

CLARK REGIONAL WASTEWATER DISTRICT

User Pretreatment Application

Wastewater Generating Characteristics and Chemical Usage

Date Received: _____

Complete Section A in full, either typed or printed clearly. Complete Section B only if necessary.

SECTION A – General Information

1. Company Name: _____
2. Division Name: _____
3. Physical address of the facility discharging wastewater:

4. Mailing Address: _____

5. Representative completing this form:
Name: _____
Title: _____ Telephone: _____
6. Brief description of business – principal products and services:

7. Number of employees: _____ Normal operating schedule: _____ hours/day _____ days/week _____
8. Is the building presently connected to public sewer system? YES NO
If yes, sewer account number: _____ If no, have you applied for a sewer hook-up? YES NO
9. Standard Industrial Classification Number (s) (SIC Code).

10. Do you or will you discharge oils, grease, or fats to the public sewer? YES NO
11. Is there or will there be an oil and grease trap in your sewer connection? YES NO
12. What is your normal frequency of cleaning the oil and grease trap? Where do you dispose of trapped oil and grease?

13. Have you ever been issued a local, state or federal environmental permit? YES NO
If yes, please list the permit(s): _____ Attach copies of current permit(s).
14. Do you or will you have chemical storage containers, bins or ponds at your facility? YES NO If yes, please attach a description of their location, contents size, type and frequency and method of cleaning. Indicate if buried metal containers have cathodic protection.
15. Do you or will you have floor drains in your manufacturing (MFR) or storage area? YES NO If you have chemical or floor drains in MFR area, could an accidental spill lead to a discharge to an on-site disposal system or public sewer system (e.g., through a floor drain)? YES NO
16. Do you or will you discharge wastewater (other than domestic waste from bathrooms, toilets, etc.) to an on-site disposal system? YES NO If yes, please attach a description of the discharge and on-site disposal system.
17. Do you or will you discharge wastewater (other than domestic waste from bathroom, toilets, etc.) to the public sewer system? YES NO If yes, please describe each discharge on the following pages.

If you answered yes to questions 15 or 17, please answer (all appropriate) questions on the following pages. If you answered no to both questions, no further information is required. Thank you for your cooperation.

CERTIFICATION STATEMENT:

I certify under penalty of law that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Date

Print Name

Title

**Return to: Clark Regional Wastewater District
Attn: Pretreatment Coordinator
PO Box 8979
Vancouver, WA 98668-8979**

SECTION B – Wastewater Information

1. Please describe process to be used in your facility that will result or may result in wastewater discharge to the public system.

2. This facility generates or will generate the following types of wastes (check all that apply):

- | | <u>Average Gallons Per Day</u> |
|--|--------------------------------|
| <input type="checkbox"/> Domestic wastes (restrooms, employee showers, etc.)
EPA suggests 15 gallons/day for each employee for estimated domestic waste | _____ |
| <input type="checkbox"/> Cooling water, non-contact | _____ |
| <input type="checkbox"/> Boiler/tower blowdown | _____ |
| <input type="checkbox"/> Cooling water, contact | _____ |
| <input type="checkbox"/> Process | _____ |
| <input type="checkbox"/> Equipment/facility wash-down | _____ |
| <input type="checkbox"/> Air pollution control unit | _____ |
| <input type="checkbox"/> Stormwater runoff to sewer | _____ |
| <input type="checkbox"/> Other (describe) | _____ |

Time and duration of discharge: _____

Total _____

3. Wastes are discharged or may be discharged to (check all that apply):

- | | <u>Average Gallons Per Day</u> |
|---|--------------------------------|
| <input type="checkbox"/> Sanitary sewer | _____ |
| <input type="checkbox"/> Storm sewer | _____ |
| <input type="checkbox"/> Surface water | _____ |
| <input type="checkbox"/> Ground water (on-site) | _____ |
| <input type="checkbox"/> Waste haulers | _____ |
| <input type="checkbox"/> Others (describe) | _____ |

Total _____

Provide name and address of waste hauler(s), if used.

Are the discharges batch or continuous .

4. List all principal materials regularly used in your facility that may be present in your wastewater discharge (such as cleaning agents, solvents, food processing waste, plating solutions, catalysts, milk wastes, ink, etc.). Identify chemical constituents, if known, or brand name. Attach material safety data sheets.

	<u>Generic Type</u>	<u>Amount Per Year</u>	<u>Chemical Constituents Or Brand Name</u>
Example:	Degreaser	3 gallons	Trichloroethylene
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____
f.	_____	_____	_____
g.	_____	_____	_____
h.	_____	_____	_____
i.	_____	_____	_____
j.	_____	_____	_____
k.	_____	_____	_____

(Attach additional sheets, if necessary)

5. Characteristics of wastewater:

- a. Temperature _____ Don't Know
- b. pH Level _____ Don't Know
- c. Flammable or explosive materials Yes No Don't Know
- d. Solid or viscous materials Yes No Don't Know
- e. Priority pollutants Yes No Don't Know If yes, please complete Attachment A.

6. If your facility employs processes in any of the industrial categories or business activities listed below and any of these processes generate or co-generate wastewater or waste sludge, place a check beside the category or business activity (check all that apply).

a. Industrial categories:

- | | |
|---|---|
| <input type="checkbox"/> Adhesives | <input type="checkbox"/> Aluminum forming |
| <input type="checkbox"/> Battery manufacturing | <input type="checkbox"/> Can making |
| <input type="checkbox"/> Coal mining | <input type="checkbox"/> Coil coating |
| <input type="checkbox"/> Copper forming | <input type="checkbox"/> Electric & electronic components |
| <input type="checkbox"/> Electroplating (If checked, please complete Attachment B) | <input type="checkbox"/> Explosives manufacturing |
| <input type="checkbox"/> Foundries | <input type="checkbox"/> Gum and wood chemicals |
| <input type="checkbox"/> Inorganic chemicals | <input type="checkbox"/> Iron and steel |
| <input type="checkbox"/> Leather tanning and finishing | <input type="checkbox"/> Mechanical products |
| <input type="checkbox"/> Metal finishing (If checked, please complete Attachment B) | <input type="checkbox"/> Non-Ferrous metals |
| <input type="checkbox"/> Ore mining | <input type="checkbox"/> Organic chemicals |
| <input type="checkbox"/> Paint and ink | <input type="checkbox"/> Pesticides |
| <input type="checkbox"/> Petroleum refining | <input type="checkbox"/> Pharmaceuticals |
| <input type="checkbox"/> Photographic supplies | <input type="checkbox"/> Plastic and synthetic materials |
| <input type="checkbox"/> Plastics processing | <input type="checkbox"/> Porcelain enamel |
| <input type="checkbox"/> Printing and publishing | <input type="checkbox"/> Pulp, paper and fiberboard |
| <input type="checkbox"/> Rubber | <input type="checkbox"/> Soaps and detergents |
| <input type="checkbox"/> Steam electric | <input type="checkbox"/> Textile mills |
| <input type="checkbox"/> Timber products (Wood preserving) | <input type="checkbox"/> Waste recycler |

b. Other business activity:

- | | |
|---|---|
| <input type="checkbox"/> Dairy products | <input type="checkbox"/> Slaughter/meat packing/rendering |
| <input type="checkbox"/> Food/edible products processor | <input type="checkbox"/> Beverage bottler |
| <input type="checkbox"/> Other _____ | |

7. Attach a simple schematic drawing (attachments shall be 11x17 or smaller) of your facility, indicating:

- Location and size of all service outlets, process drains, floor drains
- Existing sampling manholes or locations where samples may be collected
- Current or planned flow metering equipment
- Current or planned automatic sampling equipment
- Location of pretreatment processes, treated flows and untreated flows
- Location and name of pertinent streets
- Use flow schematic to indicate process and process discharge in gpd.

8. Pretreatment devices or processes used for treating wastewater or sludge (check as many as appropriate).

- | | |
|---|---|
| <input type="checkbox"/> Air flotation | <input type="checkbox"/> Centrifuge |
| <input type="checkbox"/> Chemical precipitation | <input type="checkbox"/> Chlorination |
| <input type="checkbox"/> Cyclone | <input type="checkbox"/> Filtration |
| <input type="checkbox"/> Flow equalization | <input type="checkbox"/> Grease or oil separation, Type _____ |
| <input type="checkbox"/> Grease trap | <input type="checkbox"/> Grinding filter |
| <input type="checkbox"/> Grit removal | <input type="checkbox"/> Ion exchange |
| <input type="checkbox"/> Neutralization, pH correction | <input type="checkbox"/> Ozonation |
| <input type="checkbox"/> Reverse osmosis | <input type="checkbox"/> Screen |
| <input type="checkbox"/> Sedimentation | <input type="checkbox"/> Septic tank |
| <input type="checkbox"/> Solvent separation | <input type="checkbox"/> Spill protection |
| <input type="checkbox"/> Sump | <input type="checkbox"/> B |
| <input type="checkbox"/> Biological treatment, Type _____ | |
| <input type="checkbox"/> Rainwater diversion or storage, Type _____ | |
| <input type="checkbox"/> Other chemical treatment, Type _____ | |
| <input type="checkbox"/> Other physical treatment, Type _____ | |
| <input type="checkbox"/> Other, Type _____ | |
| <input type="checkbox"/> No pretreatment provided | |

9. Attach a wastewater analysis that has been performed on the wastewater discharge(s) from your facilities in the last year. Attach a copy of the most recent data to this questionnaire. Be sure to include the date of the analysis, name of laboratory performing the analysis, and location(s) from which sample(s) were taken (attach sketches, plans, etc., as necessary). Include analyses of all materials listed in Parts 4 and 5.

10. Is industry in compliance with District Industrial Pretreatment Resolution? Yes No Don't Know

11. Is industry in compliance with Federal Categorical Standards? Yes No Don't Know

12. Is additional pretreatment required? Yes No If yes, describe necessary treatment.

13. Products produced (Attach additional sheets as necessary):

<u>Type</u>	<u>Amount & Rate of Production</u>	<u>Process</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

14. Is an inspection and sampling manhole or structure available on-site? Yes No If yes, attach a description and schematic drawing.

15. Are any liquid wastes or sludges from this firm disposed of by means other than discharge to the sanitary sewer system? Yes No If yes, complete items 11 and 12; If no, skip items 11 and 12.

16. These wastes may best be described as:

	<u>Estimated Gallons or Pounds Per Year</u>
<input type="checkbox"/> Acids and alkalies	_____
<input type="checkbox"/> Heavy metal sludge	_____
<input type="checkbox"/> Inks/dyes	_____
<input type="checkbox"/> Oils and/or grease	_____
<input type="checkbox"/> Organic compounds	_____
<input type="checkbox"/> Paints	_____
<input type="checkbox"/> Pesticides	_____
<input type="checkbox"/> Plating wastes	_____
<input type="checkbox"/> Pretreatment sludges	_____
<input type="checkbox"/> Solvents/thinners	_____
<input type="checkbox"/> Other hazardous wastes (Specify)	_____
_____	_____
_____	_____
<input type="checkbox"/> Other wastes (Specify)	_____
_____	_____
_____	_____

17. For the above-checked wastes, does your company practice:

- On-site storage
- Off-site storage
- On-site disposal
- Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

18. Are any process changes or expansions planned during the next three years? Yes No If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

19. Do you have an accidental spill program for the facility? Yes No If yes, attach plans.

20. Please describe previous spill events and remedial measures taken to prevent their reoccurrence:

21. Comments: _____

Please sign at the bottom of page 1. Thank you for your cooperation.

ATTACHMENT A

Priority Pollutant Information

1. Please indicate by placing an "X" in the appropriate space by each listed chemical whether it is *Suspected to be Absent*, *Known to be Absent*, *Suspected to be Present* or *Known to be Present* in your manufacturing service activity or generated as a by-product. Some compounds are known by other names. Please refer to the Priority Pollutant Synonym Listing for these compounds which have an asterisk (*).

Item No.	Chemical Compound	Suspected Absent	Known Absent	Suspected Present	Known Present
1.	Ammonia				
2.	Asbestos (fibrous)				
3.	Cyanide (total)				
4.	Antimony (total)				
5.	Arsenic (total)				
6.	Beryllium (total)				
7.	Cadmium (total)				
8.	Chromium (total)				
9.	Copper (total)				
10.	Lead (total)				
11.	Mercury (total)				
12.	Nickel (total)				
13.	Selenium (total)				
14.	Silver (total)				
15.	Thallium (total)				
16.	Zinc (total)				
17.	Acenaphthene				
18.	Acenaphthylene				
19.	Acrolein				
20.	Acrylonitrile				
21.	Aldrin				
22.	Anthracene				
23.	Benzene				
24.	Benzidene				
25.	Benzo(a)anthracene*				
26.	Benzo(a)pyrene*				
27.	Benzo(b)fluoranthene				
28.	Benzo(g,h,i)perylene*				
29.	Benzo(k)fluoranthene*				
30.	a-BHC(alpha)				
31.	b-BHC(beta)				
32.	d-BHC(delta)				
33.	g-BHC(gamma)				
34.	Bis(2-chloroethyl)ether*				
35.	Bis(2-chloroethoxy)methane*				
36.	Bis(s-chloroisopropyl)ether*				
37.	Bis(chloromethyl)ether*				
38.	Bis(2-ethylhexyl)phthalate*				
39.	Bromodichloromethane*				
40.	Bromoform*				
41.	Bromomethane*				
42.	4-bromophenylphenyl ether				
43.	Butylbenzyl phthalate				
44.	Carbon tetrachloride*				
45.	Chlordane				
46.	4-chloro-3-methylphenol*				
47.	Chlorobenzene				
48.	Chloroethane				
49.	2-chloroethylvinyl ether				
50.	Chloroform*				
51.	Chloromethane*				
52.	2-chloronaphthalene				
53.	2-chlorophenol*				
54.	4-chlorophenylphenyl ether				
55.	Chrysene*				
56.	4,4'-DDD*				
57.	4,4'-DDE*				
58.	4,4'-DDT*				

Item No.	Chemical Compound	Suspected Absent	Known Absent	Suspected Present	Known Present
59.	Dibenzo(a,h)anthracene*				
60.	Dibromochloromethane*				
61.	1,2-dichlorobenzene*				
62.	1,3-dichlorobenzene*				
63.	1,4-dichlorobenzene*				
64.	3,3-dichlorobenzidine				
65.	Dichlorodifluoromethane*				
66.	1,1-dichloroethane*				
67.	1,2-dichloroethane*				
68.	1,1-dichloroethene*				
69.	Trans-1,2-dichloroethene*				
70.	2,4-dichlorophenol				
71.	1,2-dichloropropane*				
72.	(cis & trans)1,3-dichloropropene*				
73.	Dieldrin				
74.	Diethyl phthalate*				
75.	2,4-dimethylphenol*				
76.	Dimethyl phthalate				
77.	di-n-butyl phthalate				
78.	di-n-octyl phthalate*				
79.	4,6-dinitro-2-methylphenol*				
80.	2,4-dinitrophenol				
81.	2,4-dinitrotoluene				
82.	2,6-dinitrotoluene				
83.	1,2-diphenylhydrazine				
84.	Endosulfan I*				
85.	Endosulfan II*				
86.	Endosulfan sulfate				
87.	Endrin				
88.	Endrin aldehyde				
89.	Ethylbenzene				
90.	Fluoranthene				
91.	Fluorine*				
92.	Heptachlor				
93.	Heptachlor epoxide				
94.	Hexachlorobenzene*				
95.	Hexachlorobutadiene				
96.	Hexachlorocyclopentadiene*				
97.	Hexachloroethane*				
98.	Indeno (1,2,3-cd)pyrene*				
99.	Isophorone*				
100.	Methylene chloride*				
101.	Naphthalene				
102.	Nitrobenzene				
103.	2-nitrophenol*				
104.	4-nitrophenol*				
105.	n-nitrosodimethylamine*				
106.	n-nitrosodipropylamine*				
107.	n-nitrosodiphenylamine*				
108.	PCB-1016*				
109.	PCB-1221*				
110.	PCB-1232*				
111.	PCB-1242*				
112.	PCB-1248*				
113.	PCB-1254*				
114.	PCB-1260*				
115.	Pentachlorophenol				
116.	Phenanthrene				
117.	Phenol				
118.	Pyrene				
119.	2,3,7,8-tetrachlorodibenzo-p-dioxin*				
120.	1,1,2,2-tetrachloroethane*				
121.	Tetrachloroethene*				
122.	Toluene*				
123.	Toxaphene				
124.	1,2,4-trichlorobenzene				

Item No.	Chemical Compound	Suspected Absent	Known Absent	Suspected Present	Known Present
125.	1,1,1-trichloroethane*				
126.	1,1,2-trichloroethane*				
127.	Trichloroethene*				
128.	Trichlorofluoromethane*				
129.	2,4,6-trichlorophenol				
130.	Vinyl chloride*				

2. For chemical compounds in 1. above which are indicated to be "Known Present", please list and provide the following data for each:

<u>Item No.</u>	<u>Chemical Compound</u>	<u>Estimated Annual Usage (1b)</u>	<u>Loss to Sewer (1b/yr)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHEMICAL COMPOUNDS

BENZO (A) ANTHRACENE
 BENZO (A) PYRENE
 BENZO (G,H,I) PERYLENE
 G-BHC(GAMMA)
 BIS (2-CHLOROETHYL)ETHER
 BIS (2-CHLOROETHOXY)METHANE
 BIS(2-CHLOROISOPROPYL)ETHER
 BIS(CHLORMETHYL)ETHER
 BIS (2- ETHLYHEXYL)PHTHALATE
 BROMODICHLOROMETHANE
 BROMOFORM
 BROMOMETHANE
 CARBON TETRACHLORIDE
 4-CHLORO-2-METHYLPHENOL
 CHLOROETHANE
 CHLOROFORM
 CHLOROMETHANE
 2-CHLOROPHENOL
 CHRYSENE
 4,4-DDD

 4,4-DDE

 4,4 – DDT
 DEBENZO (A,H)ANTHRACENE
 DIBROMOCHLOROMETHANE
 1,2-DICHLOROBENZENE
 1,3-DICHLOROBENZENE
 1,4-DICHLOROBENZENA
 DICHLORODIFLUOROMETHANE

 1,1-DICHLOROETHANE
 1,2-DICHLOROETHANE

 1,1-DICHLOROETHENE
 (TRANS)-1,2-DICHLOROETHENE

 1,2-DICHLOPROPANE
 (CIS & TRANS)1,3-DICHLOROPROPENE
 DIETHYL PHTHALATE
 2,4-DIMETHYLPHENOL

SYNONYM

1, 2-BENZATHACEM
 2,3- BENZPHENANTHRENE
 3,4 – BENZOPYRENE
 1,12—BENZOPERYLANE
 LINDANE
 2,2-DICHLOROETHYL ETHER
 2,2- DICHLOROETHYOXY
 2,2- DICHLOROISOPROPL ETHER
 (SYM)DICHLOROMETHYL ETHER
 2,2-DIETHYLHEXYL PHTHALATE
 DICHLOROBROMAOETHANE
 TRIBROMOMETHANE
 METHYL BROMIDE
 TETRACHLOROMETHANA
 ORTHO-CHLORO-META-CRESOL
 ETHYLCHLORIDE
 TRICHLOROMETHANE
 METHYL-CHLORIDE
 ORTHO-CHLOROPHENOL
 1,2-BENZPHENANTHRENE
 DICHLORODIPHENYLDICHLOROETHANE
 P,P-TDE
 TETRACHLORODIPHENYLETHANE
 P,P – DDX
 DICHLORODIPHENYLTRICHLOROETHANE
 1,2,5,6-DIBENZANTHRACENE
 CHLORODIBRAMOMENTHANE
 ORTHO-DICHLOROBENZENE
 META-DICHLOROBENZENA
 PARA-DICHLOROBENZENE
 DIFLUORODICHLORAMETHANE
 FLUOROCARBON-12
 ETHLIDENE CHLORIDE
 ETHYLENE CHLORIDE
 ETHLENE DICHLORIDE
 1,1-DICHLOROETHYLENE
 ACETYLENE DICHLORIDE
 1,2(TRANS)-DICHLOROETHYLENE
 PROPYLENE DICHLORIDE

 ETHYL PHTHALATE
 2,4-XYLENOL

CHEMICAL COMPOUNDS

DI-N-OCTYL PHTHALATE
 4, 6- DINITRO- 2 – METHLPHENOL
 1,2 – DIPHENYLHYDRAZINE
 ENDOSULFAN I
 ENDOSULFAN I
 ENDOSULFAN II
 FLUORENE
 HEXCHLOROBENZENE
 HEXACHLOROCYCLOPENTADIENE
 HEXACHLOROETHANE
 INDENO (1,3,3-CD)PYRENE
 ISOPHORONE
 METHYLENE CHLORIDE
 2-NITROPHENOL
 4-NITROPHENOL
 N-NITROSODIMETHYLAMINE
 N-NITROSODIPROPYLAMINE
 N-NITROSODIPHENLAMINE
 PCB-1016
 PCB-1221
 PCB-1232
 PCB-1,242
 PCB-1248
 PCB-1254
 BCB-1260
 2,3,7,8-TETRACHLORODIBENZO-
 P-DIOXIN
 1,1,2,2-TETRACHLORETHANE
 TETRACHLOROETHENE

 TOLUENE

 1,1,1-TRICHLOROETHANE
 1,1,2-TRICHLOROETHANE
 TRICHLOROETHENE
 TRICHLOROFLUOROMETHANE

 VINYL CHLORIDE

SYNONYM

DI- (2-ETHYLHEXY) PHTHALATE
 4,6 – DINITRO-ORTHO-CRESOL
 HYDRAZOBENZENE
 A-ENDOSULFAN-ALPHA
 A-ENDOSULFAN-ALPHA
 B-ENDOSULFAN-BETA
 (ALPHA)- DIPHENYLANE METHANE
 PERCHLOROBENZENE
 PERCHLOROCYCLOPENTADIENE
 PERCHLOROETHANE
 2,3-ORTHO-PHENYLENE PYRENE
 3,5,5-TRIMETHYL-2-CYCLOHEXEN1ONE
 DICHLOROMETHANE
 ORTHO-NITROPHENOL
 PARA-NITROPHENOL
 DIMETHYL-NITROSOAMINE
 N-NITROSO-DI-N-PROPYLAMINE
 DIPHENL-NITROSOAMINE
 AROCHLOR-1016
 AROCHLOR-1221
 AROCHLOR-1232
 AROCHLOR-1242
 AROCHLOR-1248
 AROCHLOR-1254
 AROCHLOR-1260

 TCDD
 ACETYLENE TETRACHLORIDE
 PERCHLOROETHYLENE
 TETRACHLOROETHYLENE
 METHLBENZENE
 TOLUOL
 METHLY CHLOROFORM
 VINYL TRICHLORIDE
 TRICHLOROEHYLENE
 FLUOROCARBON-11
 FLUOROTRICHLOROMETHANE
 CHLOROETHENE
 CHLOROETHYLENE

ATTACHMENT B

Electroplating and Metal Finishing Subcategories

Place a check beside all activities that apply to your business:

- Electroplating
- Electroless Plating
- Anodizing
- Conversion Coating
- Etching (Chemical milling)
- Printed Circuit Board Manufacturing
- Cleaning'
- Machining
- Grinding
- Polishing
- Barrel Finishing (tumbling)
- Burnishing
- Impact Deformation
- Pressure Deformation
- Shearing
- Heat Treating
- Thermal Cutting
- Welding
- Brazing
- Soldering
- Flame Spraying
- Sand Blasting
- Other Abrasive Jet Machining
- Electric Discharge Machining
- Electrochemical Machining
- Electron Beam Machining
- Laser Beam Machining
- Plasma Arc Machining
- Ultrasonic Machining
- Sintering
- Lamination
- Hot Dip Plating
- Sputtering
- Vapor Plating
- Thermal Infusion
- Salt Bath Descaling
- Solvent Degreasing
- Paint Stripping
- Painting
- Electrostatic Painting
- Electropainting
- Vacuum metalizing
- Assembly
- Calibration
- Testing
- Mechanical Plating