

CITY OF LARAMIE INDUSTRIAL WASTE SURVEY

All industrial users of the Laramie wastewater utility who have the potential to significantly impact the treatment plant are required by City Ordinance to submit a complete Industrial Waste Survey. The user is required to update the survey whenever significant changes are made in an industrial process or operation. Please review the survey and if there are questions call the Industrial Pretreatment Coordinator at 307-721-5204. Upon completion of the survey (due 10 business days after receipt) please mail it to:

City of Laramie Wastewater Treatment Plant
 ATTN: Pretreatment Coordinator
 PO Box C
 Laramie, WY 82070

RESTAURANTS/FOOD SERVICES FILL IN SECTIONS A-F ONLY

SECTION A-GENERAL INFORMATION

1. Company Name: _____
 Mailing Address: _____
 Telephone Number: _____

2. Facility address if different from above:

3. Contact person(s) concerning this survey:
 Printed Name: _____
 Title: _____ Telephone: _____

 Printed Name: _____
 Title: _____ Telephone: _____

4. Check One: _____ Existing discharge _____ Proposed discharge
 If proposed discharge, state anticipated date of initial discharge:

SECTION B-BUSINESS ACTIVITIES OR SERVICES: Check appropriate categories

Agricultural Chemicals	<input type="checkbox"/>	Equipment Repair/Service	<input type="checkbox"/>	Pesticide Use	<input type="checkbox"/>
Assembly	<input type="checkbox"/>	Flammables/Explosives Use	<input type="checkbox"/>	Photo/Film Processing	<input type="checkbox"/>
Auto Body Shop	<input type="checkbox"/>	Funeral Services	<input type="checkbox"/>	Printed Wiring/Circuit Board Repair	<input type="checkbox"/>
Automotive Dealer	<input type="checkbox"/>	Health Services/Hospitals	<input type="checkbox"/>	Printing	<input type="checkbox"/>
Biotechnology	<input type="checkbox"/>	Industrial Equipment Use/Build/Repair	<input type="checkbox"/>	Publishing	<input type="checkbox"/>
Build/Repair	<input type="checkbox"/>	Industrial Laundry	<input type="checkbox"/>	Radiator Repair	<input type="checkbox"/>
Car Wash	<input type="checkbox"/>	Instrument Repair	<input type="checkbox"/>	Research	<input type="checkbox"/>
Carpets and Rugs	<input type="checkbox"/>	Laboratory	<input type="checkbox"/>	Restaurant/Food Preparation	<input type="checkbox"/>
Construction	<input type="checkbox"/>	Machine Shop	<input type="checkbox"/>	Taxidermy	<input type="checkbox"/>
Diesel Truck Wash	<input type="checkbox"/>	Metal Products and Machinery	<input type="checkbox"/>	Wood Preserving	<input type="checkbox"/>
Dry Cleaning	<input type="checkbox"/>	Motor Freight Transportation	<input type="checkbox"/>	X-ray/Film Developing	<input type="checkbox"/>
Electronic Equipment	<input type="checkbox"/>	Office Unit	<input type="checkbox"/>		<input type="checkbox"/>
Engine Build/Repair	<input type="checkbox"/>	Other:	<input type="checkbox"/>		<input type="checkbox"/>
Engraving/Coating	<input type="checkbox"/>	Painting, Stripping, Finishing	<input type="checkbox"/>		<input type="checkbox"/>

1. Provide a brief narrative of the operations at this facility including primary products or services.

SECTION C- FACILITY OPERATION CHARACTERISTICS

- 1. Hours and days of operation: _____
- 2. Number of employee shifts per 24-hour day: _____
- 3. Average number of employees per shift: _____ 1st. _____ 2nd. _____ 3rd.
- 4. Total Number of employees: _____
- 5. Will your operation be subject to seasonal variation? [] Yes [] No
If yes, when is peak operation? _____
- 6. Operational process(es) will be: [] Batch [] Continuous [] Both
_____ % Batch _____ % Continuous Average number of batches per day: _____
- 7. Are there any process changes or expansions planned for your facility? [] YES [] NO
If yes, please describe the nature of the planned expansions and provide expected date:

SECTION D- WATER CONSUMPTION

Please provide approximate water consumption at your facility by either an actual metered water reading, or providing an estimate based on 15 gallons per day for each employee.

	Average Gallons Per Day (Est. or Actual)	Methods Used to Determine Flow
1. [] Domestic Wastes	_____	_____
2. [] Contained in product	_____	_____
3. [] Boiler blow down	_____	_____
4. [] Cooling water	_____	_____
5. [] Process water	_____	_____
6. [] Equip/Facility Wash down	_____	_____
7. [] Other (describe)	_____	_____
Total Daily Water Use:	_____	

SECTION E- WASTEWATER PRETREATMENT

- 1. Will any form of wastewater pretreatment be practiced at this facility? Yes No
- 2. For each waste stream treated prior to discharge, check the appropriate boxes for types of pretreatment to be used and indicate which process waste streams will receive the specified pretreatment application.

- Grease trap/interceptor _____
- Oil and grease separator (pump) _____
- Solvent recovery _____
- Silver recovery _____
- Chemical addition _____
- pH adjustment _____
- Biological _____
- Other _____

SECTION F - NON-DISCHARGE WASTES

- 1. Will there be any liquid wastes or sludge generated at this facility that will be stored for disposal?
 Yes No

If yes to the above, specify type of waste:

- Grease/Oil Waste Solvent Inks/Dyes
- Paints/Thinners Acids/Alkalis Plating Wastes
- Other Wastes Fry oils

- 2. How will the above checked wastes be removed from your facility?

- Placed with trash for City disposal
- Treated, stored, disposed on-site
Specify: _____
- Removed by an outside hazardous waste hauler to a waste management facility

State the name and address of your waste haulers:

Name: _____	Wastes picked up: _____
Address: _____	Frequency of pickup: _____
Name: _____	Wastes picked up: _____
Address: _____	Frequency of pickup: _____
Name: _____	Wastes picked up: _____
Address: _____	Frequency of pickup: _____

- 2. Does your facility have an EPA identification number? Yes No
 IF yes, provide # _____
- 3. Does your facility have a plan for controlling accidental chemical spills? Yes No NA

If you are a restaurant please skip Sections G and H and proceed to the Signature page at the end

SECTION G- WASTEWATER DISCHARGE and GENERATION

Please provide to the City a diagram of the facility, indicating each area where wastewater is generated and disposed.

1. Identify floor drains and sinks: ___(provided on drawing)_____

2. Will you discharge your process wastewater intermittently or continuously? _____

3. Will this facility generate wastewater other than from restrooms, cafeterias, or other food preparation areas? Yes No

4. Briefly describe each industrial process that generates wastewater (excluding boiler and cooling water). Indicate approximate quantity of wastewater to be generated per day in gallons per day (gpd). Methods of disposal usually include discharge to the sewer, evaporation, and storage for waste handler:

a.	_____	Volume gpd:	_____
	_____	Method of Disposal:	_____
b.	_____	Volume gpd:	_____
	_____	Method of Disposal:	_____
c.	_____	Volume gpd:	_____
	_____	Method of Disposal:	_____

5. For the processes that generate wastewater mentioned above, indicate the type of wastes that could be present in the wastewater:

- | | | | |
|---------------------------------------|---|----------------------------------|--|
| <input type="checkbox"/> Ammonia | <input type="checkbox"/> Chlorides | <input type="checkbox"/> Cyanide | <input type="checkbox"/> Disinfectant |
| <input type="checkbox"/> Heavy Metals | <input type="checkbox"/> Flammables | <input type="checkbox"/> High pH | <input type="checkbox"/> Low pH(acids) |
| <input type="checkbox"/> High Temp. | <input type="checkbox"/> Heavy Metals | <input type="checkbox"/> Phenols | <input type="checkbox"/> Solvents |
| <input type="checkbox"/> Pesticides | <input type="checkbox"/> PCBs | | <input type="checkbox"/> Radioactive |
| <input type="checkbox"/> Salt Brines | <input type="checkbox"/> Petroleum Hydrocarbons | | <input type="checkbox"/> Oil or Grease |

6. Identify any solutions, chemicals, or solvents used that have not been covered above:

SECTION H- EPA PRIORITY POLLUTANT INFORMATION

The following is a list of priority pollutants. Indicate by circling each chemical that is used or generated in your process, and check appropriate box whether the pollutant is discharged to the sewer or collected for separate disposal.

		Discharged	Separate Disposal			Discharged	Separate Disposal
1	Asbestos (fibrous)	[]	[]	43	Chlorodibromomethane	[]	[]
2	Cyanide (total)	[]	[]	44	Chloroethane	[]	[]
3	Antimony (total)	[]	[]	45	2-chloroethylvinyl ether	[]	[]
4	Arsenic (total)	[]	[]	46	Chloroform	[]	[]
5	Beryllium (total)	[]	[]	47	2-chloronaphthalene	[]	[]
6	Cadmium (total)	[]	[]	48	2-chlorophenol	[]	[]
7	Chromium (total)	[]	[]	49	4-chlorophenylphenyl ether	[]	[]
8	Copper (total)	[]	[]	50	Chrysene	[]	[]
9	Lead (total)	[]	[]	51	4,4' DDD	[]	[]
10	Mercury (total)	[]	[]	52	4,4' DDE	[]	[]
11	Nickel (total)	[]	[]	53	4,4' DDT	[]	[]
12	Selenium (total)	[]	[]	54	Dibenzo (a,h) anthracene	[]	[]
13	Silver (total)	[]	[]	55	Dichlorobromomethane	[]	[]
14	Thallium (total)	[]	[]	56	1,2-dichlorobenzene	[]	[]
15	Zinc (total)	[]	[]	57	1,3-dichlorobenzene	[]	[]
16	Acenaphthene	[]	[]	58	1,4-dichlorobenzene	[]	[]
17	Acenaphlen	[]	[]	59	3,3'-dichlorobenzidene	[]	[]
18	Acrolein	[]	[]	60	1,1-dichloroethane	[]	[]
19	Acrylonitrile	[]	[]	61	1,2-dichloroethane	[]	[]
20	Aldrin	[]	[]	62	1,1-dichloroethylene	[]	[]
21	Anthracene	[]	[]	63	1,2-trans-dichloroethylene	[]	[]
22	Benzene	[]	[]	64	2,4-dichlorophenol	[]	[]
23	Bensidene	[]	[]	65	1,2-dichloropropane	[]	[]
24	Benzo (a) anthracene	[]	[]	66	1, 3-dichloropropylene	[]	[]
25	Benzo (a) pyrene	[]	[]	67	Dieldrin	[]	[]
26	Benzene (b) fluoranthene	[]	[]	68	Diethylphthalate	[]	[]
27	Benzo (g,h,i.) perylene	[]	[]	69	2, 4-dimethyphenol	[]	[]
28	Benzo (k) Fluoranthene	[]	[]	70	Dimethyl phthalate	[]	[]
29	a-BHC (alpha)	[]	[]	71	di-n-butyl phthalate	[]	[]
30	b-BHC (beta)	[]	[]	72	di-n-octyl-phthalate	[]	[]
31	d-BHC (delta)	[]	[]	73	4, 6-dinitro-o-cresol	[]	[]
32	g-BHC (gamma)	[]	[]	74	2, 4-dinitrotoluene	[]	[]
33	Bis (2-chloroethyl) ether	[]	[]	75	2, 4-dinitrophenol	[]	[]
34	Bis (2-chloroethoxy) methane	[]	[]	76	2, 6-dinitrotoluene	[]	[]
35	Bis (2-chloroisopropyl) ether	[]	[]	77	1, 2-diphenylhydrazine	[]	[]
36	Bis (2-ethylhexyl) phthalate	[]	[]	78	Alpha-endosulphan	[]	[]
37	Bromoform	[]	[]	79	Beta-endosulfan	[]	[]
38	4-bromophenylphenyl ether	[]	[]	80	Endosulfan sulfate	[]	[]
39	Butylbenzyl	[]	[]	81	Endrin	[]	[]
40	Carbon tetrachloride	[]	[]	82	Endrin aldyhyde	[]	[]
41	Chlodane	[]	[]	83	Ethylbenzene	[]	[]
42	Chlorobenzene	[]	[]	84	Fluorathene	[]	[]

		Discharged	Separate Disposal			Discharged	Separate Disposal
85	Fluorine	[]	[]	106	PCB-1232	[]	[]
86	Heptachlor	[]	[]	107	PCB-1242	[]	[]
87	Heptachlor epoxide	[]	[]	108	PCB-1248	[]	[]
88	Hexachlorobenzene	[]	[]	109	PCB-1254	[]	[]
89	Hexachlorobutadiene	[]	[]	110	PCB-1260	[]	[]
90	Hexachlorocyclopentadiene	[]	[]	111	p-chloro-m-cresol	[]	[]
91	Hexachlorethane	[]	[]	112	Pentachlorophenol	[]	[]
92	Indeno (1,2,3-cd) pyrene	[]	[]	113	Phenanthrene	[]	[]
93	Isophorone	[]	[]	114	Phenol	[]	[]
94	Methyl bromide	[]	[]	115	Pyrene	[]	[]
95	methyl chloride	[]	[]	116	1,1,2,2-tetrachloroethane	[]	[]
96	Methylene chloride	[]	[]	117	Tetrachloroethylene	[]	[]
97	Naphthalene	[]	[]	118	Toluene	[]	[]
98	Nitrobenzene	[]	[]	119	Toxaphene	[]	[]
99	2-nitrophenol	[]	[]	120	1,2,4-trichlorobenzene	[]	[]
100	4-nitrophenol	[]	[]	121	1,1,1-trichloroethane	[]	[]
101	n-nitrosodimethylamine	[]	[]	122	1,1,2-trichloroethane	[]	[]
102	n-nitrosodi-n-propylamine	[]	[]	123	Trichloroethylene	[]	[]
103	n-nitrosodiphenylamine	[]	[]	124	2,4,6-trichlorophenol	[]	[]
104	PCB-1016	[]	[]	125	Vinyl chloride	[]	[]
105	PCB-1221	[]	[]				

State the name and address of disposal Company: If indicated above

Name: _____	Wastes picked up: _____
Address: _____	Frequency of pickup: _____
Name: _____	Wastes picked up: _____
Address: _____	Frequency of pickup: _____
Name: _____	Wastes picked up: _____
Address: _____	Frequency of pickup: _____

This survey must be signed by an authorized official of your firm after adequate completion and review of the information.

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of these 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.

Signature:

Date:

Printed Name: