Boiler/Cooling Tower
Contact Cooling Water

Non-Contact Cooling Water

Washing (equipment wash down)

Irrigation

Air Pollution Control

Contained in Product

Surface Water

Waste Hauler

Other (Describe)

TOTAL:

Water Account Number: _________________________________

Sewer Account Number: _________________________________

2. Are the discharges (or will the discharges be) batch [ ] or continuous [ ]?
3. If there are (or will be) batch discharges, indicate:
a. Percent processing discharged as batch_____________________________
b. Percent processing discharged continuously_________________________
c. Number of batch discharges per month______________________________
d. Timing of batch discharges _____________(days of week) at _________________(hours of day)
e. Average quantity per batch _____________gallons
f. Flow rate ____________ gallons/minute

**NOTE:** The city may require that an Engineer perform a treatability study to be submitted with the application.

4. List existing or proposed plant sewer outlets, size and flow (assign sequential reference number to each sewer outlet):

<table>
<thead>
<tr>
<th>Reference No.</th>
<th>Sewer Size (inches)</th>
<th>Description of location of sewer connection or discharge point</th>
<th>Daily Average Flow (GPD)</th>
</tr>
</thead>
</table>

1. General characteristics of wastewater: (provide specific values for a, b, d, e, f, if known)
   (a) Temperature:__________ Don’t know
   (b) pH Level: ____________ Don’t know
   © Flammable or explosive materials: Yes [ ] No [ ] don’t know [ ]
   (d) Fats, oils and grease (mg/l): ____________ don’t know [ ]
   (e) BOD (mg/l): _____________ Don’t know [ ]
   (f) TSS (mg/l): _____________ Don’t know [ ]
   (g) Solid or viscous material Yes [ ] No [ ] don’t know [ ]
   (h) Toxics: Yes [ ] No [ ] Don’t know [ ] REVIEW Attachment “A” AND COMPLETE FORM.
   (i) Solvents: Yes [ ] No [ ] Don’t know [ ]

2. For categorical facilities. Provide the following flows for each of your regulated processes or proposed regulated process (i.e., manufacturing process line regulated by categorical pretreatment standards).
   a. Total Plant Flow discharged to the sewer system: Average______gallons per day (GPD) Maximum _______GPD
   b. Individual Process Flows in Gallons Per Day (GPD)

<table>
<thead>
<tr>
<th>No.</th>
<th>Regulated Process</th>
<th>Average Flow(GPD)</th>
<th>Maximum Flow (GPD)</th>
<th>Type of Discharge (batch, continuous, none)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. Is an inspection and sampling manhole structure available onsite? Yes [ ] No [ ]
   If YES, describe location here and include as part of the process flow schematic in Attachment D.
   If NO, is an inspection and sampling manhole structure planned? Yes [ ] No [ ]

2. Do you use or plan to use automatic sampling equipment or continuous wastewater flow metering equipment?
   Current: Flow Metering Yes [ ] No [ ] N/A [ ] Sampling Equipment Yes [ ] No [ ] N/A [ ]
   Planned: Flow Metering Yes [ ] No [ ] N/A [ ] Sampling Equipment Yes [ ] No [ ] N/A [ ]
   If so, please indicate the present or planned location of this equipment on the sewer schematic in Attachment E and describe the equipment here:
   _______________________________________________________________________________
   _______________________________________________________________________________

3. Does your facility pretreat or plan on pretreating any wastewater prior to discharge to a sanitary sewer? Yes [ ] No [ ] N/A [ ]

4. Pretreatment devices or processes used or proposed for treating wastewater or sludge (check as many as appropriate).
   [ ] Air flotation
   [ ] Centrifuge
   [ ] Chemical precipitation
   [ ] Chlorination
   [ ] Cyclone
   [ ] Filtration
   [ ] Flow equalization
   [ ] Grease or oil separation, type:
   [ ] Grease trap
   [ ] Grinding filter
   [ ] Grit removal
   [ ] Ion exchange
   [ ] Neutralization, pH correction
   [ ] Ozonation
   [ ] Reverse osmosis
   [ ] Screen
   [ ] Sedimentation
   [ ] Septic tank
   [ ] Solvent separation
   [ ] Spill protection
   [ ] Sump
   [ ] Biological treatment, type:
   [ ] Rainwater diversion or storage
   [ ] Other chemical treatment, type:
   [ ] Other physical treatment, type:
   [ ] Other, type:

5. Describe the loading rate, design capacity, physical size, etc. of each pretreatment facility checked above. If the facility is a proposed facility, attach engineering report, plans, and specifications.

6. Are there any planned changes in wastewater treatment? Yes [ ] No [ ] If yes, describe below.
Section III - Business/Facility Description

PURPOSE—The business description is primarily used to determine the substances which may enter into the wastewater discharge from the business activity.

1. **Business activity** -- (Complete a separate sheet for each major business activity or product line on premises.)

   **Activity:** ______________________________________________________

   **SIC Nos.:** ______________________________________________________

   **NAICS Nos.:** ___________________________________________________

   a. **Raw materials used or planned for use:**

   b. **Chemicals used or planned for use:**

   c. **Products** (new businesses: provide best estimates):

      | TYPE OF PRODUCT (Brand Names) | PAST CALENDAR YEAR | CURRENT YEAR ESTIMATE |
      |-------------------------------|--------------------|-----------------------|
      |                               | Daily Production   |                       |
      |                               | Average            | Maximum               |
      |                               |                    |                       |
      |                               |                    |                       |

   a. **Description**—Describe each wastewater generating operation or manufacturing process. Indicate variations in production and operations during the year. (Use additional sheets as necessary.)

   b. **Substances Discharged**—Give common and technical names of each major raw material and product that may be discharged to the sewer. Briefly describe the physical and chemical properties of each substance and product. (Use additional sheets if necessary.)
1. **Discharge Period**
   
a. **Hours of Day Operated or planned:**

   Monday________ Tuesday ________ Wednesday ________
   Thursday______ Friday_______ Saturday_______ Sunday_______

   b. **Time Duration of Discharge or planned:**

   Monday________ Tuesday ________ Wednesday ________
   Thursday______ Friday_______ Saturday_______ Sunday_______

2. **Variation of operation**

   Is the business or proposed activity:
   
   Seasonal [ ]  Continuous through the year [ ]

   Circle the months of the year during which discharge occurs:  J  F  M  A  M  J  J  A  S  O  N  D

3. **Process flow schematic:** Provide appropriate diagram(s) in Attachment D.
4. **Building layout:** Provide layout of building in Attachment E.
Section IV. Wastewater Characterization

Note: Samples should be taken of the final effluent prior to discharge to the city’s collection system. If there is more than one discharge of process wastewater to the city’s sewer lines, provide a separate page for each discharge.

1. Existing Non-categorical Facility (report results in concentrations (mg/l) or mass (lbs/day))
   a. Each non-categorical facility must sample, analyze, and report on all pollutants as specified by the city. Where mass limits apply, the facility must report results on a mass limit basis (concentration x regulated process flow). Attach all calculations.

Samples collected must be representative and taken during peak production. Three samples must be collected each day for three consecutive days and must be analyzed separately.

POLLUTANT LEVELS OF PROCESS WASTEWATER DISCHARGES

|-----------|----------------|---------------|----------------|---------------|

1. Specify units used (mg/l or lb/day):
2. Sample type (grab, composite):
3. Number of samples collected (explain):
4. Dates and times samples collected:
5. Sample collection location:
6. Where samples analyzed:
7. Methods of analyses:
8. Provide name and address of commercial labs that provide analysis:

Name:__________________________________________________________
Address:_______________________________________________________

Name:__________________________________________________________
Address:_______________________________________________________
Compliance certification:
Are all applicable pretreatment standards being met on a consistent basis?
Yes [    ] No [    ]

If not, what additional operations and maintenance procedures are being considered for compliance?

Also, list additional pretreatment being considered to meet standards.

a. Provide a compliance schedule for standards to be met. Specify the major events along with corresponding dates. Note that this schedule will require comment by the city and will be subject to modification.
1. Qualified Professional Certification:

I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the federal General Pretreatment Regulations and amendments thereto and in the city’s sewer use ordinance. I certify that Pretreatment Standards are being met on a consistent basis, and, if not, that the operation and maintenance changes and/or additional pretreatment measures detailed above will be required to meet the Pretreatment Standards and Requirements. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name (print) ______________________________________________________

Phone_______________________________

Signature________________________________________________________

Title ______________________ Date _________________________________

Authorized Representative Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. I have personally examined and I am familiar with the information in this report and all attachments therein. Furthermore, based on my inquiry of those persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that the sampling results reported are representative of normal work cycles and expected pollutant discharges.

Name (print) ______________________________________________________

Phone_______________________________

Signature________________________________________________________

Title ______________________ Date _________________________________
Section V - Baseline Monitoring Report

1. Existing Categorical User

   a. A Baseline Monitoring Report(s) (BMR) ______was ______was not submitted previously.

   If NOT submitted, complete subsections 2 thru 6.

   b. The BMR was submitted to:

      _____Local Municipality on:__________________________
      _____State Agency on:_______________________________
      _____USEPA, Region 10 on:__________________________

   Please attach the most recent BMR.

   c. Compliance Progress Reports (CPR) ______ were ______ were not submitted.

   If NOT submitted, complete subsections d, e, f, and g, as appropriate.

   d. The reports were submitted to:

      _____Local Municipality on:__________________________
      _____State Agency on:_______________________________
      _____USEPA, Region 10 on:__________________________

   Please attach the most recent compliance progress report.

   e. Compliance Schedule:

      Action Items Completion Dates

   f. The facility has not complied with each action item described in the compliance schedule or has not achieved final compliance. The reasons for delay as well as the necessary steps being taken to return to schedule are shown below.

   g. The revised schedule for achieving compliance is as follows:

      Action Items
      Completion Dates

Comments:
2. Summarize Each Regulated Process:

<table>
<thead>
<tr>
<th>Process Description</th>
<th>Production Rate</th>
<th>Pretreatment Standard Category</th>
<th>Subpart</th>
<th>Flow (GPD)</th>
</tr>
</thead>
</table>

**Total plant flow:** ___________________________ GPD

1. Nature and Concentration of Pollutants (report concentrations in mg/l or mass in lbs/day):
   
   a. Analysis of Regulated Flows

   The industrial user must perform sampling and analysis of the effluent from all regulated process (after treatment, if applicable). Provide the analytical data for effluent from the regulated processes in the space provided below. Attach additional sheets if necessary. Only those pollutants specifically regulated by the applicable category need to be reported. Refer to instructions for information on where to take samples and how many samples to take. If the effluent samples were taken at one combined point, indicate on the regulated process line what process flows are commingled at this point.

   **Regulated Process line(s):**

   Average daily process flow(s) (MGD):

   __________________________________________________________

**POLLUTANT LEVELS OF PROCESS WASTEWATER DISCHARGES**

|-----------|----------------|---------------|----------------|---------------|

a. Specify units used (mg/l or lb/day): __________________________________________________________

b. Sample type (grab, composite): ____________________________________________________________

c. Number of samples collected (explain): ______________________________________________________

d. Dates and times samples collected: _________________________________________________________

e. Sample collection location: _________________________________________________________________

f. Where samples analyzed: _________________________________________________________________

g. Methods of analyses: _________________________________________________________________
h. Provide name and address of commercial labs that provide analysis:

Name: ____________________________________________________________________________________
Address: ________________________________________________________________________________

Name: ____________________________________________________________________________________
Address: ________________________________________________________________________________

1. Total Toxicant Organics (TTOs):

Facilities that use toxic organics listed by EPA in its published categorical pretreatment standards are required to meet TTO pretreatment standards and must initially sample for TTOs to determine compliance. Facilities found to be in compliance with TTO standards may develop a solvent management plan in lieu of having to periodically sample for toxic organics. If you do not use toxic organics in your manufacturing process, you will not be required to sample for TTOs but you must answer question “a” below.

a. We presently do not use nor do we plan to use any of the toxic organics that are listed under the TTO standard located in the applicable categorical pretreatment standards published in the 40 C.F.R. §405--471. [    ]

b. We presently use or plan to use organic toxicants listed in the categorical pretreatment standards. [     ] Complete Parts c and d.

c. A BMR has been submitted previously which contains TTO information. Yes [    ] No [    ]

d. A solvent management plan has been developed and is attached. Yes [    ] No [    ]

2. Compliance certification:

a. Are all applicable pretreatment standards, including categorical standards, being met on a consistent basis? Yes [    ] No [    ]

If not, what additional operations and maintenance procedures are being considered for compliance?

b. List additional pretreatment being considered to meet standards.

c. Provide a compliance schedule for standards to be met. Specify the major events along with corresponding dates. Project increments of progress indicating dates for the commencement and completion of major events leading to compliance with the standard. Note: The final compliance date in this schedule shall not be later than the compliance date for the applicable pretreatment standard. Written progress reports are required within 14 days of each of the compliance milestones specified in the compliance schedule. Note that this schedule will require comment by the city and will be subject to modification.
3. Qualified Professional Certification:

I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the federal General Pretreatment Regulations and amendments thereto and in the city’s sewer use ordinance. I certify that Pretreatment Standards are being met on a consistent basis, and, if not, that the operation and maintenance changes and/or additional pretreatment measures detailed above will be required to meet the Pretreatment Standards and Requirements. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name (print) ______________________________________________________

Phone ______________________________

Signature ______________________________________________________

Title __________________________ Date __________________________

Authorized Representative Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. I have personally examined and I am familiar with the information in this report and all attachments therein. Furthermore, based on my inquiry of those persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that the sampling results reported are representative of normal work cycles and expected pollutant discharges.

Name (print) ______________________________________________________

Phone ______________________________

Signature ______________________________________________________

Title __________________________ Date __________________________
Section VI - Final Compliance Report (FCR)

1. **Existing Users**
   a. A Final Compliance Report (FCR) ________ was ________ was not submitted. (If not submitted, complete parts 2 through 5.)
   b. The FCR was submitted to:
      
      Local Municipality on: _________________
      State Agency on: _______________________
      USEPA Region 10 on: ____________________
   c. If a FCR has previously been submitted, was your facility in compliance with the applicable standards?

      _____ Yes
      Please submit a copy of your previous FCR that indicates compliance. You do not need to complete the rest of Section VI.

      _____ No
      You are required to perform additional sampling and complete parts 2 through 5 below.

   d. **Total Toxicant Organics (TTOs):**
      
      Categorical users who use toxic organics listed by EPA in its categorical pretreatment standards are required to meet TTO pretreatment standards and must initially sample for TTO in order to determine compliance. Facilities found to be in compliance with TTO standards may develop a solvent management plan in lieu of periodically sampling for toxic organics. If you do not use toxic organics in your manufacturing process, you will not be required to sample for TTO, but you must answer question #1 below.

      i. Do you use or plan to use any of the toxic organics that are listed under the TTO standard located in the applicable categorical pretreatment standards published by EPA. Yes [   ] No [   ]

      If YES, please complete parts ii and iii of this subsection.
      If NO, skip to subsection 2.

      ii. Have you already complied with the requirements for TTO sampling? Yes [   ] No [   ]

      If YES, please submit a copy of the information.

      iii. A solvent management plan has been developed and is attached. Yes [   ] No [   ]

2. **Nature and Concentration of Wastewater Pollutants**
   a. **Analysis of Regulated Flows**
      
      The categorical user must perform sampling and analysis of the effluent from all regulated process (after treatment, if applicable). Provide the analytical results for the regulated effluent below. Attach additional sheets if necessary. If you are reporting adjusted limits, submit all appropriate calculations and flow data on additional sheets. Refer to the instructions on where to take samples and how many samples to take.

      For non-categorical users: sampling should be conducted on the final effluent prior to discharge to the city’s collection system. If there are multiple discharges of process wastewater to the city’s sewer system, submit separate pages for each discharge.

      Only those pollutants specifically regulated by EPA’s applicable categorical standard or specified by the city in its local limits need to be reported. If the effluent samples are taken at one combined point, indicate alongside the regulated process line what process flows are commingled at this point.
**Regulated Process**

**Pollutant Levels of Process Wastewater Discharges**

|-----------|----------------|---------------|----------------|---------------|

- a. Sample type (grab, composite): __________________________
- b. Number of samples collected (explain): __________________________
- c. Dates and times samples collected: __________________________
- d. Sample collection location: __________________________
- e. Where samples analyzed: __________________________
- f. Methods of analyses: __________________________
- g. Name and address of commercial lab performing analyses:
  - Name: __________________________
  - Address: __________________________
  - Name: __________________________
  - Address: __________________________

1. **Compliance Certification**
   - a. Are all applicable pretreatment standards, including categorical standards, being met on a consistent basis? Yes [ ] No [ ]
   - b. If NO, do you require:
     - i. Additional operation and maintenance (O&M) measures to achieve compliance? Yes [ ] No [ ]
     - ii. New or additional pretreatment facilities to achieve compliance? Yes [ ] No [ ]
2. If additional O&M or new or additional pretreatment facilities will be required to meet categorical pretreatment standards on a consistent basis, attach a description and a schedule on separate sheets. Project increments of progress indicating dates for the commencement and completion of major milestones leading to compliance with the standard.

**Note:** The final compliance date in this schedule shall not be later than the compliance date for the applicable categorical standard. Written progress reports are required within 14 days of each of the milestone dates specified in the compliance schedule.

3. **Qualified Professional Certification:**

I hereby certify under penalty of law that this information was obtained in accordance with the applicable procedures and requirements as specified in the federal General Pretreatment Regulations and amendments thereto and in the city’s sewer use ordinance. I certify that Pretreatment Standards are being met on a consistent basis, and, if not, that the operation and maintenance changes and/or additional pretreatment measures detailed above will be required to meet the Pretreatment Standards and Requirements. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name (print) ____________________________________________________

Phone ___________________________

Signature ______________________________________________________

Title _________________________ Date ___________________________

**Authorized Representative Certification:**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. I have personally examined and I am familiar with the information in this report and all attachments therein. Furthermore, based on my inquiry of those persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that the sampling results reported are representative of normal work cycles and expected pollutant discharges.

Name (print) ____________________________________________________

Phone ___________________________

Signature ______________________________________________________

Title _________________________ Date ___________________________
Priority Pollutant Information

1. Please indicate by placing an “X” in the appropriate space by each listed chemical whether it is suspected to be absent, known to be absent, suspected to be present, or known to be present in your manufacturing or service activity or generated as a byproduct. Some compounds are known by other names. Please refer to the Priority Pollutant Synonym Listing for those compounds that have an asterisk (*).

<table>
<thead>
<tr>
<th>#</th>
<th>Chemical Compound</th>
<th>Suspected absent</th>
<th>Known Absent</th>
<th>Suspected present</th>
<th>Known Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ammonia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>asbestos (fibrous)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>cyanide (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>antimony (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>arsenic (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>beryllium (total)</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>7</td>
<td>cadmium (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>chromium (total)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>9</td>
<td>copper (total)</td>
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<td>selenium (total)</td>
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<tr>
<td>14</td>
<td>silver (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>thallium (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>zinc (total)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>acenaphthene</td>
<td></td>
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</tr>
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<td>18</td>
<td>acenaphthylene</td>
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<td>aldrin</td>
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<tr>
<td>22</td>
<td>anthracene</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
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2. For chemical compounds in #1 above which are indicated to be “known present,” please provide the following data for each: (attach additional sheets, if needed)

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<td>PCB-1016</td>
<td>Arochlor-1016</td>
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<td>Arochlor-1221</td>
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<td>PCB-1232</td>
<td>Arochlor-1232</td>
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<td>Arochlor-1242</td>
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<td>Arochlor-1248</td>
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<td>Arochlor-1254</td>
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<td>PCB-p-DDX</td>
<td>2,3,7,8-tetrachlordibenzo-p-dioxin</td>
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<td>1,1,2,2-tetrachlorethane</td>
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<td>perchloroethylene</td>
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<td>chlorodibromomethane</td>
<td>tetrachloroethylene</td>
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<td>toluene</td>
<td>methylbenzene</td>
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<td>meta-dichlorobenzene</td>
<td>toluol</td>
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<td>para-dichlorobenzene</td>
<td>1,1,1-trichloroethane</td>
<td>methyl chloroform</td>
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<td>trichloroethylene</td>
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<td>vinyl chloride</td>
<td>chloroethene</td>
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<td>chloroethylene</td>
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<td>1,2(trans)-dichloroethene</td>
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<td>propylene dichloro</td>
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<tr>
<td>(cis &amp; trans) 1,3-</td>
<td></td>
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<td></td>
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<tr>
<td>dichloropropene</td>
<td>(cis &amp; trans) 1,3-dichloropropylene</td>
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<td>diethyl phthalate</td>
<td>ethyl phthalate</td>
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<td>2,4-dimethylphenol</td>
<td>2,4-xylenol</td>
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</tr>
</tbody>
</table>
Attachment B

**ELECTROPLATING AND METAL FINISHING SUBCATEGORIES**

Place a check beside all activities that apply to your business:

- [ ] Electroplating
- [ ] Electroless plating
- [ ] Anodizing
- [ ] Conversion coating
- [ ] Etching (chemical milling)
- [ ] Printed circuit board manufacturing
- [ ] Cleaning
- [ ] Machining
- [ ] Grinding
- [ ] Polishing
- [ ] Barrel finishing (tumbling)
- [ ] Burnishing
- [ ] Impact deformation
- [ ] Pressure deformation
- [ ] Shearing
- [ ] Heat treating
- [ ] Thermal cutting
- [ ] Welding
- [ ] Brazing
- [ ] Soldering
- [ ] Flame spraying
- [ ] Sand blasting
- [ ] Other abrasive jet machining
- [ ] Electric discharge machining
- [ ] Electrochemical machining
- [ ] Electron beam machining
- [ ] Laser beam machining
- [ ] Plasma arc machining
- [ ] Ultrasonic machining
- [ ] Sintering
- [ ] Laminating
- [ ] Hot dip coating
- [ ] Sputtering
- [ ] Vapor plating
- [ ] Thermal infusion
- [ ] Salt bath descaling
- [ ] Solvent degreasing
- [ ] Paint stripping
- [ ] Painting
- [ ] Electrostatic painting
- [ ] Electropainting
- [ ] Vacuum metalizing
- [ ] Assembly
- [ ] Calibration
- [ ] Testing
- [ ] Mechanical plating
Attachment C

Raw Materials

List all principal materials regularly used in your facility that may be present in your wastewater discharge (such as cleaning agents, solvents, food processing waste, plating solutions, catalysts, milk wastes, ink, etc.). Identify chemical constituents, if known, or brand name. Attach material safety data sheets.

<table>
<thead>
<tr>
<th>Generic Type</th>
<th>Annual Volume Used</th>
<th>Chemical Constituents</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Or Brand Name</td>
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</tbody>
</table>
Attachment D

SCHEMATIC FLOW DIAGRAM

For each major activity in which wastewater is generated, draw a diagram of the flow of materials and water from beginning to end of activity, showing all unit processes generating wastewater. Number each unit process having wastewater discharges to the community sewer. Use these numbers when showing this unit process in the building layout in the schematic diagram. Use the space below or additional sheets of 8 x 11 paper.
Attachment E

BUILDING LAYOUT

Draw to scale the location of each building on the premises. Show location of all water meters (current and planned), storm drains, numbered unit processes (from process schematic(s)), municipal sewers and each side sewer connected to the municipal sewers, automatic sampling equipment (current and planned), location of pretreatment processes, treated flows and untreated flows, name and location of adjacent streets. Use flow schematic to indicate process flows and process discharge flows in gallons per day (gpd). Number each side sewer and show possible sampling locations (sampling manhole).

An attached blueprint or drawing of the facilities showing the above items may be substituted for a drawing on this sheet.