

**SPARTANBURG SANITARY SEWER DISTRICT
PRETREATMENT PROGRAM**

INDUSTRIAL/NON-DOMESTIC WASTEWATER SURVEY FORM

SECTION A - GENERAL INFORMATION.

1) Company or business name: _____

2) Mailing address: _____
Zip code _____

3) Address of premises: _____

4) Contact official name: _____
Title _____

Phone: (____) _____ Fax: (____) _____

E-mail: _____

Address (if different from above) _____

5) Alternate person to contact concerning information provided herein:

NOTE TO SIGNING OFFICIAL: Any information submitted in this form may be claimed as confidential by the submitter; any such claim must be asserted at the time of submission by writing the phrase "CONFIDENTIAL BUSINESS INFORMATION" on each page containing such information. If no claim of confidentiality is made at the time of submission, the information will be treated in accordance with Federal Regulation 40 CFR, Part 2 which, among other things, states that information describing the submitter's wastewater effluent cannot be treated as confidential.

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. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and 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.

Signature of official: _____ Date: _____

Name (Print or type): _____ Title: _____

6) a. Type of business conducted (metal plating, meat packing, food processing, textile printing, etc.):

b. List all applicable Standard Industrial Classification Number(s) (SIC Code) for your facilities: _____

Please indicate with an "X" all of the following activities which are a part of operations at your facility:

- 1. () Adhesives Formulation
- 2. () Aluminum Forming
- 3. () Asbestos Manufacturing
- 4. () Battery Manufacturing
- 5. () Beverage Bottling
- 6. () Cement Manufacturing
- 7. () Carbon Black Manufacturing
- 8. () Coal Mining
- 9. () Coil Coating
- 10. () Copper Forming
- 11. () Dairy Products Processing
- 12. () Electric & Electronic Components Manufacturing
- 13. () Electroplating
- 14. () Explosives Manufacturing
- 15. () Ferroalloy Manufacturing
- 16. () Fertilizer Production
- 17. () Food/Edible Products Processing
- 18. () Glass Manufacturing
- 19. () Grain Mills
- 20. () Gum & Wood Chemicals Manufacturing
- 21. () Hospital
- 22. () Inorganic Chemicals Manufacturing
- 23. () Iron & Steel
- 24. () Laundry
- 25. () Leather Tanning & Finishing
- 26. () Mechanical Products Manufacturing
- 27. () Metal Finishing
- 28. () Metal Molding
- 29. () Mineral Mining
- 30. () Nonferrous Metals Forming
- 31. () Oil & Gas Extraction
- 32. () Ore Mining
- 33. () Organic Chemicals, Plastics, or Synthetic Fibers
- 34. () Paint & Ink Manufacturing
- 35. () Paving & Roofing Materials
- 36. () Pesticides Manufacturing
- 37. () Petroleum Refining
- 38. () Pharmaceuticals Manufacturing
- 39. () Phosphate Manufacturing

	<u>Type of Usage</u>	<u>Avg. Volume of Usage</u>	<u>Estimated</u> or <u>Measured</u>
(e)	Water contained in product	_____gpd	_____
(f)	Other (i.e. wasted to ground/stream)	_____gpd	_____
	_____ (Indicate)	TOTAL _____gpd	_____

9) WASTEWATER DISPOSAL METHOD:

- (a) Does your company discharge any of the water listed in #8 above to a public sewer system for treatment by the Spartanburg Sanitary Sewer District?
 () yes, () no. (If no, go to #11, pg. 6).
- (b) If yes, indicate below the disposal method for each type (refer to #8 above) of water consumption or usage at your facility:

		<u>On-site Disposal and/or Treatment</u>				
		<u>Discharged To:</u>		<u>Dis-</u>	<u>Other</u>	
		<u>Public</u>	<u>Septic</u>	<u>Land</u>	<u>Dis-</u>	
		<u>Sewer</u>	<u>Tank</u>	<u>Appli-</u>	<u>Dis-</u>	
				<u>cation</u>	<u>posal</u>	
				<u>To</u>		
				<u>Stream</u>		
(1)	Domestic/sanitary water (from rest-rooms, showers, water fountains, canteens, etc.)	_____	_____	_____	_____	_____
					NPDES#	_____
(2)	Cooling Water	_____	_____	_____	_____	_____
					NPDES#	_____
(3)	Boiler Water	_____	_____	_____	_____	_____
					NPDES#	_____
(4)	Process Water	_____	_____	_____	_____	_____
					NPDES#	_____
(5)	Other Water Usage (i.e. irrigation)	_____	_____	_____	_____	_____
	_____ (indicate)				NPDES#	_____

(c) If ANY COOLING WATER is discharged to the public sewer system, please check and complete the following information that applies to your system:

- ___ (1) Cooling water is recycled; only system bleed-off to sewer.
___ (2) Cooling water is once-thru (not recycled); all system water that is not evaporated is discharged to sewer.

___ (3) Cooling system is for:
___ air conditioning/humidification
___ machinery
___ product formulation
___ other _____(indicate)

___ (4) Chemical additives in cooling water:
Type (example: chromium algaecide) _____(indicate)
Amount and frequency (example: 25 gal/wk.) _____(indicate)

___ (5) Other than the carrier piping, the cooling water contacts the following, prior to discharge to sewer:

- ___ nothing: is non-contact prior to discharge.
___ machine parts
___ hydraulic, lubricating fluid
___ product
___ other wastewater
___ other _____(indicate)

(d) If ANY BOILER WATER is discharged directly to the public sewer system, please check or complete the following information that applies to your system:

___ (1) Excess boiler feed water discharged directly to sewer.

___ (2) Excess boiler feed water recycled to make-up tank.

___ (3) Make-up tank overflow is discharged to:
___ public sewer system
___ storm sewer system or ditch/culvert
___ Other _____(indicate)

___ (4) Boiler blowdown is:
___ automatic
___ manual operation
___ discharged to public sewer system
___ discharged to storm sewer system or ditch/culvert
___ discharged to other _____(indicate)

___ (5) Chemicals added to boiler water:
Point where added _____, type _____
amount & frequency _____.

___ (6) Estimated volume of discharge to public sewer during typical working day:
___ gallons of boiler feed/boiler make-up water discharged on _____ days per week.
___ gallons of boiler blowdown discharged on _____ days per week.

10) IS ONLY DOMESTIC & SANITARY SEWER AND/OR COOLING WATER AND/OR BOILER WATER DISCHARGED TO THE PUBLIC SEWER SYSTEM FROM YOUR FACILITY? () yes () no

IF YES, COMPLETE THIS QUESTION AND THE PRECEDING QUESTIONS ON PAGES 1 - 5 OF THIS QUESTIONNAIRE, INCLUDING THE REQUIRED SIGNATURE ON PAGE 1, AND RETURN ONLY THESE PAGES TO THE SPARTANBURG SANITARY SEWER DISTRICT.

IF NO, MEANING OTHER TYPES OF WATER ARE DISCHARGED FROM YOUR FACILITY TO THE PUBLIC SEWER SYSTEM, COMPLETE THE ENTIRE QUESTIONNAIRE, INCLUDING THE REST OF THIS QUESTION AND THE REQUIRED SIGNATURE ON PAGE 1, AND RETURN ALL PAGES TO THE SPARTANBURG SANITARY SEWER DISTRICT.

- (a) Do you have a grease trap on-line at your facility?
___ yes ___no. If yes, how many? _____
- (b) If yes, does this grease trap serve a food preparation area at your facility?
___yes ___no.
- (c) Approximately how often is this grease trap pumped out?
_____.
- (d) When was the last time it was pumped? _____
By whom? _____
Where is it taken for disposal? _____

11) IF NO WATER OF ANY TYPE IS DISCHARGED TO A PUBLIC SEWER SYSTEM, INDICATE BELOW HOW WASTEWATER DISPOSAL IS MADE AND RETURN PAGES 1 - 6 OF THIS QUESTIONNAIRE WITH ALL APPLICABLE INFORMATION COMPLETED (INCLUDING THE SIGNATURE OF PAGE 1) TO THE SPARTANBURG SANITARY SEWER DISTRICT.

- ___ On-site disposal - septic tank
- ___ On-site disposal - treatment and discharge to stream;
NPDES Permit # _____
- ___ Other disposal _____ (i.e., off-site hauling;
on-site land application).

NOTE: IF YOU HAVE QUESTIONS CONCERNING THIS SURVEY FORM, PLEASE CONTACT Industrial Wastewater at (864) 582-3250.

MAILING ADDRESS:
Spartanburg Sanitary Sewer District
P.O. Box 251
Spartanburg, SC 29304

SECTION B - PRODUCT OR SERVICE INFORMATION

1) Give a brief description of the primary manufacturing or service activity on the on the premises: _____

2) Check or list all additional support activities conducted at your premises that have not been reported as primary production or service activities in Section A:

- | | |
|---|---|
| <input type="checkbox"/> Machine Shop, repair shop | <input type="checkbox"/> Vehicle washing and/or servicing |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Printing |
| <input type="checkbox"/> Photographic processing | <input type="checkbox"/> Electroplating |
| <input type="checkbox"/> Garage | <input type="checkbox"/> Finishing, Painting |
| <input type="checkbox"/> Engine or vehicle steam cleaning | <input type="checkbox"/> Cafeteria |
| | <input type="checkbox"/> Other (specify) _____ |

3) List each wet manufacturing process or other support activity that contributes to the wastewater discharge from your premises and provide SIC Code, when applicable, and provide the requested flow data for each wet process or activity (Attach additional sheets if necessary):

	<u>Wet Process Or Wet Activity</u>	<u>SIC CODE</u>	<u>Estimated Flow and Frequency</u>
<i>Example:</i>	Clean-up: finishing machines	2261 cotton woven finishing	1500 gal. once per week

1. _____
2. _____
3. _____
4. _____
5. _____

4) List the principal compounds (use generic names) used in your operation and indicate whether each is a raw material or catalyst/intermediate or indicate other use; please provide the estimated quantities used (Attach additional sheets if necessary):

PRINCIPAL COMPOUNDS USED

	<u>Generic Name</u>	<u>raw material</u>	<u>catalyst/ inter- mediate</u>	<u>other use (indicate)</u>	<u>Estimated Qty. Used Per Working Day lbs./day or gal/day</u>
1.	_____				
2.	_____				

Generic Name	raw material	catalyst/inter-mediate	other use (indicate)	Estimated Qty. Used Per Working Day lbs./day or gal/day
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

Note: As supplemental information to this Table, copies of applicable Material Safety Data Sheets may also be submitted as attachments; but not in lieu of providing the information requested in #4 above.

- 5) Please complete the following listing of pollutants of interest. For each pollutant please check whether it is known to be present, suspected to be present, suspected to be absent, or known to be absent in your operation. Suitable responses should be based on the following descriptions:

Known to be present: The compound has been detected in the wastewater discharge by reasonable lab analytical procedures or by reference (i.e. from supplier or literature) is known to be present in the raw materials or product and in the wastewater discharge.

Suspected to be present: The compound is either a raw material in the processes employed or is a product, a by-product, catalyst, etc. Its presence in the wastewater discharge is, therefore, a reasonable technical judgement.

Suspected to be absent: No known reason to predict that the compound is present in the discharge.

Known to be absent: The application of reasonable analytical procedures designed to detect the material have yielded negative results.

TABLE I - POLLUTANTS OF INTEREST

	Pollutant Name synonym in ()	Known Present	Sus- pected Present	Sus- pected Absent	Known Absent
I.	<u>Metals and Inorganics</u>				
1.	Antimony	---	---	---	---
2.	Arsenic	---	---	---	---
3.	Asbestos	---	---	---	---
4.	Beryllium	---	---	---	---
5.	Cadmium	---	---	---	---
6.	Chromium	---	---	---	---
7.	Copper	---	---	---	---
8.	Cyanide	---	---	---	---
9.	Lead	---	---	---	---
10.	Mercury	---	---	---	---
11.	Molybdenum	---	---	---	---
12.	Nickel	---	---	---	---
13.	Selenium	---	---	---	---
14.	Silver	---	---	---	---
15.	Thallium	---	---	---	---
16.	Zinc	---	---	---	---
II.	<u>Phenols and Cresols</u>				
17.	Phenol	---	---	---	---
18.	Phenol, 2-chloro	---	---	---	---
19.	Phenol, 2,4-dichloro	---	---	---	---
20.	Phenol, 2,4,6-trichloro	---	---	---	---
21.	Phenol, pentachloro	---	---	---	---
22.	Phenol, 2-nitro (para-nitro)	---	---	---	---
23.	Phenol, 4-nitro (ortho-nitro)	---	---	---	---
24.	Phenol, 2,4-dinitro	---	---	---	---
25.	Phenol, 2,4-dimethyl	---	---	---	---
26.	m-Cresol,p-chloro (4-chloro- 3-methylphenol)	---	---	---	---
27.	o-Cresol, 4,6-dinitro (4,6-dinitro- 2-methylphenol)	---	---	---	---
III.	<u>Monocyclic Aromatic</u> (Excluding Phenols, Cresols and Phthalates)				
28.	Benzene	---	---	---	---
29.	Benzene, chloro	---	---	---	---

	<u>Pollutant Name synonym in ()</u>	<u>Known Present</u>	<u>Sus- pected Present</u>	<u>Sus- pected Absent</u>	<u>Known Absent</u>
30.	Benzene, 1,2-dichloro (ortho-dichloro)	—	—	—	—
31.	Benzene, 1,3-dichloro (meta-dichloro)	—	—	—	—
32.	Benzene, 1,4-dichloro (para-dichloro)	—	—	—	—
33.	Benzene, 1,2, 4-trichloro	—	—	—	—
34.	Benzene, hexachloro (perchloro)	—	—	—	—
35.	Benzene, ethyl	—	—	—	—
36.	Benzene, nitro	—	—	—	—
37.	Toluene (methylbenzene)	—	—	—	—
38.	Toluene, 2,4-dinitro	—	—	—	—
39.	Toluene, 2,6-dinitro	—	—	—	—
IV.	<u>PCB's and Related Compounds</u>				
40.	PCB-1016	—	—	—	—
41.	PCB-1221	—	—	—	—
42.	PCB-1232	—	—	—	—
43.	PCB-1242	—	—	—	—
44.	PCB-1248	—	—	—	—
45.	PCB-1254	—	—	—	—
46.	PCB-1260	—	—	—	—
47.	2-Chloronaphthalene	—	—	—	—
V.	<u>Ethers</u>				
48.	Ether, bis chloromethyl	—	—	—	—
49.	Ether, bis 2-chloroethyl	—	—	—	—
50.	Ether, bis 2-chloropropyl	—	—	—	—
51.	Ether, 2-chloroethyl vinyl	—	—	—	—
52.	Ether, 4-bromophenyl phenyl	—	—	—	—
53.	Ether, 4-chlorophenyl phenyl	—	—	—	—
54.	Bis (2-chloroethoxy) methane	—	—	—	—

	Pollutant Name synonym in ()	<u>Known Present</u>	<u>Sus- pected Present</u>	<u>Sus- pected Absent</u>	<u>Known Absent</u>
VI.	<u>Nitrosamines and Other Nitrogen Containing Compounds</u>				
	55. Nitrosamine, dimethyl	—	—	—	—
	56. Nitrosamine, diphenyl	—	—	—	—
	57. N-nitroso-di- n-propylamine	—	—	—	—
	58. Benzidine	—	—	—	—
	59. Benzidine, 3,3'dichloro	—	—	—	—
	60. Hydrazine, 1,2-diphenyl (hydrazobenzene)	—	—	—	—
	61. Acrylonitrile	—	—	—	—
VII.	<u>Halogenated Aliphatics</u>				
	62. Methane, bromo	—	—	—	—
	63. Methane, chloro- (methyl chloride)	—	—	—	—
	64. Methane, dichloro	—	—	—	—
	65. Methane, chlorodibromo	—	—	—	—
	66. Methane, dichlorobromo	—	—	—	—
	67. Methane, tribromo	—	—	—	—
	68. Methane, trichloro (chloroform)	—	—	—	—
	69. Methane, tetrachloro (carbon tetrachloride, carbon tet.)	—	—	—	—
	70. Methane, trichlorofluoro (fluorocarbon - 11)	—	—	—	—
	71. Methane, dichlorodifluoro (fluorocarbon 12)	—	—	—	—
	72. Ethane, chloro (ethylchloride)	—	—	—	—
	73. Ethane, 1, 1-dichloro (ethylidene chloride)	—	—	—	—
	74. Ethane, 1, 2-dichloro	—	—	—	—
	75. Ethane, 1,1,1-trichloro	—	—	—	—
	76. Ethane, 1,1,2-trichloro (vinyl trichloride)	—	—	—	—
	77. Ethane, 1,1,2, 2-tetrachloro (acetylene tetrachloride)	—	—	—	—

	Pollutant Name <u>synonym in ()</u>	<u>Known Present</u>	<u>Sus- pected Present</u>	<u>Sus- pected Absent</u>	<u>Known Absent</u>
78.	Ethane, hexachloro (perchloro, perc)	—	—	—	—
79.	Ethene (ethylene), chloro (vinyl chloride)	—	—	—	—
80.	Ethene (ethylene), 1,1-dichloro	—	—	—	—
81.	Ethene (ethylene), trans-dichloro	—	—	—	—
82.	Ethene (ethylene), trichloro	—	—	—	—
83.	Ethene (ethylene), tetrachloro	—	—	—	—
84.	Propane, 1,2-dichloro (propylene dichloride)	—	—	—	—
85.	Propene, 1,3-dichloro (1,3 dichloropropylene)	—	—	—	—
86.	Butadiene, hexachloro	—	—	—	—
87.	Cyclopentadiene, hexachloro	—	—	—	—

VIII. Phthalate Esters

88.	Phthalate, di-o-methyl	—	—	—	—
89.	Phthalate, di-n-ethyl	—	—	—	—
90.	Phthalate, di-n-butyl	—	—	—	—
91.	Phthalate, di-n-octyl	—	—	—	—
92.	Phthalate, bis 2-ethylhexyl	—	—	—	—
93.	Phthalate, butyl benzyl	—	—	—	—

IX. Polycyclic Aromatic Hydrocarbons

94.	Acenaphthene	—	—	—	—
95.	Acenaphthylene	—	—	—	—
96.	Benzo (a) anthracene	—	—	—	—
97.	Benzo (b) fluoranthene	—	—	—	—
98.	Benzo (k) fluoranthene	—	—	—	—
99.	Benzo (ghi) perylene	—	—	—	—
100.	Benzo (a) pyrene	—	—	—	—
101.	Chrysene	—	—	—	—
102.	Dibenzo (a,n,) anthracene (1,2,5,6 dibenzanthra- cene)	—	—	—	—

	<u>Pollutant Name synonym in ()</u>	<u>Known Present</u>	<u>Sus- pected Present</u>	<u>Sus- pected Absent</u>	<u>Known Absent</u>
103.	Fluoranthene	---	---	---	---
104.	Fluorene	---	---	---	---
105.	Indeno (1,2,3-cd) Pyrene	---	---	---	---
106.	Naphthalene	---	---	---	---
107.	Phenanthrene	---	---	---	---
108.	Pyrene	---	---	---	---
109.	Anthracene	---	---	---	---

X. Pesticides

110.	Acrolein	---	---	---	---
111.	Aldrin	---	---	---	---
112.	BHC Alpha	---	---	---	---
113.	BHC Beta	---	---	---	---
114.	BHC Gamma (Lindane)	---	---	---	---
115.	BHC Delta	---	---	---	---
116.	Chlordane	---	---	---	---
117.	DDD	---	---	---	---
118.	DDE	---	---	---	---
119.	DDT	---	---	---	---
120.	Dieldrin	---	---	---	---
121.	Endosulfan Alpha	---	---	---	---
122.	Endosulfan Beta	---	---	---	---
123.	Endosulfan Sulfate	---	---	---	---
124.	Endrin	---	---	---	---
125.	Endrin aldehyde	---	---	---	---
126.	Heptachlor	---	---	---	---
127.	Heptachlor expoxide	---	---	---	---
128.	Isophorone	---	---	---	---
129.	TCDD (Dioxin)	---	---	---	---
130.	Toxaphene	---	---	---	---

XI. Surfactants

131.	Alkylphenol Ethoxylates	---	---	---	---
132.	Nonylphenol Ethoxylates	---	---	---	---
133.	Others (identify)	---	---	---	---

- 6) For any of the Pollutants of Interest which you have indicated as Known To Be Present in the preceding Table I, please (a) provide the following information concerning the source or location of this compound in your operation and (b) provide your best estimate of the quantity of each Pollutant of Interest discharged to the public sewer (indicate units if different from lbs./day). Attach additional sheets if necessary.

POLLUTANTS OF INTEREST KNOWN TO BE PRESENT

<u>Compound Name</u> Name/# from <u>Table I</u>	<u>Process Line</u>	<u>Location/Source</u> Raw By- <u>Matl. Cat. Prod.</u>	<u>Quan. Dischgd.</u> To Public Sewer lbs./day or <u>other units</u>
<i>Example:</i> phenol #17	coating	x	150 kilograms/day

1. _____
2. _____
3. _____
4. _____
5. _____

- 7) a. Please provide the concentration of any compound from Table 1 that is present in the wastewater if this information is available from laboratory analyses. When no lab results are available, please include the estimated figure, and indicate it is estimated.

<u>Pollutant Name</u>	<u>Concentration</u> (mg/l)	<u>From Lab</u> <u>Analysis</u>	<u>Estimated</u>
-----------------------	--------------------------------	------------------------------------	------------------

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

- b. If laboratory data is available that would characterize the wastewater in terms of concentrations of the following basic parameters, please provide this information along with any other parameters that characterize the wastewater (example: titanium concentration = 8 mg/l). If the concentrations are estimated, please indicate in the last column.

WASTEWATER CHARACTERISTICS

Parameter	From Lab Analysis (See 7c below)			Sample Type	Estimated Concentration mg/l
	Con. mg/l	Date of Analysis	Grab		
0. <i>example:</i> titanium	8	5/5/03		avg.3/24hr.	
1. BOD					
2. Suspended Solids					
3. COD					
4. Grease/Oil					
5. Solvents					
6. NH3-N					
7. pH					
8. Temperature	degree F				
9. TKN					
10.					
11.					
12.					
13.					
14.					
15.					

c. Source of laboratory analyses results included above:

in-house lab SSSD lab
 commercial lab _____ (Name)

NOTE: Copies of lab analyses results can be attached as supplemental data, but not in lieu of completing the above.

SECTION C - PLANT OPERATIONAL CHARACTERISTICS

1) In the following two tables, list all major processes at your facility with a wet discharge to public sewer as continuous or batch and provide the other related data.

Continuous discharge - means having wastewater flow during all or almost all of the time during which the process is in operation.

Batch discharge - means having a wastewater discharge in discrete intervals at which time all or almost all of the wastewater is dumped.

TABLE I
CONTINUOUS WET PROCESS

<u>Process Description & SIC Code; (if applicable)</u>	<u>Meas. Rate</u>	<u>Wastewater Discharge Rate (gal/min) (indicate other units)</u>
<i>Example:</i> 0. glue formulation/ bag mfg. (2643)	2gpm	2 gpm
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

TABLE II
BATCH WET PROCESSES (Specify other units)

<u>Process Description SIC Code</u>	<u>Average Volume (gal.)</u>	<u>Average Rate (gal/min)</u>	<u>Discharge *Frequency (time)</u>
<i>example:</i> (2261) caustic vat; sizing solution	1,800	30 gpm.	twice/wk Sat, Wed.
1. _____			
2. _____			
3. _____			
4. _____			
5. _____			

(Attach other sheets if needed)

*NOTE: PLEASE INDICATE THE DAY(S) IF A DISCHARGE USUALLY OCCURS ON THE SAME DAY(S) OF THE WEEK (INCLUDING WEEKENDS).

2) List any processes subject to seasonal variation: _____

Indicate month(s) of peak operation and production: _____

Indicate any month(s) of low seasonal production: _____

3) Is there a scheduled shutdown (i.e. for clean-up purposes or for July 4th week?)
___ yes, ___ no.

If yes, when _____

4) Shift information (based on full production):

(a) Number of production shifts per workday _____ for approximately _____ months per year.

(b) Number of work days per week _____ for approximately _____ months per year.

(c) Average number of employees per shift:

First _____	non-production/
Second _____	(office/admin.) _____
Third _____	TOTAL Employees _____

(d) Shift Times:

First _____ a.m., p.m. to _____ a.m., p.m.

Second _____ a.m., p.m. to _____ a.m., p.m.

Third _____ a.m., p.m. to _____ a.m., p.m.

Office/admin. _____ a.m., p.m. to _____ a.m., p.m.

5) (a) Clean-up: in your operation indicate all applicable
Clean-up Time and Frequency

Example:

X portion of a shift(s) _____ 3:00 - 4:00 p.m., M-F _____

_____ a special clean-up shift _____

_____ portion of a shift _____

_____ clean-up day _____

- (b) Explain what is cleaned (i.e. what vats are dumped) and what type of cleaners (i.e. alkaline or acid) are used?

6) Discharge to the public sewer system:

- (a) How many days per week does your plant discharge wastewater that is ultimately treated by the Sewer District?

Process wastewater ____ days
Domestic/Sanitary wastewater ____ days

- (b) How many hours per day does your plant discharge process wastewater? ____ hours.

- (c) List below the approximate percent of your total daily wastewater discharge that occurs during each shift:

First Shift ____% Second Shift ____% Third Shift ____%

Clean-up Shift ____% (Explain, if necessary) _____

- 7) (a) How many points of connection (or points of discharge) to the public sewer system does your facility have?

- (b) Provide a sketch (schematic) to show each connection or discharge point location relative to your facility. Please identify street(s) and buildings in the sketch such that these connection point locations could be generally located in the field. Number each connection point in the sketch and indicate in the Table below whether the wastewater at that point from your facility is domestic only, or process only, or combined. Attach a separate sheet for sketch.

Connection
Location #
(Refer to sketch)

Type Wastewater Discharged
@ Each Connection to Public Sewer
(indicate with "X")
Domestic Only Process Only Combined

#1 _____

#2 _____

#3 _____

#4 _____

- 8) Does your company have a designated sampling manhole or flow monitoring station that can be used by the Sewer District for obtaining a representative sample of your process wastewater discharge? ___ yes ___ no. If yes, indicate where and on which line connecting to public sewer that this sampling point is located in the sketch in 7b. above.
- 9) Does your company have a wastewater flow monitoring system approved by the Sewer District from which readings are obtained for user charge and/or surcharge billings? ___yes ___ no.

If yes, provide the following information:

- (a) Meter Type and brand _____
(i.e. Sonar/Honeywell, Float/Stevens)
- (b) Recorder Brand _____
- (c) Recorder Chart Type _____ (i.e. strip or circular; 7-day, 30 day, etc.)
- (d) Flow Control Point
1. Flume type (shape) _____ (i.e. Parshal)
2. Weir Type (shape) _____ (i.e. 22-1/2° v-notch)
- (e) Date of most recent calibration _____
- (f) Name of calibration company _____
- 10) Are any laboratory monitoring and analyses conducted on your process wastewater discharge? ___ yes ___ no.

If yes, check all applicable:

- ___ on a scheduled basis
___ by outside commercial lab
___ by in-house equipment and personnel

11) Has your plant instituted any in-plant controls to reduce water pollution?
 ____ yes ____ no.

Please indicate those applicable:

____ water recycle
 ____ chemical substitutions
 ____ water reuse
 ____ material reclamation
 ____ other: _____

12) Are any process changes or plant expansions planned during the next three years? ____ yes ____ no.

If yes, briefly describe the proposed change and what changes can be expected in the wastewater discharge.

SECTION D - WASTEWATER VOLUMES, PRETREATMENT AND SLUDGE

1) Provide in the table below your best estimate of the breakdown of the average volume of wastewater discharge from your operation and of the average volume of water losses:

<u>Type of Discharge or Loss</u>	<u>Avg. Vol. gal/day</u>	<u>Indicate with "X" Estimated or Measured</u>	
a. sewer leading to on-site treatment (does not discharge to public system)			
1. treatment facility (NPDES # _____)	_____ gpd	_____	_____
2. septic tank	_____ gpd	_____	_____
b. storm sewer (does not tie into public sewer system or to on-site treatment systems)	_____ gpd	_____	_____
c. evaporation			
1. boilers	_____ gpd	_____	_____
2. cooling towers	_____ gpd	_____	_____

<u>Type of Discharge or Loss</u>	<u>Avg. Vol. gal/day</u>	<u>Indicate with "X" Estimated or Measured</u>	
d. waste haulers (name _____)	_____ gpd	_____	_____
e. contained in product	_____ gpd	_____	_____
f. other _____	_____ gpd	_____	_____
g. sewer leading to public system			
1. domestic & sanitary sewage (restrooms, employee showers, cafeterias, etc.)	_____ gpd	_____	_____
2. process wastewater (including clean-up)	_____ gpd	_____	_____
3. cooling water			
(1) contact	_____ gpd	_____	_____
(2) non-contact	_____ gpd	_____	_____
4. boiler blowdown	_____ gpd	_____	_____
5. other _____	_____ gpd	_____	_____

2) Please indicate any pretreatment devices or processes used at your facility on the wastewater prior to its being discharged to the public sewer system:

Indicate "X" here if no pretreatment is provided_____.

- | | |
|---|------------------------|
| ___ grease trap | ___ filtration |
| ___ grease or oil separation | ___ centrifuge |
| ___ grit removal | ___ screening |
| ___ flow equalization | ___ reverse osmosis |
| ___ with aeration | ___ ozonation |
| ___ chemical precipitation | ___ chlorination |
| ___ settling basins | ___ carbon filtration |
| ___ aerated basins (biological treatment) | ___ solvent separation |
| ___ clarifiers | |
| ___ dissolved air flotation | |
| ___ pH adjustment/neutralization | |
| ___ automatic feed | ___ manual feed |
| ___ add acid | ___ add base |

___ other units; describe _____

3) If you have plans for installation of pretreatment units, please describe the units and the schedule for installation.

(a) Please provide a schematic flow diagram of the pretreatment units at your plant; label each unit process (i.e. pH adjustment; filtration); also indicate at which point any planned pretreatment units would be placed on the flow diagram. Attach a separate sheet for schematic.

(b) Does the South Carolina Department of Health & Environmental Control require a certified operator be responsible for your pretreatment system?
 ___ yes ___ no.

If yes, what level of certification is required?

___ A-Bio, ___ B-Bio, ___ C-Bio, ___ D-Bio.
 ___ A-PC, ___ B-PC, ___ C-PC, ___ D-PC

(c) Who is the person currently responsible for your pretreatment system?

What is their certification number? _____

4) Does the wastewater discharged from any process waste stream at your facility:

No Yes

(a) create a fire or explosion hazard?	___	___
(b) have a pH lower than 5.0?	___	___
(c) contain a substance that can obstruct the flow in the collection system?	___	___

If yes, indicate which process _____

5) Are any sludges or liquid wastes generated at your facility which are not discharged to the sewer leading to the Sewer District? ___ yes ___ no

If yes, complete the following table:

<u>Waste/Sludge Description</u>	<u>Estimated Annual Quantity Generated (units)</u>	<u>Mark with "X" if material is Classified Hazardous</u>	<u>Stored On-Site</u>	<u>Disposed On-Site</u>
___ acids and/or alkalis	_____	_____	_____	_____
___ Metal sludges	_____	_____	_____	_____

<u>Waste/Sludge Description</u>	<u>Estimated Annual Quantity Generated (units)</u>	<u>Mark with "X" if material is Classified Hazardous</u>		
		<u>Stored On-Site</u>	<u>Disposed On-Site</u>	<u>Disposed On-Site</u>
___ inks/dyes	_____	_____	_____	_____
___ oil &/or grease	_____	_____	_____	_____
___ paints	_____	_____	_____	_____
___ plating wastes	_____	_____	_____	_____
___ pesticides	_____	_____	_____	_____
___ solvents/ thinners	_____	_____	_____	_____
___ pretreatment sludges (describe _____ _____)	_____	_____	_____	_____
___ other wastes (describe _____ _____)	_____	_____	_____	_____

(a) Is a Spill Prevention Control and Countermeasure Plan prepared for your facility? ___ yes ___ no.

(b) If yes, is notification of the Sewer District included in your plan? ___ yes ___ no.

(c) Please list the materials stored or produced at your facility which are considered in your Spill Prevention Control and Countermeasure Plan:

(d) If no, and if materials are stored or produced at your facility which, through accidental spills or through seepage could enter sewer lines leading to the public sewer system, please contact the IWW Department at (864) 253-9304, to discuss District notification information to be established for your operations.