



# Industrial Wastewater Questionnaire

Submit this completed and signed questionnaire via mail, email, or fax to:

City of Northglenn    **Email:** ipprogram@northglenn.org  
 Industrial Pretreatment Division    **Phone:** 303-450-4026  
 2350 W. 112<sup>th</sup> Ave    **Fax:** 303-450-4044  
 Northglenn, CO 80234

All businesses must complete this form to fulfill EPA Pretreatment Program Requirements. Based on your business or wastewater discharge classification, an additional survey may be required. Please contact the Industrial Pretreatment Division for all questions.

## I. Contact Information

Business Name: \_\_\_\_\_

Northglenn Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## II. Facility Operations and Wastewater Information

### 1. Type of Business

Commercial                      Industrial                      SIC Code:

### 2. Indicate all activities which are or will be present at this facility

- |                         |                              |                        |
|-------------------------|------------------------------|------------------------|
| Assembly                | Laboratory                   | Photo Processing       |
| Automotive Services     | Machine Shop                 | Research               |
| Biotechnology           | Manufacturing                | Retail                 |
| Dental                  | Material Distribution        | Vehicle/Equipment Wash |
| Dry Cleaning/Laundry    | Medical Office               | Warehousing            |
| Electroplating          | Metal Finishing              | Wholesale Trade        |
| Flammables/Explosives   | Office (not medical)         | Other (specify):       |
| Food Processing         | Painting/Stripping/Finishing |                        |
| Food Service/Restaurant | Printing                     |                        |

### 3. Briefly describe the activities conducted at this facility (processes, services, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**4. Is this facility a Food Service Establishment (FSE)?**

Food Service Establishments are non-domestic facilities that prepare, serve, or otherwise make any type of food or beverages available for consumption.

Yes

No

If Yes then submit the Grease Interceptor Design Form, completed by a Professional Engineer, available with more information at [www.Northglenn.org/IndustrialPretreatment](http://www.Northglenn.org/IndustrialPretreatment)

**5. Indicate the type and amount of solutions or materials used in manufacturing, cleaning or other operations whose containers exhibit hazard warning labels. Attach additional sheets as needed or Safety Data Sheets as needed. List amounts of solutions used in gallons per day.**

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**6. Description of facilities (Kitchen, restrooms, laundry, chemical storage, etc.):**

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**7. Are floor drains present in the work or storage areas at the facility?**

Yes, Location: \_\_\_\_\_

No

**8. Water use: Purposes used for & approximate gallons per day consumption**

**III. Type of Wastewater Discharged into Municipal Sewer**

Domestic

Industrial

“Domestic” (sanitary) wastewater is liquid wastes from the non-commercial preparation, cooking and handling of food, containing only human excrement and similar matter from the sanitary conveniences of dwellings, commercial buildings, industrial facilities and institutions. All other wastewater should be considered “Industrial.”

**IV. Certificate of Information**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and attachments. Based on my inquiry of those individuals immediately responsible for obtaining this 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.

**Name (print):** \_\_\_\_\_

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

**Signature:** \_\_\_\_\_

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