SOUTHWEST LICKING COMMUNITY WATER & SEWER DISTRICT
P.O.Box 215 Etna, Ohio 43018
69 Zellers Lane Pataskala, Ohio 43062
Phone (740) 927-0410 Fax (740) 927-4700

PRETREATMENT SURVEY QUESTIONNAIRE

General Instructions: Please read these instructions and the questionnaire prior to completing this form. EVERY question should be answered completely. If a question does not apply to this facility, indicate "Not Applicable", "N/A". Use the most recent 12-month period as the information data base; if normal operations vary from this time period, note accordingly. Since this questionnaire was developed to cover a broad range, type, and size of commercial/industrial facilities, some questions may not be readily understandable; therefore, selected questions are given clarifying instructions. If you have any questions concerning this form, contact:

Mel Weaver, Water Reclamation Department Supervisor / Pretreatment Coordinator
Southwest Licking Community Water & Sewer District
P.O.Box 215, Etna, Ohio 43018
8720 Gale Road, Hebron, Ohio 43025
(740) 928-0823 / (740) 928-0821 fax

Once completed, sign and return this form.

SPECIFIC INSTRUCTIONS

Section I: General Information

1. - 5. Self Explanatory

Section II: Product or Service Information

1. Wastewater is any liquid wastes; sanitary, process, cooling, etc.

2. Standard Industrial Classification (SIC) codes are four (4) digit numbers used to classify business establishments by the type of activity in which they are engaged. It is important to correctly classify the facility. If the SIC codes are not known, give as complete a process description of the manufacturing/service activity at this facility as possible; SIC codes will be completed upon receipt of the questionnaire. If one (1) product/service is produced, but it incorporates several separate identifiable processes, list all appropriate SIC codes in order of importance.

3. Wherever possible, give the chemical constituents of these items; do not use trade names.

Section III: General Water / Wastewater Information

1. - 2. Self Explanatory

STOP! REVIEW THE QUESTIONNAIRE STATEMENT AND CONTINUE AS DIRECTED.

Section IV: Facility Operational Characteristics

1. A batch operation is one conducted in a single lot, while a continuous operation proceeds without interruption.

2. - 7. Self Explanatory

Section V: Water Use Information

1. Indicate the 12-month period covered. "Total Usage" should give the amount of water utilized by the facility in this time period. Specify Units Used and calculate the "Daily Average" using the same units.

2. Self Explanatory
3. Be specific when entering this information; if actual volumes are not known, estimate volumes and note accordingly. SPECIFY UNITS.

Section VI: Wastewater Information

1. - 2. Self Explanatory

3. Batch wastewaters are generated by a particular process, then totally discharged at one time.

4. - 5. Self Explanatory

6. Be specific when entering this information; if actual volumes are not known, estimate volumes and note accordingly. SPECIFIY UNITS.

7. Mark the boxes which characterize the facility's wastewater.

8. Priority pollutants, Table 1, are substances USEPA has determined to be acutely toxic. Indicate whether any of these pollutants are present on-site, used or discharged with the facility's wastewater; if discharged with the wastewater, follow the general statement at the bottom of the table.

STOP! REVIEW THE QUESTIONNAIRE STATEMENT AND CONTINUE AS DIRECTED.

Section VII: Pretreatment Information

1. Self Explanatory

2. Residuals are solid or liquid substances removed from wastewater via treatment processes prior to discharge to the sanitary sewer.

3. Self Explanatory

4. Baseline monitoring reports are required from specific industries regulated by federal categorical pretreatment standards.

Section VIII: Sewer Connection and Discharge Information

1. Self Explanatory

PRETREATMENT SURVEY QUESTIONNAIRE

I. GENERAL INFORMATION

1. Company Name: _____

2. Mailing Address: _____

_____

3. Facility Address: _____

_____

4. Name and Title of person to contact for information contained in this questionnaire: _____

_____

Phone Number / Extension: _____

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

Signature of Official	Title	Date

II. PRODUCT OR SERVICE INFORMATION

1. Brief description of manufacturing or service activity at this facility:

_____

_____

_____

2. Enter principle STANDARD INDUSTRIAL CLASSIFICATION (SIC) code for all processes or business activities and describe processes:

SIC Code Number	Brief Process Description

3. Product Information:
   a. List of products: _____

_____

   b. List of raw materials: _____

_____

   c. List of catalysts / intermediates: _____

_____

   d. List of by-products: _____

_____

(Attach Additional Sheets as Necessary)

III. GENERAL WATER / WASTEWATER INFORMATION

1. Does this facility discharge ANY wastewater to the District's sanitary sewer system? ☐ Yes ☐ No

2. Does this facility have a National Pollutant Discharge Elimination System (NPDES) permit(s)? ☐ Yes ☐ No

3. Does the permitted facility discharge ANY wastewater not covered by the NPDES permit(s)? ☐ Yes ☐ No

   If "yes", give details: _____

4. If answers to questions 1-3 are "no", describe the methods used to dispose of wastewaters and liquid wastes:

IF THE RESPONSE TO QUESTION 1 OF THIS SECTION IS "NO", COMPLETE SECTIONS I, II, AND III AND RETURN THIS FORM TO THE INDICATED ADDRESS. IF THE RESPONSE TO QUESTION 1 IS "YES", COMPLETE THE REST OF THIS FORM AND RETURN TO THE INDICATED ADDRESS.

IV. FACILITY OPERATIONAL CHARACTERISTICS

1. Type of Operation: ☐ Batch ☐ Continuous ☐ Both

   If "Batch", average number of batches in 24-hours: _____

2. Number of days per week of operation: _____

3. Number of hours per day of operation: _____

4. Shift Information:

	1st	2nd	3rd
Start Time:			
Number of Employees:			

5. Is there a scheduled shutdown? ☐ Yes ☐ No

   If "yes", indicate when: _____

6. Is production seasonal: ☐ Yes ☐ No

   If "yes" indicate periods of maximum production and products: _____

7. Is expansion planned within the next three (3) years? ☐ Yes ☐ No

If "yes", indicate: ☐ New Products ☐ Same Products Additional Capacity ☐ New Facility

V. WATER USE INFORMATION

1. Enter water use information below, noting yearly time period covered (month/year to month/year):

_____ to _____ and units (gallons, CF, etc.)

Source	Customer Account Number	Total Usage	Daily Average
City			
Well			
Surface			
Other:			

2. Does water use vary greatly during the production?

Year? ☐ Yes ☐ No

Week? ☐ Yes ☐ No

Day? ☐ Yes ☐ No

If "yes", describe periods of maximum and minimum use:

_____

_____

_____

_____

3. List water consumption within the facility:

Type	Estimated Average Volume (specify units)
Cooling Water	
Boiler Feed	
Process Water Contained in Product	
Sanitary	
Other (specify)	
Total	

4. Are corrosion or biological inhibiting chemicals added to facility water systems which are discharged to the sewer? ☐ Yes ☐ No

If "yes", indicate chemicals: _____

5. Are raw water treatment processes employed? ☐ Yes ☐ No

If "yes", list processes and method of residue disposal:

6. Are any water recycling or material reclaiming processes utilized? ☐ Yes ☐ No

If "yes", please describe:

VII. WASTEWATER INFORMATION

1. Are all wastewaters discharged to the sanitary sewer? ☐ Yes ☐ No

If "no", describe other wastewater disposal methods:

2. Is sanitary wastewater discharged separately from process wastewater? ☐ Yes ☐ No

3. If batch wastewater is discharged to the sewer, list batch discharge:

Frequency: _____

Volume: _____

Nature of batch waste: _____

4. Is an analysis of the wastewater available? ☐ Yes ☐ No

If "yes", attach a copy of the most recent analysis and describe sampling location. Include date, time of sampling, and type of discharge (total plant discharge, process waste only, etc.)

5. Is a sampling manhole or other access available to collect a wastewater sample? ☐ ☐

6. List average volume of discharge or water loss to:

Outlet	Estimated Average Discharge (specify units)
Sanitary Sewer	
Storm Water	
Surface Water	
Waste Hauler	
Evaporation	
Contained in Product	
Total	

7. Indicate below the general character of this facililty's wastewater:

	Sanitary Wastes Only		Flammable		Ethers
	Acids / Acidic		Organic Solvents		Aldehyedes / Keytones
	Alkalis / Caustic		Latex Materials		Organic Acids
	Pickling		Resins / Monomers		Soaps / Detergents
	Metal Cleaning		Waxes		Oils
	Metal Preparation		Inorganic Solids		Fats / Grease
	Plating / Electrocoating		(sand, gravel, etc.)		Hot Wastes
	Paints / Pigments		Phenolic		Radioactive
	Dyes / Inks		Alcohols		Other

8. Are any of the pollutants in Table 1 (attached) handled at this facility, used in product manufacture or a by-product which may be discharged to the sewer system? ☐ Yes ☐ No

If "yes", indicate these pollutants with a check mark.

IF THIS FACILITY DISCHARGES SANITARY WASTEWATER ONLY, COMPLETE SECTIONS I THROUGH VI AND RETURN THIS FORM TO THE INDICATED ADDRESS.

VII. PRETREATMENT INFORMATION

1. Are wastewaters treated prior to discharge to the sewer? ☐ Yes ☐ No

If "yes", describe treatment system:

_____

_____

_____

_____

2. Are any residuals generated from the pretreatment process? ☐ Yes ☐ No

If "yes", describe residuals:

_____

_____

_____

Indicate the quantity of residuals created (specify units): _____

Describe method of residue disposal:

_____

_____

_____

Is the residue considered a hazardous waste as defined by the Resource Conservation and Recovery Act? ☐ Yes ☐ No ☐ Undetermined

3. Is there a Spill Prevention, Control, and Containment Plan in effect for this facilily? ☐ Yes ☐ No

4. Has a Baseline Monitoring Report (required by 40 CFR 403.12) been submitted to the Ohio EPA or USEPA? ☐ Yes ☐ No

If "yes", did the District receive a copy? ☐ Yes ☐ No

VIII. SEWER CONNECTION AND DISCHARGE INFORMATION

1. Is the facility connected to the sanitary sewer system? ☐ Yes ☐ No

If "yes", list:

Number of facility sewer outlets: _____

Size (inches): _____

Flow (gallons per day): _____

Type of waste conveyed: _____

If "no", describe the method of wastewater disposal?

_____

_____

_____

_____

2. Attach a simple drawing showing a general process flow diagram and indicate in-plant sampling sites, treatment processes, wastewater flow outputs, service connections, etc.

TABLE 1: PRIORITY POLLUTANTS

IDENTIFY THOSE PRIORITY POLLUTANTS SUSPECTED OR KNOWN TO BE DISCHARGED IN THE FACILITY'S WASTEWATER WITH A CHECK MARK.

CHLORINATED ALKANES:

_____ Methyl Chloride
_____ Methylene Chloride
_____ Methyl Bromide
_____ Chloroform
_____ Bromoform
_____ Carbon Tetrachloride
_____ Dichlorobromomethane
_____ Trichlorofluoromethane*
_____ Dichlorodifluoromethane
_____ Chlorodibromomethane
_____ Chloroethane
_____ 1, 1-Dichloroethane
_____ 1, 2-Dichloroethane
_____ 1, 1, 1-Trichloroethane
_____ 1, 1, 2-Trichloroethane
_____ 1, 1, 2, 2-Tetrachloroethane
_____ Hexachloroethane
_____ 1, 1-Dichloroethylene
_____ 1, 2-Trans-dichloroethylene
_____ 1, 2-Dichloropropane
_____ 1, 2-Dichloropropylene
_____ Trichloroethylene
_____ Tetrachloroethylene
_____ Vinyl Chloride
_____ Hexachlorobutadiene
_____ Hexachlorocyclopentadiene

CHLORINATED AROMATICS:

_____ 1, 2, 4-Trichlorobenzene
_____ Chlorobenzene
_____ Hexachlorobenzene
_____ 2-Chloronaphthalene
_____ 1, 2-Dichlorobenzene
_____ 1, 3-Dichlorobenzene
_____ 1, 4-Dichlorobenzene

CHLORINATED ETHERS:

_____ Bis (Chloromethyl) Ether*
_____ 2-Chloroethyl Vinyl Ether
_____ 4-Bromophenyl Phenyl Ether
_____ Bis (2-Chloroethoxy) Methane
_____ Bis (2-Chloroethyl) Ether
_____ 4-Chlorophenyl Phenyl Ether
_____ Bis (2-Chloroisopropyl) Ether

AROMATICS:

Benzene _____
Toluene _____
Ethyl Benzene _____
Naphthalene _____
Fluoranthene _____
Acenaphthene _____
Benzo (a) Anthracene _____
Benzo (a) Pyrene _____
Chrysene _____
Indeno (1, 2, 3-c, d) Pyrene _____
3, 4-Benzofluranthene _____
Benzo (k) Fluoranthene _____
Acenaphthylene _____
Benzo (g, h, i) Perylene _____
Fluorene _____
Phenanthene _____
Dibenzo (a, h) Anthracene _____
Pyrene _____
Anthracene _____

PHTHALATE ESTERS:

Bis (2-ethylhexyl) Phthalate _____
Butyl Benzyl Phthalate _____
Di-n-butylphthalate _____
Di-n-octylphthalate _____
Diethylphthalate _____
Dimethylphthalate _____

PHENOLS:

Phenol _____
2-Chlorophenol _____
2, 4-Dichlorophenol _____
Pentachlorophenol _____
2-Nitrophenol _____
2, 4-Dimethylphenol _____
4-Nitrophenol _____
2, 4-Dinitrophenol _____
4, 6-Dinitro-ocresol _____
2, 4, 6-Trichlorophenol _____
Para-chloro-meta-cresol _____

*These pollutants have been removed from the priority list on January 8, 1981 (FR, Vol. 46, No. 5, p. 2266) and February 4, 1981 (FR, Vol. 46, No. 23, p. 10723)

TABLE 1: PRIORITY POLLUTANTS (continued)

IDENTIFY THOSE PRIORITY POLLUTANTS SUSPECTED OR KNOWN TO BE DISCHARGED IN THE FACILITY'S WASTEWATER WITH A CHECK MARK.

SUBSTITUTED AROMATICS:

_____ Nitrobenzene
_____ 2, 4-Dinitrotoluene
_____ 2, 6-Dinitrotoluene
_____ 2, 3, 7, 8-Tetrachlorodibenzo-p-dioxin
_____ Benzidine
_____ 3, 3-Dichlorobenzidine
_____ 1, 2-Diphenylhydrazine

POLYCHLORINATED BIPHENYLS

_____ PCB-1242
_____ PCB-1254
_____ PCB-1248
_____ PCB-1221
_____ PCB-1232
_____ PCB-1260
_____ PCB-1016

PESTICIDES:

_____ Aldrin
_____ Dieldrin
_____ Chlordane
_____ 4, 4-DDT
_____ 4, 4-DDE
_____ 4, 4-DDD
_____ Endosulfan-alpha
_____ Endosulfan-beta
_____ Endosulfan-sulfate
_____ Endrin
_____ Endrin Aldehyde
_____ Heptachlor
_____ Heptachlor Epoxide
_____ BHC-alpha
_____ BHC-beta
_____ BHC (lindane) - gamma
_____ BHC-delta
_____ Toxaphene

MISCELLANEOUS:

Acrolein _____
Acrylonitrile _____
Asbestos _____
Cyanide _____
Isophorone _____
N-nitrosodimethylamine _____
N-nitrosodiphenylamine _____
N-nitrosodi-n-propylamine _____

METALS:

Antimony _____
Arsenic _____
Beryllium _____
Cadmium _____
Chromium _____
Copper _____
Lead _____
Mercury _____
Nickel _____
Selenium _____
Silver _____
Thallium _____
Zinc _____