



## **INSTRUCTIONS for WASTEWATER DISCHARGE QUESTIONNAIRE**

**Industrial Pretreatment Department, 220 East Mountain View Street Suite A, Barstow, Ca. 92311**

Section 13.12.505 of the City of Barstow Pretreatment Ordinance No. 890-2012 and Part 403 of the Code of Federal Regulations (403.8(f)(2)), require the Industrial Pretreatment Program to notify, assess and monitor the operations and discharge practices of the City of Barstow Industrial / Commercial customers. This form must be completed and filed not later than thirty days after receipt of the form.

### **GENERAL INFORMATION:**

1. Please provide information requested on each line. "SIC" is an acronym for the Standard Industrial Classification that is a four-digit number used for statistical classification by the Federal government. If SIC is unknown to you, leave it blank. The Company name should be the name used in official business transactions.
2. Mailing address is the address that United States Mail is received.
3. Facility address is the local address for which this questionnaire is being submitted.
4. Many companies have more than one utility account; for the purpose of this questionnaire, only account(s) with water and sewer charges are necessary. The letters "W" and "S" denotes water and sewer accounts.
5. Company representative is the person responsible for completing this questionnaire. That individual must have the authority to certify the accuracy of any information provided in official documents on behalf of the company.

### **BUSINESS OPERATIONS:**

6. Please describe in detail the service or manufacturing process(es) that occur at your facility. Attach additional sheets, if necessary. Please check all appropriate activities conducted at this particular facility. If it does not appear among the listed choices, please identify the activity(ies) in the "other" category.
7. Questions 3, 4, 5, 6 and 7 request specific information regarding certain activities at this facility. If questions do not apply, answer with "N/A".
8. Please provide this information to the best of your knowledge.
9. If you are not sure of the water consumption at this location, an estimate is acceptable.
10. Does this facility treat any of its process waste streams, and if so what process or equipment is used? Examples of wastewater treatment processes are pH neutralization, ion exchange, and chemical precipitation.
11. This question deals with the number of employees at this company and the length of time they spend at work. Disregard the number of non-employees (customers, sales representatives, etc.) who may be present at this facility at any given time.



## WASTEWATER DISCHARGE QUESTIONNAIRE

2. Please check any of the following activities that are conducted at this facility:

- |                                                                      |                                                           |
|----------------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Boiler/ cooling system conditioning         | <input type="checkbox"/> Pesticide manufacturing          |
| <input type="checkbox"/> Battery manufacturing                       | <input type="checkbox"/> Pulp/paper processing            |
| <input type="checkbox"/> Deionizer regeneration                      | <input type="checkbox"/> Pharmaceutical manufacturing     |
| <input type="checkbox"/> Electroplating                              | <input type="checkbox"/> Photo developing/ processing     |
| <input type="checkbox"/> Electronic / electrical component mfg.      | <input type="checkbox"/> Petroleum refining/ plastics mfg |
| <input type="checkbox"/> Explosives, flammable mfg.                  | <input type="checkbox"/> Plastics processing              |
| <input type="checkbox"/> Food preparation services                   | <input type="checkbox"/> Paving/ roofing materials mfg.   |
| <input type="checkbox"/> Laboratory                                  | <input type="checkbox"/> Powder coating                   |
| <input type="checkbox"/> Laundry, dry cleaning                       | <input type="checkbox"/> Printing/ publishing             |
| <input type="checkbox"/> Leather tanning/ finishing                  | <input type="checkbox"/> Restaurant                       |
| <input type="checkbox"/> Research ( <i>please specify</i> ) _____    |                                                           |
| <input type="checkbox"/> Machine shop                                | <input type="checkbox"/> Rubber processing                |
| <input type="checkbox"/> Medical care                                | <input type="checkbox"/> Steam/ power generation          |
| <input type="checkbox"/> Meat processing                             | <input type="checkbox"/> Semiconductor manufacturing      |
| <input type="checkbox"/> Metal finishing (cleaning, anodizing, etc.) | <input type="checkbox"/> Soap/ detergent manufacturing    |
| <input type="checkbox"/> Metal molding/ casting                      | <input type="checkbox"/> Textile manufacturing            |
| <input type="checkbox"/> Nondestructive testing                      | <input type="checkbox"/> Timber products manufacturing    |
| <input type="checkbox"/> Organic / inorganic chemical mfg.           | <input type="checkbox"/> Vehicle repair/ maintenance      |
| <input type="checkbox"/> Painting, finishing, stripping              | <input type="checkbox"/> Water treatment                  |
| <input type="checkbox"/> Paint/Ink formulation                       | <input type="checkbox"/> Wood finishing                   |
| <input type="checkbox"/> Phosphate manufacturing                     | <input type="checkbox"/> X-ray services                   |
| <input type="checkbox"/> Other ( <i>specify</i> )                    | <input type="checkbox"/> Vehicle/Truck Washing            |

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3. Are any liquid wastes, sludge or other waste materials generated?

YES       NO       UNSURE

4. Are any of the wastes generated by this facility's processes, service, or manufacturing activities discharged to the Sanitary Sewer System?

YES       NO       UNSURE.

5. What is the discharge rate (if known) for the process (es) indicated?

Gallons per Day: \_\_\_\_\_

6. What chemicals are used in the indicated process (es)? Please provide the most current Safety Data Sheets (SDS) for all chemicals stored and used in the facility operations.

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7. Does this facility use any dip/hot/chemical tanks?

YES       NO.

If yes, how many: \_\_\_\_\_

Volume of each: \_\_\_\_\_

Chemicals used: \_\_\_\_\_

8. Are any floor and/or equipment drains connected to the Wastewater (sewer) system?

YES       NO       UNSURE

9. What is the average water use at this facility (if known): Gallons per Day: \_\_\_\_\_

10. Please describe any wastewater treatment process (es) or equipment in use at this facility:

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11. Number of shifts at this facility: \_\_\_\_\_

Average number of employees per shift: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

12. Are any of the following plans in effect at this facility?

RCRA plan to handle hazardous waste:  YES       NO       UNSURE

Spill prevention plan:  YES       NO       UNSURE

Closure plan:  YES       NO       UNSURE

Plan for handling solvents/ wastes:  YES       NO       UNSURE

13. Does your facility utilize a grease trap (inside tank) or grease interceptor (outside/in-ground):

Yes       No

If yes, what size (in gallons) is the trap/interceptor: \_\_\_\_\_

## WASTEWATER DISCHARGE QUESTIONNAIRE

Name of person to contact about this survey:

(Please Print): \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE:

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Any questions regarding this questionnaire can be answered by contacting the City of Barstow Industrial Pretreatment Department at (760) 252-3543 or via email to [tminnick@barstowca.org](mailto:tminnick@barstowca.org)

Please return completed questionnaire to:

**City of Barstow Industrial Pretreatment Department**  
**220 East Mountain View Street Suite A**  
**Barstow, CA 92311**

**Industrial Pretreatment Department Classification (Internal Use Only)**

Inspection Required		Wavier Letter		Class II (Industry) Permit	
YES	NO	YES	NO	YES	NO
DATE INSPECTED:		DATE ISSUED:		DATE ISSUED	
SIGNATURE:				PERMIT #	INITIALS: