



PAYSON CITY CORPORATION
 WASTEWATER TREATMENT PLANT
**INDUSTRIAL WASTEWATER
 PRETREATMENT QUESTIONNAIRE**

BUSINESS NAME:	PHONE:
BUSINESS ADDRESS:	MAILING ADDRESS:
BUSINESS OFFICIAL	CONTACT OFFICIAL
TYPE OR PRINT NAME:	TYPE OR PRINT NAME:
TYPE OR PRINT TITLE:	TYPE OR PRINT TITLE:
PHONE:	PHONE:
STANDARD INDUSTRIAL CLASSIFICATION CODE (SIC#):	NOTE: MATERIAL SAFETY DATA SHEETS (MSDS) SHALL BE FILED WITH THE CITY <u>BEFORE</u> OPERATIONS BEGIN.
BRIEFLY DESCRIBE MANUFACTURING OR SERVICE ACTIVITIES:	LIST PRINCIPAL RAW MATERIALS USED:
LIST TYPES OF CHEMICALS USED (INCLUDE ALL CLEANING SOLVENTS, SOAPS, ETC)	LIST THE PRINCIPAL PRODUCTS OR SERVICES OF THE BUSINESS:
TYPE OF DISCHARGE: <input type="checkbox"/> BATCH <input type="checkbox"/> CONTINUOUS IF BATCH, AVERAGE IN 24 HOURS _____ ARE THERE SCHEDULED SHUT DOWNS? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, WHEN:	IS PRODUCTION SEASONAL? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPLAIN:
RAW WATER SOURCES: PRIVATE WELLS: _____ GPD (GALLONS PER DAY) PAYSON CULINARY: _____ GPD OTHER (SPECIFY): _____ GPD	DESCRIBE WATER TREATMENT PROCESSES IN USE OR PROPOSED:
WATER CONSUMPTION IN FACILITY GPD. <input type="checkbox"/> COOLING <input type="checkbox"/> BOILER FEED <input type="checkbox"/> PROCESS <input type="checkbox"/> SANITARY <input type="checkbox"/> IN PRODUCTS <input type="checkbox"/> OTHER	
AVERAGE VOLUME IN GPD (GALLONS PER DAY) OF DISCHARGE OF WATER LOSS TO: <input type="checkbox"/> CITY SEWER <input type="checkbox"/> EVAPORATION <input type="checkbox"/> NATURAL OUTLET <input type="checkbox"/> WASTE HAULERS <input type="checkbox"/> IN PRODUCT <input type="checkbox"/> OTHER	
IS DISCHARGE TO PAYSON CITY SEWER SYSTEM: <input type="checkbox"/> YES <input type="checkbox"/> NO	IS THERE A SPILL PREVENTION PLAN IN EFFECT FOR THE FACILITY? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, IS DISCHARGE: <input type="checkbox"/> INTERMITTENT <input type="checkbox"/> STEADY	IF YES, PLEASE ATTACH A COPY.
ARE THERE FLOOR DRAINS IN THE FACILITY? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, WHERE ARE THEY LOCATED?	

I am familiar with the information contained in this questionnaire and swear that the information is true complete and accurate. If any of the answers to questions contained in the questionnaire change, the business will notify Payson City of the proposed change(s). Notification does not constitute approval of the proposal change(s).

 Signature of Official

 Date