



**INDUSTRIAL / COMMERCIAL
WASTEWATER DISCHARGE
INFORMATION
FORM**

**PLEASE RETURN COMPLETED FORM TO:
PARKER WATER AND SANITATION
18100 E. WOODMAN DRIVE
PARKER, CO 80134**

**QUESTIONS OR COMMENTS
INDUSTRIAL PRETREATMENT DEPT.**

**PHONE 303-841-4627
FAX 303-841-8992**

SUMMARY

Parker Water and Sanitation District (PWSD) would like to thank you in advance for completing this Industrial Pretreatment Information Form. All businesses that could potentially affect the process of the Parker Wastewater Treatment Facility must complete this form and return it to PWSD Industrial Pretreatment Department.

The PWSD Pretreatment Regulations apply to all non-domestic (non-residential) sources. Any business could potentially introduce pollutants into the Parker Wastewater treatment facility. These sources of “indirect discharge” are commonly referred to as industrial users (IUs). IUs can be as simple as an unmanned coin-operated car wash to a complex automobile manufacturer.

The Industrial Pretreatment Program’s goal is to prevent the discharge of pollutants, which could interfere with the operation of the wastewater treatment plant or its disposal of municipal biosolids. The Pretreatment Program attempts to prevent the introduction of pollutants into PWSD treatment plants that may pass through (the biological process) into rivers, creeks and streams causing toxicity or other impacts on the environment. These regulations describe the responsibility of the EPA, states, POTWs (Publicly Owned Treatment Works) and industrial users (UI’s) in protecting the POTWs, sewer systems, biosolids, receiving waters, and worker health and safety.

PWSD Industrial Pretreatment department is asking you to complete this form so the risk from your business, as well as other businesses located around you, can be accurately assessed in an emergency, it also provides essential information regarding what you have stored onsite and who can be contacted under such circumstances.

NOTE TO SIGNING OFFICIAL: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, effluent data provided in this Questionnaire shall be available to the public without restriction. Any other information provided may be claimed as confidential by the submitter. Such claim must be asserted at the time of submission by stamping the words “Confidential Business Information” on, or similarly identifying the information claimed as confidential. Requests for confidential treatment of information shall be governed by procedures specified in 40 CFR Part 2.

If there is any concern please contact Parker Water and Sanitation District’s Industrial Pretreatment Department at 720-842-4248, or e-mail Nancie at nhineline@pwsd.org with any questions or comments.

This form is to help Parker Water and Sanitation District adequately treat wastewater from the commercial and industrial customers. The District must comply with sewer treatment standards imposed upon the District by the Environmental Protection Agency (EPA), Colorado Department of Public Health and Environment (CDPHE) and other state and federal regulatory agencies. It is the District's intent to see that all businesses work cooperatively with the District to come into compliance with Parker Water and Sanitation District Rules and Regulations. This information could be used to determine if your business will require an Industrial Waste Permit.

Any questions regarding this form should be directed to Nancie Hineline at 720-842-4248, or e-mail at nhineline@pwsd.org. We are dedicated to providing excellent service to our customers and will answer any questions you might have.

PLEASE COMPLETE AND RETURN WITHIN 14 DAYS TO:

**PARKER WATER AND SANITATION DISTRICT
18100 E. WOODMAN DRIVE, PARKER, CO 80134**

I. GENERAL INFORMATION

Company Name _____

Business Address _____

Business Phone Number _____

Corporation Name _____

Corporation Address _____

Person Responsible for Discharge _____

Responsible Party Phone Number _____

Emergency Contact Name _____

Emergency Contact Title _____

Emergency Contact Day Phone _____

Emergency Contact Night Phone _____

Standard Industrial Classification Code (SIC Code) _____

EPA Categorical Standard 40 CFR _____

Please describe in detail services or products manufactured at this location:

Average Number of Employees (Annually) _____

Work or Production schedule at this location: _____

Average Days per Week of Operation _____

Number of floor drains _____

Please check any activity that applies Electroplating Painting Laundry
 Flammable/Explosives Food Preparation Laboratory Printing
 Machine Shop Medical/Dental Paint/Ink Research
 Auto Shop/Garage Photographic Finishing Plastic Processing
 Rubber Processing Steam/Power Generation Warehousing

II. BUSINESSES THAT GENERATE PROCESS WASTEWATERS

Is this a business required to report discharges to the EPA under the General Pretreatment Regulations (40 CFR 403)? (Circle one) YES **NO**

Types of waste discharged to Parker Water and Sanitation District sanitary sewer system. Check ALL that apply:

- _____ Sanitary waste from bathrooms
- _____ Cleanup waste from floor drains
- _____ Kitchen waste
- _____ Wastewater from manufacturing process (es)
- _____ Wastewater from laundry equipment or car wash
- _____ Wastewater from dry cleaning equipment
- _____ Wastewater from paint booth (es)
- _____ Wastewater from parts cleaning or preparation
- _____ Cooling water discharge
- _____ Other (describe)

Water usage at this location:

- _____ Thousands of gallons per month or
- _____ Gallons per invoice (from water bill)
- _____ Gallons per day

Are major process discharges:

Batch: Number of discharges per month _____
 Average quantity per batch _____
 Time and days of discharges
 _____ Mon _____ Tues _____ Wed
 _____ Thurs _____ Fri _____ Sat
 _____ Sun

Describe average batch contents _____

Continuous: Average daily discharge _____
 Peak hour flow _____
 Days of week discharge occurs
 _____ Mon _____ Tues _____ Wed
 _____ Thurs _____ Fri _____ Sat
 _____ Sun

Describe average continuous contents _____

Type of waste ___ Acid/Alkalis ___ Heavy Metal Sludge ___ Inks/Dyes
 ___ Oil/Grease ___ Organic Compounds ___ Disinfectants ___ Paints
 ___ Plating Wastes ___ Rinse Waters ___ Solvents/Thinners ___ Petroleum
 Products ___ Other (please describe) _____

III. CHEMICAL STORAGE

Are bulk chemicals received and stored for use at this location?(Circle one) YES **NO**

If yes, please list chemicals used or stored and approximate quantity that will be kept on hand. _____

Please list all chemicals that are known to be discharged or suspected to be discharged into the sewer system through batch, continuous, or drain. The information on the discharge of specific chemicals may be obtained from the MSDS sheets from commercial products used. Please feel free to attach MSDS sheets as needed. Chemicals include (but not limited to) solvents, detergents, and any other chemicals on site that may be used for operation or process of the company.

For all chemicals listed above that are discharged or suspected to be discharged, please fill out the following (attach a separate sheet if needed)

Chemical Identification	Annual Usage	Estimated Loss To Sewer

Please list below ALL chemicals used in production and stored on site, which meet or exceed the following:

- A—Dry powders or granules > 5 pounds
- B—Liquids > 5 gallons

Common Name	Technical Name	Manufacturer

Has a Spill Prevention or Countermeasure Plan been prepared for this facility?

- Yes Please attach a copy
- No If chemicals are stored on site provide a drawing of plant layout showing chemical storage areas, chemicals being stored, location of floor drains in these areas, and any primary or secondary containment structures.

VI. BUSINESSES THAT REQUIRE PRETREATMENT

Is any treatment given to the wastewater before it is discharged into the sewer?

- None Holding Tank Grease Interceptor Sand and Oil
- Grinding Screening Sedimentation pH Adjustment
- Other (explain)

For All businesses using a treatment method checked above (Grease, Oil, Silver, etc. anything that is transported for disposal or recycle, may be multiple companies).

What is hauled? _____

Hauler Name _____

Hauler Address _____

Hauler Phone _____

Sand/Oil interceptors as well as Grease interceptors are required to be hauled and cleaned a minimum of once every three months. All commercial and industrial customers are subject to random and scheduled inspection by the District. Hauling manifests should be maintained and copies sent to Parker Water and Sanitation District, 18100 E Woodman Drive, Parker, CO 80134.

Important Note:

It is stated in Parker Water and Sanitation District Rules and Regulations section 2.8.5D “The use of hot water, enzymes, bacteria, chemicals, emulsifiers, or other agents or devices used to cause oil and grease to be discharged from a grease interceptor is PROHIBITED. Any product which is designed to change the nature of the contents of a grease interceptor is prohibited unless specifically approved by the District.”

CERTIFICATION

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ITS ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE.

NOTE TO SIGNING OFFICIAL: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, effluent data provided in this Questionnaire shall be available to the public without restriction. Any other information provided may be claimed as confidential by the submitter. Such claim must be asserted at the time of submission by stamping the words "Confidential Business Information" on, or similarly identifying the information claimed as confidential. Requests for confidential treatment of information shall be governed by procedures specified in 40 CFR Part 2.

I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION.

Please Print Name _____

Title _____

Date _____

Signature _____ *Gary Hegener*