## NONDOMESTIC / INDUSTRIAL USER SURVEY FORM

## GENERAL INFORMATION

Corporate Name Plant	Name
Address-Street and Number	Address-Street and Number
City State Zip	City State Zip
Email Address	_
Name and Title of Person Completing Survey 1. Identify the type of business conducted (machi	Phone No.     Plant Phone No.       ne shop, metal finishing, etc.).
2. Provide a brief narrative description of the mar	ufacturing, production, or service, your firm conducts.
3. Standard Industrial Classification Number (SIC	Code) for your facility.

4. List type and quantity of chemicals used and discharged to sanitary sewer.

Material	Approx. quantities (lbs. or gal. stored on site)	Type of storage (55 gal. drum, steel tanks, etc.)

If you use trade name(s) or proprietary chemicals that do not list contents on the package, indicate the trade name(s) and manufacture's name at this time.

Are Material Safety Data Sheets available? Yes No

5. Please indicate the type and gallons per day (or the % of total flow) of water used and waste generated at this facility.

Waste	gal/day or %
Domestic waste (restrooms, etc.)	
Process	
Cooling water, non-contact	
Cooling water, contact	
Boiler/Tower blowdown	
Equipment/Facility washdown	
Air pollution control unit	
Storm water runoff to sanitary sewer	
Waste oil	
Waste solvent	
Other (describe)	

## 6. The above wastes are discharged to:

Discharge Location	gal/day or %
Sanitary sewer	
Storm sewer	
Surface water	
Ground water	
Waste hauler	
Evaporation	
Other (describe)	

## 7. Schedule of Operations:

- shfts/day\_\_\_\_\_ wks/yr \_\_\_\_\_ 

   a. Number of employees \_\_\_\_\_\_

   b. Hrs/day \_\_\_\_\_\_
   days/wk \_\_\_\_\_\_

Date

Signature of Responsible Official

Title