



CITY OF MARYVILLE
WATER QUALITY CONTROL
MARYVILLE, TENNESSEE

WASTEWATER SURVEY FOR NONRESIDENTIAL
ESTABLISHMENTS/APPLICATION FOR WASTEWATER
DISCHARGE PERMITS

SECTION A- GENERAL INFORMATION

- A.1 Company name, mailing address, and telephone number:
- A.2 Address of production or manufacturing facility. If same as above, check (___).
- A.3 Name, title and telephone number of person authorized to represent this firm in official dealings with the Sewer Authority and/or City:
- A.4 Alternate person to contact concerning information provided herein:
- A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, meat packing, food processing, etc.)

Note to Signing Official: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provided in this questionnaire which identifies the nature and frequency of discharge shall be available to the public without restriction. Requests for confidential treatment or other information shall be governed by procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in the questionnaire will be used to issue the permit.

This is to be signed by an authorized official of your firm after adequate completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein. I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/ or imprisonment.

_____ Date

_____ Signature of Official
(Seal if applicable)

Provide a brief narrative description of the manufacturing, production, or service activities your firm conducts.

A.7 Standard Industrial Classification Number(s) (SIC Code) for your facilities:

A.8 This facility generates the following types of wastes (check all that apply):

		<u>Average Gallons</u>			
		<u>Per Day</u>			
1	<input type="checkbox"/> Domestic wastes	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
2	<input type="checkbox"/> Cooling water, non-contact measured	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
3	<input type="checkbox"/> Boiler/tower blow-down	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
4	<input type="checkbox"/> Cooling water, contact	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
5	<input type="checkbox"/> Process	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
6	<input type="checkbox"/> Equip./Facility wash down	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
7	<input type="checkbox"/> Air Pollution Control Unit	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
8	<input type="checkbox"/> Storm water runoff to sewer	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
9	<input type="checkbox"/> Other (describe)	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> Measured	
Total A.8.1-A.8.9		_____			

A.9 Wastes are discharged to (check all that apply):

		<u>Average Gallons</u>			
		<u>Per Day</u>			
1	<input type="checkbox"/> Sanitary Sewer	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
2	<input type="checkbox"/> Storm Sewer	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
3	<input type="checkbox"/> Surface Water	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
4	<input type="checkbox"/> Ground Water	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
5	<input type="checkbox"/> Septage Transporter	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
6	<input type="checkbox"/> Evaporation	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	
7	<input type="checkbox"/> Other (describe)	_____	<input type="checkbox"/> estimated	<input type="checkbox"/> measured	

Provide name and address of septage transporter(s), if used.

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

Yes No

NOTE: If your facility did not check one or more of the items listed in A.8.4 through A.8.9 above, then you do not need to complete any further sections in this survey/application. If any items A.8.4 through A.8.9 were checked, complete the remainder of this survey/application.

SECTION B-FACILITY OPERATION CHARACTERISTICS

B.1 Number of employee shifts worked per 24-hour day is _____
Average number of employees per shift is _____

B.2 Starting times of each shift: 1st _____ am _____ pm 2nd _____ pm 3rd _____ pm _____ am

NOTE: The following information in this Section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw Materials and process additives used: _____

B.5 Production process is:
 Batch Continuous Both _____ %Batch _____ %Continuous
Average number of batches per 24-hour day _____

B.6 Hours of operation: _____ am to _____ pm Continuous

B.7 Is production subject to seasonal variation? Yes No
If yes, briefly describe seasonal production cycle:

B.8 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.

SECTION C- WASTEWATER INFORMATION

C.1 If your facility employs processes in any of the 34 industrial categories or business activities listed below and any of these processes generate wastewater or sludge, place a check beside the category or business activity (check all that apply).

1. 34 Industrial Categories

- 1 () Adhesives
- 2 () Aluminum Forming
- 3 () Auto & Other Laundries
- 4 () Battery Manufacturing
- 5 () Coal Mining
- 6 () Coil Coating
- 7 () Copper Forming
- 8 () Electric & Electronic Components
- 9 () Electroplating
- 10 () Explosives Manufacturing
- 11 () Foundries
- 12 () Gum & Wood Chemicals
- 13 () Inorganic Chemicals
- 14 () Iron & Steel
- 15 () Leather Tanning & Finishing
- 16 () Mechanical Products
- 17 () Nonferrous Metals
- 18 () Ore Mining
- 19 () Organic Chemicals
- 20 () Paint & Ink
- 21 () Pesticides
- 22 () Petroleum Refining
- 23 () Pharmaceuticals
- 24 () Photographic Supplies
- 25 () Plastic & Synthetic Materials
- 26 () Plastics Processing
- 27 () Porcelain Enamel
- 28 () Printing & Publishing
- 29 () Pulp & Paper
- 30 () Rubber
- 31 () Soaps & Detergents
- 32 () Steam Electric
- 33 () Textile Mills
- 34 () Timber

2. Other Activity:

- () Dairy Products
- () Slaughter/Meat Packing/Rendering
- () Food/Edible Products Processor
- () Beverage Bottler

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

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

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, 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 samples(s) were taken (attach sketches, plans, etc., as necessary).

C.4 PRIORITY POLLUTANT INFORMATION:

Please indicate by placing an "x" in the appropriate box 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 or service activity or generated as a by-product.

COMPOUND CHEMICALS	Known Present	Suspected Present	Known Absent	Suspected Absent	Known/Suspected Concentration Level
I. METALS & ORGANICS					
1. Antimony	()	()	()	()	_____
2. Arsenic	()	()	()	()	_____
3. Asbestos	()	()	()	()	_____
4. Beryllium	()	()	()	()	_____
5. Cadmium	()	()	()	()	_____
6. Chromium	()	()	()	()	_____
7. Copper	()	()	()	()	_____
8. Cyanide	()	()	()	()	_____
9. Lead	()	()	()	()	_____
10. Mercury	()	()	()	()	_____
11. Nickel	()	()	()	()	_____
12. Selenium	()	()	()	()	_____
13. Silver	()	()	()	()	_____
14. Thallium	()	()	()	()	_____
15. Zinc	()	()	()	()	_____
II. PHENOLS & CRESOLS					
16. Phenol(s)	()	()	()	()	_____
17. Phenol, 2 Chloro	()	()	()	()	_____
18. Phenol, 2,4-dichloro	()	()	()	()	_____
19. Phenol, 2,4,6-trichloro	()	()	()	()	_____
20. Phenol, pentachloro	()	()	()	()	_____
21. Phenol,2-nitro	()	()	()	()	_____
22. Phenol, 4-nitro	()	()	()	()	_____
23. Phenol, 2,4,-dinitro	()	()	()	()	_____
24. Phenol, 2,4,-dimethyl	()	()	()	()	_____
25. M-Cresol, p-chloro	()	()	()	()	_____
26. O-Cresol, 4,6-dinitro	()	()	()	()	_____

COMPOUND CHEMICALS	Known Present	Suspected Present	Known Absent	Suspected Absent	Known/Suspected Concentration Level
III. MONOCYCLIC AROMATICS (EXCLUDING PHENOLS, CRESOLS AND PHTHALATES)					
27. Benzene	()	()	()	()	_____
28. Benzene, chloro	()	()	()	()	_____
29. Benzene, 1,2-dichloro	()	()	()	()	_____
30. Benzene, 1,3-dichloro	()	()	()	()	_____
31. Benzene, 1,4-dichloro	()	()	()	()	_____
32. Benzene, 1,2,4-trichloro	()	()	()	()	_____
33. Benzene, hexachloro	()	()	()	()	_____
34. Benzene, ethyl	()	()	()	()	_____
35. Benzene, nitro	()	()	()	()	_____
36. Toluene	()	()	()	()	_____
37. Toluene, 2,4-dinitro	()	()	()	()	_____
38. Toluene, 2,6-dinitro	()	()	()	()	_____
IV. PCBs & RELATED COMPOUNDS					
39. PCB-1016	()	()	()	()	_____
40. PCB-1221	()	()	()	()	_____
41. PCB-1232	()	()	()	()	_____
42. PCB-1242	()	()	()	()	_____
43. PCB-1248	()	()	()	()	_____
44. PCB-1254	()	()	()	()	_____
45. PCB-1260	()	()	()	()	_____
46. 2-Chloronaphthalene	()	()	()	()	_____
V. ETHERS					
47. Ether, bis(chloromethyl)	()	()	()	()	_____
48. Ether, bis(2-chloroethyl)	()	()	()	()	_____
49. Ether, bis(2-chloropropyl)	()	()	()	()	_____
50. Ether, 2-chloroethyl vinyl	()	()	()	()	_____
51. Ether, 4-bromophenyl	()	()	()	()	_____
52. Ether, 4-chlorophenyl phenyl	()	()	()	()	_____
53. Bis(2-chloroethoxy) methane	()	()	()	()	_____

COMPOUND CHEMICALS		Known Present	Suspected Present	Known Absent	Suspected Absent	Known/Suspected Concentration Level
VI. NITROSAMINES AND OTHER NITROGEN-CONTAINING COMPOUNDS						
54.	Nitrosamine, dimethyl	()	()	()	()	_____
55.	Nitrosamine, dipheny	()	()	()	()	_____
56.	Nitrosamine, di-a-propyl	()	()	()	()	_____
57.	Benzidine	()	()	()	()	_____
58.	Benzidine, 3,3'-dichloro	()	()	()	()	_____
59.	Hydrazine	()	()	()	()	_____
60.	Acrylonitrile	()	()	()	()	_____
VII. HALOGENATED ALIPHATICS						
61.	Methane, bromo-	()	()	()	()	_____
62.	Methane, chloro-	()	()	()	()	_____
63.	Methanedichloro-	()	()	()	()	_____
64.	Methane, chlorodibromo	()	()	()	()	_____
65.	Methane, dichlorobromo	()	()	()	()	_____
66.	Methane, tribromo	()	()	()	()	_____
67.	Methane, trichloro	()	()	()	()	_____
68.	Methane, tetrachloro	()	()	()	()	_____
69.	Methane, trichlorofluoro	()	()	()	()	_____
70.	Methane, dichlorodifluoro	()	()	()	()	_____
71.	Ethane, 1,1-dichloro	()	()	()	()	_____
72.	Ethane, 1,2-dichloro	()	()	()	()	_____
73.	Ethane, 1,1,1-thrichloro	()	()	()	()	_____
74.	Ethane, 1,1,2-thrichloro	()	()	()	()	_____
75.	Ethane, 1,1,2,2-tetrachloro	()	()	()	()	_____
76.	Ethane, hexachloro	()	()	()	()	_____
77.	Ethane, chloro	()	()	()	()	_____
78.	Ethane, 1,1-dichloro	()	()	()	()	_____
79.	Ethane, trans-dichloro	()	()	()	()	_____
80.	Ethane, trichloro	()	()	()	()	_____
81.	Propane, 1,2-dichloro	()	()	()	()	_____
82.	Propane, 2,4-dichloro	()	()	()	()	_____
83.	Butadiene, hexachloro	()	()	()	()	_____
84.	Cyclopentadine, hexachloro	()	()	()	()	_____
VIII. PHTHALATE ESTERS						
85.	Phthalate, di-c-methyl	()	()	()	()	_____
86.	Phthalate, di-n-ethyl	()	()	()	()	_____
87.	Phthalate, di-n-butyl	()	()	()	()	_____
88.	Phthalate, di-n-octyl	()	()	()	()	_____
89.	Phthalate, bis(2-ethylhexyl)	()	()	()	()	_____
90.	Phthalate, butyl benzyl	()	()	()	()	_____

COMPOUND CHEMICALS		Known Present	Suspected Present	Known Absent	Suspected Absent	Known/Suspected Concentration Level
91.	Acenaphthene	()	()	()	()	_____
92.	Acenaphthylene	()	()	()	()	_____
93.	Anthracene	()	()	()	()	_____
94.	Benzo (a) anthracene	()	()	()	()	_____
95.	Benzo (b) fluoranthene	()	()	()	()	_____
96.	Benzo (k) fluoranthene	()	()	()	()	_____
97.	Benzo (ghi) perylene	()	()	()	()	_____
98.	Benzo (a) pyrene	()	()	()	()	_____
99.	Chrysene	()	()	()	()	_____
100.	Dibenzo(a,n.) anthracene	()	()	()	()	_____
101.	Fluoranthene	()	()	()	()	_____
102.	Fluorene	()	()	()	()	_____
103.	Indeno (1,2,3-cd)pyrene	()	()	()	()	_____
104.	Naphthalene	()	()	()	()	_____
105.	Phenanthrene	()	()	()	()	_____
106.	Pyrene	()	()	()	()	_____
IX. PESTICIDES						
107.	Acrolein	()	()	()	()	_____
108.	Aldrin	()	()	()	()	_____
109.	BHC (Alpha)	()	()	()	()	_____
110.	BHC (Beta)	()	()	()	()	_____
111.	BHC (Gamma) or Lindane	()	()	()	()	_____
112.	BHC (Delta)	()	()	()	()	_____
113.	Chlordane	()	()	()	()	_____
114.	DDD	()	()	()	()	_____
115.	DDE	()	()	()	()	_____
116.	DDT	()	()	()	()	_____
117.	Dieldrin	()	()	()	()	_____
118.	Endosulfan (Alpha)	()	()	()	()	_____
119.	Endosulfan (Beta)	()	()	()	()	_____
120.	Endosulfan sulfate	()	()	()	()	_____
121.	Endrin	()	()	()	()	_____
122.	Endrin aldehyde	()	()	()	()	_____
123.	Heptachlor	()	()	()	()	_____
124.	Heptachlor epoxide	()	()	()	()	_____
125.	Isophorone	()	()	()	()	_____
126.	TCDD (or Dioxin)	()	()	()	()	_____
127.	Toxaphene	()	()	()	()	_____

C.5 If you are unable to identify the chemical constituents of products you use that discharge in your wastewater, attach copies of the materials safety data sheets for such products.

SECTION D-OTHER WASTES

D.1 Are any liquid wastes or sludges from this firm disposed of by means other than discharge to the sewer system?

Yes No

If "No", skip remainder of Section E.
If "Yes", complete items 2 and 3.

D.2 These wastes may best be described as:

Estimated Gallons or Pounds Per Year

- | | |
|---|-------|
| <input type="checkbox"/> Acids and Alkalines | _____ |
| <input type="checkbox"/> Heavy Metal Sludges | _____ |
| <input type="checkbox"/> Inks/Dyes | _____ |
| <input type="checkbox"/> Oil 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) | _____ |

D.3 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 checked above.

SECTION E

E.1 Please include a drawing of process lines, floor drains, pretreatment facilities, (if any). Be sure to include discharge connection into sewer system and appropriate sampling locations.

E.2 Identify any or all, hazardous areas.
