



Industrial / Non-Domestic Wastewater Survey

The information provided on this survey serves two functions:

The information is used to determine if your facility needs a Significant Industrial User (SIU) Permit or an Authorization for the discharge of wastewater to the sanitary sewer system.

If a SIU Permit or Authorization is required, the information in this survey will be used for issuance.

SECTION A – GENERAL INFORMATION

1. Company name, physical/mailling address, telephone number, fax number:

Company name	
Physical address	
Mailing address (if different)	
Telephone number	
Fax number	

2. Address of production of manufacturing facility, telephone number, fax number, and website if applicable:

Physical address	
Mailing address (if different)	
Telephone number	
Fax number	
Website	

3. Primary On-Site Contact - Name, title, telephone number and email of person authorized to represent this firm in official dealings with Spartanburg Water.

Name	
Title	
Phone numbers (office, cell)	
Email	

4. Alternative On-Site Contact - Name, title, telephone number and email of person authorized to represent this firm in official dealings with Spartanburg Water.

Name	
Title	
Phone numbers (office, cell)	
Email	

Requests for confidential treatment of information provided on this form shall be governed by procedures specified in 40 CFR Part 403, SCDHEC 61-9 Section 403.14, and Spartanburg Sanitary Sewer Use Rules and Regulations Section 1.3.14. In accordance with 40 CFR Part 403.14, information and data provided in this questionnaire that identifies the content, volume and frequency of the effluent wastewater discharge **cannot** be claimed as confidential and shall be available to the public without restriction.

PLEASE CHECK ONE (definitions of these conditions may be found in the application guidance):

- New Permit for Proposed Discharge
Anticipated Date of initial process wastewater discharge: _____
- Existing Unpermitted Discharge
- Permit Renewal for Existing SIU Permit or written authorizations from Spartanburg Water.
Does this application request a greater amount of wastewater discharge [flow], a greater amount of pollutant discharge or a discharge of different pollutants than specified in the last wastewater permit application for this facility, or any other significant changes? Yes No

Attached hereto and considered a part of this application are site plans and/or sketches showing the location of all connections from this facility to the Spartanburg Water sewer system.

Note to Signing Official: In accordance with Title 40 of the Code of Federal Regulations Part 403.14, information and data provided in this questionnaire which identifies the content, volume, and frequency of discharge shall be available to the public without restriction. Requests for confidential treatment of other Information shall be governed by procedures specified in 40 CFR Part 2.

This is to be signed by an authorized representative of your firm, as defined in 40 CFR Part 403.12 (l) and Spartanburg Sanitary Sewer Use Rules and Regulations (SSSURR) section 1.2.4 after adequate completion of this form and review of the information by the signing representative.

I, _____ (print name), 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 submitted is, to the best of my knowledge and belief, accurate and complete. I am an authorized representative of the user and am authorized to execute this certification on behalf of the user. I am aware that there are significant penalties for submitting false information in violation of this certification, including the possibility of fines and/or imprisonment.

Check one of the following: I also certify that I qualify for signatory authority, as set forth in 40 CFR Part 403.12 (l) based upon the following criteria (see Application Guidance for further explanation of these criteria).

1. a. 1. b. 2. 3. 4.

Date

Signature of Representative
(Seal, if applicable)

Title

Please return this survey to: Spartanburg Water – Industrial Pretreatment Program, P.O. Box 251, Spartanburg, SC 29304

5. Identify the general type of manufacturing, production and/or service(s) conducted at the site (i.e. electroplating, printing, painting, food processing, warehousing, meat packing, machine shop, etc.). Greater detail to be provided below.

6. Provide a detailed narrative description of the manufacturing/production process (es).

7. Are any process changes or expansions planned during the next five years? Yes No

If yes, describe the nature of the planned changes or expansions. As needed, answer questions based on current conditions as well as conditions after the changes or expansion.

8. List the Standard Industrial Classification Number(s) (SIC #) or North American Industry Classification System (NAICS) codes for your facility. If more than one code is listed, indicate the percentage of production.

SIC/NAICS code			
Percentage of production			

9. The production process is Batch Continuous
 If batch, please enter the average number of batches per 24 hours. []

If both, please enter %
 %] Batch %] Continuous

10. Is production subject to seasonal variation? Yes No

If yes, briefly describe the seasonal production cycles:

SECTION B – FACILITY OPERATION CHARACTERISTICS

Shift Production Information

List Shifts/Day. Complete the following information about the shifts worked at the facility.

Shifts are based on 8 hours Shifts are based on 12 hours Other

Office/Administrative Staff

<u>Work Day</u>	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
# Employees							
Start/End Time							

Production Staff

<u>Work Day</u>		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
List Shifts/Day								
# Employees	1 st Shift							
# Employees	2 nd Shift							
# Employees	3 rd Shift							
Start/End Time								
Start/End Time								
Start/End Time								

Shift Activities

WORK DAY	SHIFT	DESCRIPTION OF SHIFT ACTIVITIES
Monday	1 st Shift	
	2 nd Shift	
	3 rd Shift	
Tuesday	1 st Shift	
	2 nd Shift	
	3 rd Shift	
Wednesday	1 st Shift	
	2 nd Shift	
	3 rd Shift	
Thursday	1 st Shift	
	2 nd Shift	
	3 rd Shift	
Friday	1 st Shift	
	2 nd Shift	
	3 rd Shift	
Saturday	1 st Shift	
	2 nd Shift	
	3 rd Shift	
Sunday	1 st Shift	
	2 nd Shift	
	3 rd Shift	

SECTION C – PROCESS INFORMATION

NOTE: The following information must be completed for each product line. Please make copies of this page if necessary.

Information revealed in this section may be held confidential and proprietary under 40 CFR 403.14 at the request of the Industrial User and the approval of Spartanburg Water. **The request for confidentiality must be made at the time of the initial submission of the application.** Should such a request be made and accepted in compliance with Spartanburg Sanitary Sewer Use Rules and Regulations 1.3.14, these page(s) will be removed before review by any non-regulatory personnel. You may also place confidential information on a separate sheet of paper.

1. Principal product(s)(using common/brand names and/or the proper scientific name) produced:

2. Raw materials and process additives used:

3. Does your facility have floor drains to the sanitary sewer system in the manufacturing area of your facility?

Yes No

4. Does your facility have floor drains to the sanitary sewer system in ANY chemical storage area of your facility?

Yes No

5. **Permitted Industrial Users Only**

Does all industrial wastewater discharged from your facility flow through the current permitted monitoring location?

Yes No

If no, please detail below the identity of the non-monitored industrial wastewater(s), the approximate volume discharged each day, the discharge route of the non-monitored industrial wastewater. Remember to show location on site diagram.

SECTION D – WATER USE AND WASTEWATER DISCHARGE INFORMATION

1. Please indicate source(s) of water used at your facility:

Source Type	Check One
Well Water	<input type="checkbox"/> Yes <input type="checkbox"/> No
Spartanburg Water	<input type="checkbox"/> Yes <input type="checkbox"/> No
Metropolitan Sub-District B	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Agency	<input type="checkbox"/> Yes <input type="checkbox"/> No
Surface Water	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. List all Spartanburg water and/or sewer account numbers and the corresponding service addresses.

Account Number	Service Address

3. Does this facility provide any treatment to the incoming water to improve the water quality prior to its use in the process, (i.e. deionization, reverse osmosis, ultra filtration, etc.)? Yes No

Treatment Process	Chemicals Used	Volume of Wastewater Generated	Where Wastewater is discharged

4. This facility uses **water** for the following: (Please record "n/a" if the application/use does not apply to the operations at your facility.) See Guidance Document for further information.

Type of Application /Use	Detailed Description of Applicable Operation(s) and/or Equipment	Volume Used (gallons/day)		[E]stimated or [M]easured
		Average	Maximum	
Process				[] E [] M
Air-Pollution Control Unit (Please specify if used for general air conditioning or process related pollutants)				[] E [] M
Backwash Water				[] E [] M
Boilers (Please specify if live and/or dry steam is used.)				[] E [] M
Contact Cooling/Warming Water				[] E [] M
Equipment Washdown				[] E [] M
In-Product				[] E [] M
Lab				[] E [] M
Maintenance Shop				[] E [] M
Non-Contact Cooling/Warming Water (e.g. water circulated through jackets or piping; process where the water is kept from contacting the item/object)				[] E [] M
Pump Sealant Water				[] E [] M
Cafeteria/Kitchen/Breakroom				[] E [] M
Domestic (e.g. restroom(s) estimate = 30 gallons/person/shift)				[] E [] M
Other, please describe				[] E [] M
Total				

5. The facility generates **wastewater** from the following areas and that water is discharged where: [i.e. monitoring point (pipe 001, sample point, "process" versus "non-process," "process only" versus "combined"), sanitary sewer, storm water, waste haulers, lost through evaporation, ground, surface water, etc]. If the source of wastewater discharged does not exist at your facility record "n/a". If there is no discharge from the applicable source, record "no discharge".

Source of Wastewater	Wastewater is Discharged To Where	Pretreated?	Volume Discharged (gallons/day)		Estimated (E) or Measured (M)
			Average	Maximum	
Process		[] yes [] no			[] E [] M
Air-Pollution Control		[] yes [] no			[] E [] M
Backwash Water		[] yes [] no			[] E [] M

Source of Wastewater	Wastewater is Discharged To Where	Pretreated?	Volume Discharged (gallons/day)		Estimated (E) or Measured (M)
			Average	Maximum	
Boiler Blowdown		[] yes [] no			[] E [] M
Cafeteria/Breakroom		[] yes [] no			[] E [] M
Contact Cooling/Warming Water		[] yes [] no			[] E [] M
Cooling Tower Bleed Off		[] yes [] no			[] E [] M
Equipment Washdown		[] yes [] no			[] E [] M
Facility Washdown		[] yes [] no			[] E [] M
Lab		[] yes [] no			[] E [] M
Maintenance Shop		[] yes [] no			[] E [] M
Non-Contact Cooling/Warming Water		[] yes [] no			[] E [] M
Off Spec/Out of Date/ Customer Returned Product		[] yes [] no			[] E [] M
Pump Sealant Water		[] yes [] no			[] E [] M
Groundwater/ Remediated Groundwater		[] yes [] no			[] E [] M
Storm Water Runoff		[] yes [] no			[] E [] M
Tank Bottoms		[] yes [] no			[] E [] M
Domestic		[] yes [] no			[] E [] M
Other, please specify		[] yes [] no			[] E [] M
Total					

6. Describe existing wastewater flow measuring methods and/or equipment. For new industries, describe the proposed method or equipment used to measure wastewater flow.

7. List procedures employed to ensure the accuracy of flow measurement method/equipment (i.e. frequency of cleaning, calibration method, etc.). **Please attach a copy of most recent calibration certificate.**

Cleaning Frequency	
Company/contractor responsible for calibration	
Date of last calibration	

8. Indicate the meter's flow volume, pulse frequency and reporting units:

Flow volume	
Pulse frequency	
Reporting units	

9. **Existing Industries:** If you desire a limit increase for any parameter (including flow), please specify the parameter, current limit, proposed limit and an explanation for the increase.

Parameter	Current Limit	Proposed Limit	Explanation

10. Describe the sampling method and associated equipment utilized at the facility.

Sampling equipment/method:	
Sampling personnel:	
Training/credentials of sampling personnel:	

11. Does your facility have any plans to protect Spartanburg Water and/or sanitary sewer in the event of accidental spills, slugs, or other inappropriate discharges (i.e. Spill Prevention Control and Countermeasure Plan, Spill/Slug Control Plan, Toxic Organic Management Plan)? Yes No

If yes, please identify/list plans and describe measures in place to prevent direct introduction of a spill into the sewer. Note: Spartanburg Water may request copies of the identified plans.

Measures to protect Spartanburg sanitary sewer system	Plan name, page number(s)

12. Do any of your plans include notification to the Spartanburg Water in the event of a bypass or pretreatment facility upset? Yes No

If yes, identify plan(s) and page #.

Notification Method	Plan name, page number(s)

13. Do you have any **liquid** storage tank(s) at your facility? Yes No

If yes, complete the chart provided below. Please indicate the location of the tank(s) (inside/outside, above ground or underground), tank volume, contents of each tank and spill prevention and/or containment devices. Use codes listed in **Guidance Document** for spill prevention and/or containment devices. Please attach additional pages if necessary.

[!]inside or [O]outside	[A]bove or [B]elow Ground	Volume (in gallons)	Contents	A [P]rocess; [W]astewater treatment; [G]roundwater remediation;	Spill Prevention Code(s)	Tank Release Code(s)

14. Please attach a list of the boiler treatment additives as well as SDS (Safety Data Sheets) and dosage rates for each.
15. Please attach a list of the cooling tower treatment additives as well as SDS (Safety Data Sheets) and dosage rates for each.
16. Is the **wastewater** generated by this facility treated prior to discharge to Spartanburg Water? Yes No
 If yes, please complete the chart below. If a particular pretreatment unit only treats part of the wastewater, indicate this below and in the diagram required by Section G Flow Diagrams/Schematics & Site Layout.

Pretreatment Unit	[Y]es [N]o	Additional Information	Chemicals Used
Activated Carbon			
Air Stripping			
Biological Treatment		<input type="checkbox"/> Activated Sludge <input type="checkbox"/> Rotating Biological Contactor (RBC) <input type="checkbox"/> Trickling Filter <input type="checkbox"/> Sequencing Batch Reactor (SBR) <input type="checkbox"/> Other _____	
Chemical Precipitation			
Chlorination, or other disinfection (UV, ozonation)			
Cyanide Destruction			
Defoaming Agents			
Dissolved Air Floatation (DAF)		list all individual units of DAF here <input type="checkbox"/> equalization <input type="checkbox"/> pH adjustment <input type="checkbox"/> chemical precipitation <input type="checkbox"/> Other _____	
Flow equalization		<input type="checkbox"/> aerated <input type="checkbox"/> non-aerated	
Grease and Oil Removal for employee cafeteria, kitchen, breakroom, etc.		<input type="checkbox"/> Grease Trap, Size _____ <input type="checkbox"/> Oil Water Separator, Size _____ <input type="checkbox"/> Other _____	
Grease and Oil Removal for food manufacturing process wastewater		<input type="checkbox"/> Grease Trap, Size _____ <input type="checkbox"/> Oil Water Separator, Size _____ <input type="checkbox"/> Other _____	
Grease and Oil Removal for non-food manufacturing process wastewater		<input type="checkbox"/> Grease Trap, Size _____ <input type="checkbox"/> Oil Water Separator, Size _____ <input type="checkbox"/> Other _____	
Heat Reclamation/Exchange			
Ion Exchange (for wastewater treatment)			
Neutralization, pH adjustment			
Other Treatment			
Reverse Osmosis (for wastewater treatment)			
Septic Tank			
Silver Recovery			
Solids Separation, Clarification, Dewatering, Removal, etc.		<input type="checkbox"/> Belt Press <input type="checkbox"/> Centrifugation <input type="checkbox"/> Clarification <input type="checkbox"/> Cyclone <input type="checkbox"/> Filter Press <input type="checkbox"/> Filtration <input type="checkbox"/> Flocculation <input type="checkbox"/> Grit Removal <input type="checkbox"/> Microfiltration <input type="checkbox"/> Nanofiltration <input type="checkbox"/> Screening <input type="checkbox"/> Sedimentation <input type="checkbox"/> Septic Tank <input type="checkbox"/> Ultrafiltration <input type="checkbox"/> Other _____	
Solvent Separation			

Does the South Carolina Department of Health & Environmental Control require a certified operator be responsible for your pretreatment system as listed above? Yes No

If yes, what level of certification is required?

Biological	Physical / Chemical
A. <input type="checkbox"/> Yes	A. <input type="checkbox"/> Yes
B. <input type="checkbox"/> Yes	B. <input type="checkbox"/> Yes
C. <input type="checkbox"/> Yes	C. <input type="checkbox"/> Yes
D. <input type="checkbox"/> Yes	D. <input type="checkbox"/> Yes

Who is the person currently responsible for your pretreatment system?
 What is their certification number?

17. Has any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, please attach to this survey a copy of the lab report, chain of custodies and location of where the samples were taken for the most recent sampling date. **Do not attach analyses performed by Spartanburg Water or analytical data already delivered to Spartanburg Water.**

Questions 18 – 20 pertain to categorical users ONLY, non-categorical users may skip to Section E

18. Check any activities listed below that are performed (**manufactured**) at your facility:

Check Below	40 CFR #	Industrial Activity	Check Below	40 CFR #	Industrial Activity
	467	Aluminum Forming		432	Meat Products
	427	Asbestos Manufacturing		433	Metal Finishing
	461	Battery Manufacturing		464	Metal Molding & Casting (Foundries)
	431	Builders' Paper & Board Mills		438	Metal Products & Machinery
	407	Canned & Preserved Fruits & Veg.		436	Mineral Mining & Processing
	408	Canned & Preserved Seafood		471	Nonferrous Metal, Form & Powders
	458	Carbon Black Manufacturing		421	Nonferrous Metals Manufacturing
	411	Cement Manufacturing		414	OCPSF, Organic Chemicals, Plastics,
	434	Coal Mining			& Synthetic Fiber Manufacturing
	437	Centralized Waste Treatment		435	Oil & Gas Extraction
	465	Coil Coating		440	Ore Mining and Dressing
	468	Copper Forming		446	Paint Formulating
	405	Dairy Products Processing		443	Paving & Roofing Materials Mfg.
	469	Electrical, Electronic Components		455	Pesticide Manufacturing
	413	Electroplating		419	Petroleum Refining
	457	Explosives Manufacturing		439	Pharmaceutical Manufacturing
	412	Feedlots		422	Phosphate Manufacturing
	424	Ferroalloy Manufacturing		459	Photographic Supplies
	418	Fertilizer Manufacturing		463	Plastics Molding & Forming
	426	Glass Manufacturing		466	Porcelain Enameling
	406	Grain Mills		430	Pulp, Paper, & Paperboard
	454	Gum & Wood Chemicals Mfg.		428	Rubber Manufacturing
	460	Hospitals		417	Soap & Detergent Manufacturing
	441	Industrial Laundries		423	Steam Electric Power Generation
	447	Ink Formulating		409	Sugar Processing
	415	Inorganic Chemical Manufacturing		410	Textile Mills
	420	Iron & Steel Manufacturing		429	Timber Products Processing
	437	Landfill & Incinerators		442	Transportation Equipment Cleaning
	425	Leather Tanning & Finishing			Other:

19. Is there a discharge from any of the above checked categorical operations to Spartanburg Water? Yes No
 If yes, list subpart and specific operations if applicable.

Process operation name	40 CFR, subpart, operations, etc.	40 CFR New Source Date	Date of process initial start-up	Date(s) of major changes

20. List all dilution streams such as boiler blowdown, cooling tower bleed off, non-contact cooling/warming water, and storm water runoff, that flow through the current or proposed monitoring point.

SECTION E- OFFSITE WASTE DISPOSAL

1. Are any liquid wastes or sludges (i.e. acids, alkalis, heavy metal sludges, inks, dyes, oil, grease, organic compounds, paints, pesticides, plating wastes, pretreatment sludges, solvents, thinners, waste product, etc.) from this firm disposed of by means other than discharge to the sewer system? Yes No

If yes , please complete the following:

Nature of hauled Waste and date Last hauled	Waste hauler's name, EPA ID# and address	Treatment Facility's Name, EPA ID# and address	Disposal facility's Name, EPA ID# and address	Est. Gallons or Pounds per Year hauled off

2. Is this facility a small quantity, large quantity, or conditionally exempt Hazardous Waste Generator?
 Small Quantity Large Quantity Conditionally Exempt Not Applicable

List the facility's EPA Hazardous Waste Generator ID#:

SECTION F – OTHER PERMITS

1. List all environmental control permits currently managed for or by this facility. Examples: air, National Pollutant Discharge Elimination System (NPDES), Industrial User Permits (IUP), Resources Conservation and Recovery Act (RCRA), groundwater, storm water, general, non-discharge, and septic tank.

Permit Type	Permit Number	Issuing Agency

2. Does your facility complete a Toxic Release Inventory? [] Yes [] No

If yes, attach copy of most recent report.

SECTION G-- FLOW DIAGRAMS/SCHEMATICS AND SITE LAYOUT

The following diagrams and/or flow schematics are required as part of this application. The diagrams or flow schematics can be separate or combined, can be hand drawn and do not necessarily have to be drawn to scale. Submit each diagram on 8 ½ x 11 inch paper, if possible. If a larger size is needed, the diagram(s) should be no larger than 11 x 17 inches. **Examples are included in application guidance.**

PLANT SITE LAYOUT (REQUIRED)

The site layout locates each activity included in the schematic flow diagrams in a geographical setting. At a minimum the site layout should include the following:

- Building Outlines, Property Lines
- Water lines and meters
- Sewer Lines (including floor drains) and all connections to sewer, label lines as process and/or domestic
- Storm Drains
- Production Areas, Office Areas and Warehouse Areas
- Process wastewater lines leaving the facility
- Sewer taps
- Cooling Towers, Boilers
- Storage tanks
- Chemical Storage Areas
- Waste Storage Areas
- Pretreatment Areas
- Compliance Sampling and Flow Measurement Locations (potential locations for non-permitted industries)
- Single location where all industrial wastewater discharge can be monitored (for non-permitted industries, describe potential locations)
- Please note on site layout if generated wastewater requires pumping to reach sewer system

WASTEWATER PRETREATMENT SYSTEM FLOW DIAGRAM (IF APPLICABLE)

At a minimum, this schematic flow diagram should include the following:

- Flow schematic showing order of treatment units
 - Include all treatment process tanks
 - Identify the chemicals/additives in each tank/vessel
 - Identify tank volumes
 - Identify wastewater flows going into pretreatment, especially if some treated separately
- Each treatment process and waste stream should be labelled, named, or have a unique identifying number
- Piping and control Features
- Compliance sampling point

PRODUCTION/PROCESS SCHEMATIC FLOW DIAGRAM (REQUIRED)

The schematic flow diagram is a simple line drawing that illustrates the nature and flow of your plant's processes, placing particular emphasis on the processes that generate wastewater. It also includes any associated wastewater pre-treatment processes/systems. At a minimum, the schematic flow diagram should include the following:

- Each plant process that generates wastewater
 - Include all process steps and tanks (with volumes)
 - Identify the chemicals/raw materials used in each step/tank/vessel
- Each process and waste stream should be labelled, named, or have a unique identifying number
 - Include operation names used in any applicable categorical process
- Each process step related to the manufacturing/process but that does not actually contact the process (for example, water circulated through jackets or piping in a process operation where the water is kept from contacting the item/object)
- Discharge points for each process/waste stream (including non-monitored industrial wastewater)

SECTION H – PRIORITY, CONVENTIONAL, NON-CONVENTIONAL AND OTHER POLLUTANT INFORMATION

All chemicals require that TWO columns are checked. For all chemicals “Present at Facility” please specify the quantity present.

Chemical Name	Chemical Abstract Number [CAS#]	Present at Facility	Quantity Present	Absent at Facility	Present in Discharge to SPARTANBURG WATER	Absent in Discharge to SPARTANBURG WATER	Concentration in Discharge, (mg/l)
Acid Extractable Organic Compounds							
2-Chlorophenol	95-57-8						
2,4-Dichlorophenol	120-83-2						
2,4-Dimethylphenol	105-67-9						
2,4-Dinitrophenol	51-28-5						
2-Methyl-4,6-dinitrophenol	534-52-1						
4-Chloro-3-methylphenol	59-50-7						
2-Nitrophenol	88-75-5						
4-Nitrophenol	100-02-7						
Pentachlorophenol	87-86-5						
Phenol	108-95-2						
2,4,6-Trichlorophenol	88-06-2						
Base Neutral Organic Compounds							
1,2,4-Trichlorobenzene	120-82-1						
1,2-Dichlorobenzene	95-50-1						
1,2-Diphenylhydrazine	122-66-7						
1,3-Dichlorobenzene	541-73-1						
1,4-Dichlorobenzene	106-46-7						
2,4-Dinitrotoluene	121-14-2						
2,6-Dinitrotoluene	606-20-2						
2-Chloronaphthalene	91-58-7						
3,3-Dichlorobenzidine	91-94-1						
4-Bromophenyl phenyl ether	101-55-3						
4-Chlorophenyl phenyl ether	7005-72-3						
Acenaphthene	83-32-9						
Acenaphthylene	208-96-8						
Anthracene	120-12-7						
Benzidine	92-87-5						
Benzo (a) anthracene	56-55-3						
Benzo (a) pyrene	50-32-8						
Benzo (b) fluoranthene	205-99-2						
Benzo (ghi) perylene	191-24-2						
Benzo (k) fluoranthene	207-08-9						
Bis (2-chloroethoxy) methane	111-91-1						
Bis (2-chloroethyl) ether	111-44-4						
Bis (2-chloroisopropyl) ether	102-60-1						
Bis (2-ethylhexyl) phthalate [DEHP]	117-81-7						
Butyl benzyl phthalate [BBP]	85-68-7						
Chrysene	218-01-9						

All chemicals require that TWO columns are checked. For all chemicals "Present at Facility" please specify the quantity present.

Chemical Name	Chemical Abstract Number [CAS#]	Present at Facility	Quantity Present	Absent at Facility	Present in Discharge to SPARTANBURG WATER	Absent in Discharge to SPARTANBURG WATER	Concentration in Discharge, (mg/l)
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Base Neutral Organic Compounds (continued)

Di-n-butyl phthalate [DBP]	84-74-2						
Di-n-octyl phthalate [DOP]	117-84-0						
Dibenzo (a,h) anthracene	53-70-3						
Diethyl phthalate [DEP]	84-66-2						
Dimethyl phthalate [DMP]	131-11-3						
Fluoranthene	206-44-0						
Fluorene	86-73-7						
Hexachlorobenzene	118-74-1						
Hexachlorobutadiene	87-68-3						
Hexachlorocyclopentadiene	77-47-4						
Hexachloroethane	67-72-1						
Indeno (1,2,3-cd) pyrene	193-39-5						
Isophorone	78-59-1						
N-nitroso-di-n-propylamine	621-64-7						
N-nitrosodimethylamine	62-75-9						
N-nitrosodiphenylamine	86-30-6						
Naphthalene	91-20-3						
Nitrobenzene	98-95-3						
Phenanthrene	85-01-8						
Pyrene	129-00-0						

Metals

Aluminum							
Antimony	7440-36-0						
Arsenic	7440-38-2						
Beryllium	7440-41-7						
Cadmium	7440-43-9						
Chromium	7440-47-3						
Copper	7440-50-8						
Lead	7439-92-1						
Mercury	7439-97-6						
Molybdenum	7439-98-7						
Nickel	7440-02-0						
Selenium	7782-49-2						
Silver	7440-22-4						
Thallium	7440-28-0						
Zinc	7440-66-6						

Other Inorganic Pollutants

Barium	7440-39-3						
Chloride							
Cyanide	57-12-5						
Fluoride							

All chemicals require that TWO columns are checked. For all chemicals "Present at Facility" please specify the quantity present.

Chemical Name	Chemical Abstract Number [CAS#]	Present at Facility	Quantity Present	Absent at Facility	Present in Discharge to SPARTANBURG WATER	Absent in Discharge to SPARTANBURG WATER	Concentration in Discharge, (mg/l)
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Purgeable Volatile Organic Compounds [VOCs]

1,1,1-Trichloroethane	71-55-6						
1,1,2,2-Tetrachloroethane	79-34-5						
1,1,2-Trichloroethane	79-00-5						
1,1-Dichloroethane	75-34-3						
1,1-Dichloroethylene	75-35-4						
1,2-Dichloroethane	107-06-2						
1,2-Dichloropropane	78-87-5						
2-Chloroethyl vinyl ether	110-75-8						
Acrolein	107-02-8						
Acrylonitrile	107-13-1						
Benzene	71-43-2						
Bromodichloromethane	75-27-4						
Bromoform	75-25-2						
Bromomethane	74-83-9						
Carbon tetrachloride	56-23-5						
Chlorobenzene	108-90-7						
Chloroethane	75-00-3						
Chloroform	67-66-3						
Chloromethane	74-87-3						
Cis 1,3-Dichloropropene							
Dibromochloromethane	594-18-3						
Ethylbenzene	100-41-4						
Methylene chloride	75-09-2						
Tetrachloroethylene	127-18-4						
Toluene	108-88-3						
trans 1,3-Dichloropropene							
trans-1,2-Dichloroethylene	156-60-5						
Trichloroethylene	79-01-6						
Trichlorofluoromethane							
Vinyl chloride	75-01-4						

Other Pollutants of Concern

Xylene							
BOD							
TSS							
Ammonia							
Total Phosphorus							
Total Nitrogen							
Oil & Grease							
range of pH							
Gasoline/diesel							
Fuel oil							
Dyes/colorants							