



## INDUSTRIAL WASTE QUESTIONNAIRE

Please return or Mail this form to the following:  
City of Terrell  
Attn: Municipal Development  
P.O. Box 310/201 East Nash  
Terrell, Texas 75160  
Or email to: [tcaphart@cityofterrell.org](mailto:tcaphart@cityofterrell.org)

A copy of this form can be printed  
from the City's website  
[www.cityofterrell.org/utility.htm](http://www.cityofterrell.org/utility.htm)

If you have any questions or require  
technical assistance call John Rickman  
At: 972-551-6630 or 972-551-6631  
Email: [jrickman@cityofterrell.org](mailto:jrickman@cityofterrell.org)

### GENERAL INFORMATION:

Standard Industrial Classification Code (SIC): \_\_\_\_\_

Company Name: \_\_\_\_\_

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

Address of Premises: \_\_\_\_\_

Name and Title of Signing Official: \_\_\_\_\_  
\_\_\_\_\_

### CONTACT OFFICIAL

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

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

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

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

E-mail: \_\_\_\_\_

The information contained in this questionnaire is familiar to me, and to the best of my knowledge and belief, such information is true, complete and accurate.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Official

PLANT OPERATIONAL CHARACTERISTICS

Brief description of manufacturing or service activity on premises:

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Principal raw materials used:

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Catalyst, intermediates:

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Principle product or service:

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Hours of Operation (daily): \_\_\_\_\_

Is there a scheduled shutdown? \_\_\_\_\_

Is production seasonal? \_\_\_\_\_

If so, Explain, indicating month(s) of peak production: \_\_\_\_\_

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Do employees work shifts? \_\_\_\_\_

	Hours	# Employees
1 <sup>st</sup>	_____	_____
2 <sup>nd</sup>	_____	_____
3 <sup>rd</sup>	_____	_____

Shifts normally worked each day (please check):

	<u>SUN</u>	<u>MON</u>	<u>TUES</u>	<u>WED</u>	<u>THUR</u>	<u>FRI</u>	<u>SAT</u>
1 <sup>ST</sup>							
2 <sup>ND</sup>							
3 <sup>RD</sup>							

List raw water sources, if any:

<u>SOURCE</u>	<u>QUANTITY</u>
_____	_____ GALLONS/DAY
_____	_____ GALLONS/DAY
_____	_____ GALLONS/DAY

Describe any raw water treatment processes in use:

List water use in plant:

Cooling Water	_____ gallons/day
Boiler feed	_____ gallons/day
Process water	_____ gallons/day
Sanitary system	_____ gallons/day
Contained in product	_____ gallons/day
Other	_____ gallons/day
Total Water Use	_____ gallons/day

List average volume of discharge or water loss to:

City wastewater sewer	_____ gallons/day
Natural outlet	_____ gallons/day
Waste Hauler	_____ gallons/day
Evaporation	_____ gallons/day
Contained in product	_____ gallons/day

Is discharge to sewer: \_\_\_\_\_ Intermittent \_\_\_\_\_ Steady

List plant sewer outlets, size, and flow (attach necessary plats, building plans):

Describe any wastewater treatment equipment or process in use:

Have you provided a point for representative sample collection of your industrial waste discharge?

If so, describe location:

Is there a spill prevention control and countermeasure plan in effect for this plant?

#### CHARACTERISTICS OF WASTEWATER

Please refer to Table I and check any of the types of pollutants discharged by your facility in a representative sample of your wastewater (after pretreatment, if any). Indicate an approximate quantity (mg/L), if known. **NO LABORATORY ANALYSIS IS REQUIRED IN COMPLETING THIS QUESTIONNAIRE.**

Are any of the toxic pollutants listed in Table II being used at this facility in any process in which they may be discharged into the sewer system?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If so, please identify by a check mark on Table II. Remember to consider the chemical content of any coolants, solvents, etc. used in any processes in your facility.

#### PRETREATMENT

Is this plant, or any processes, subject to an existing Federal Categorical Pretreatment Standard?

If so, describe the Category and state whether the Standards are being met on a constant basis:

Are additional pretreatment facilities required to meet the Standards?

If so, please list a schedule by which they will be provided.

TABLE I

WASTEWATER CHARACTERISTICS

<u>CHEMICAL PARAMETERS</u>		<u>TOTAL METAL CONTENTS</u>	
<u>PARAMETER</u>	<u>QUANTITY</u>	<u>PARAMETER</u>	<u>QUANTITY</u>
<input type="checkbox"/> Flammable or explosive	_____	<b>Aluminum</b>	_____
<input type="checkbox"/> Temp. > 150 F (65C)	_____	<b>Antimony</b>	_____
<input type="checkbox"/> Oil & Grease	_____	<b>Arsenic</b>	_____
<input type="checkbox"/> Biochemical Oxygen Demand	_____	<b>Barium</b>	_____
<input type="checkbox"/> Chemical Oxygen Demand	_____	<b>Beryllium</b>	_____
<input type="checkbox"/> Total Dissolved Solids	_____	<b>Bismuth</b>	_____
<input type="checkbox"/> Total Suspended Solids	_____	<b>Boron</b>	_____
<input type="checkbox"/> pH<5.5	_____	<b>Cadmium</b>	_____
<input type="checkbox"/> pH >9.5	_____	<b>Calcium</b>	_____
<input type="checkbox"/> Nitrogen, Ammonia	_____	<b>Chromium</b>	_____
<input type="checkbox"/> Nitrogen, Nitrite	_____	<b>Cobalt</b>	_____
<input type="checkbox"/> Nitrogen, Nitrate	_____	<b>Copper</b>	_____
<input type="checkbox"/> Phosphorus	_____	<b>Iron</b>	_____
		<b>Lead</b>	_____
		<b>Maganese</b>	_____
		<b>Mercury</b>	_____
		<b>Molybdenum</b>	_____
		<b>Nickel</b>	_____
		<b>Potassium</b>	_____
		<b>Radium</b>	_____
		<b>Selenium</b>	_____
		<b>Silver</b>	_____
		<b>Thallium</b>	_____
		<b>Zinc</b>	_____

**TABLE II**

**65 Toxic Pollutants Listed in Consent Decree and Referenced in  
307 (a) of the CWA of 1977**

<b>Acenaphthene</b>	<b>Ethyl benzene</b>
<b>Acrolein</b>	<b>Fluoranthene</b>
<b>Acrylonitrile</b>	<b>Halo ethers</b>
<b>Aldrin/Dieldrin</b>	<b>Halomethanes</b>
<b>Antimony and compounds</b>	<b>Heptachlor and metabolites</b>
<b>Arsenic and compounds</b>	<b>Hexachlorobutadiene</b>
<b>Asbestos</b>	<b>Hexachloroclopentadiene</b>
<b>Benzene</b>	<b>Hexachlorocyclohexane</b>
<b>Benzidine</b>	<b>Isophrone</b>
<b>Beryllium and compounds</b>	<b>Lead and compounds</b>
<b>Cadmium and compounds</b>	<b>Mercury and Compounds</b>
<b>Carbon tetrachloride</b>	<b>Naphthalene</b>
<b>Chlordane</b>	<b>Nickel and compounds</b>
<b>Chlorinated benzenes</b>	<b>Nitrobenzene</b>
<b>Chlorinated ethanes</b>	<b>Nitrophenols</b>
<b>Chlorinated naphthalene</b>	<b>Nitrosamines</b>
<b>Chlorinated phenols</b>	<b>Pentachlorophenol</b>
<b>Chloroform</b>	<b>Phenol</b>
<b>2- chlorophenol</b>	<b>Phthalate esters</b>
<b>Chromium and compounds</b>	<b>Polychlorinated byphenyls (PCB)</b>
<b>Cyanides</b>	<b>Polynuclear aromatic</b>
<b>DDT and metabolites</b>	<b>Hydrocarbons</b>
<b>Dischlorobenzenes</b>	<b>Selenium and compounds</b>
<b>Dichlorobenzidine</b>	<b>Silver and Compounds</b>
<b>Dichloroethylenes</b>	<b>2,3,7,8- Terachlorodibenzo-p-dioxin</b>
<b>2,4-dichlorophenol</b>	<b>(TCDD)</b>
<b>Dichloropropane &amp; Dichloropropene</b>	<b>Tetrachloroethylene</b>
<b>2,4-dimethylphenol</b>	<b>Thallium and compounds</b>
<b>Dinitrotoluene</b>	<b>Toluene</b>
<b>Diphenylhydrazine</b>	<b>Toxaphene</b>
<b>Endosulfan &amp; metabolites</b>	<b>Trichloroethylene</b>
<b>Chlorinalkyl ethers</b>	<b>Vinyl chloride</b>
<b>Copper and Compounds</b>	<b>Zinc and compounds</b>
<b>Endrin and metabolites</b>	

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List any other toxicants known or anticipated to be present in the discharge.