DATE:	
TO:	All Great Falls Businesses
FROM:	City of Great Falls Environmental Division
SUBJECT:	Industrial Wastewater Classification Survey
	Code of the City of Great Falls Montana Section 13.12.010D requires all dischargers too accurately ports the wastewater characteristics of its discharge.
	omply with these requirements and update the City's database on industrial wastewater dischargers, trial wastewater classification survey is enclosed.
	This survey MUST be completed and returned to the City by
If you have a	ny questions, please call me at 406-727-8390.
Please return	the completed survey to: City of Great Falls Public Works Department Environmental Division P.O. Box 5021 Great Falls, MT 59403
Failure to con	nplete and return this survey may result in a site visit of your facility to assist you.
	Thank you for your help.



Industrial Wastewater Survey

Office Use Only:
FR NACATT

Return the completed questionnaire by: Remit the completed and signed questionnaire via mail, to:

City of Great Falls
Public Works Department
Environmental Division
P.O. Box 5021
Great Falls, MT. 59403

For questions regarding this questionnaire, please contact the Environmental Compliance Tech: 406-727-8390

NOTE: DO NOT LEAVE ANY SECTIONS BLANK, IF NOT APPLICABLE, ENTER (N/A)

Contact Information (Please Print or Type)

Business Name:		
Telephone:		
Address of facility discharg	ing wastewater (if different from 1	nailing address):
Address:		
Telephone:		
Person(s) to be contacted re	egarding this questionnaire:	
Name:		
Title:	Title:	
Telephone:	Telephone:	
Email:	Email:	

Facility Operations and Wastewater In Check all activities which are or will be present a Assembly Auto Services	
 ☐ Food Processing/Service ☐ Manufacturing ☐ Material Transfer/Distribution ☐ Office (not medical) 	□ Vehicle/Equipment Wash□ Warehousing□ Other (specify):
Briefly describe your Business Activities (process	ses, products, services, etc.):
List the basic materials used, sold, and/or distribu	ited in the operation at your facility:
Are there any floor drains in the work or storage at If yes, please list location and indicate on a floor	
If yes, are the floor drain/drains connected to the	City Storm or Sanitary Sewer System?
City Storm System Yes □ No □	
Sanitary Sewer System Yes □ No □	

Agency (EPA) or considered significant by the City your facility include any of the following processes of	categorically defined by the US Environmental Protection of Great Falls Pretreatment Program. Do any operations in or activities?
☐ Yes (check all that apply) ☐ No	
☐ Adhesives	☐ Metal Finishing
☐ Airport Deicing	☐ Metal Molding & Casting (Foundry)
☐ Aluminum Forming	☐ Mineral Mining & Processing
☐ Asbestos Manufacturing	☐ Nonferrous Metals Forming & Metal
☐ Battery Manufacturing	Powders
☐ Beverage Manufacturing	☐ Nonferrous Metals Manufacturing
☐ Canned & Preserved Fruits & Vegetables	☐ Oil & Gas Extraction
☐ Canned & Preserved Seafood	☐ Ore Mining & Dressing
☐ Carbon Black Manufacturing	☐ Organic Chemicals
☐ Cement Manufacturing	☐ Paint Formulating
☐ Coal Mining	☐ Paving & Roofing Materials
☐ Coil Coating	☐ Pesticide Chemicals
☐ Copper Forming	☐ Petroleum Refining
☐ Dairy Products	☐ Pharmaceutical Manufacturing
☐ Electrical & Electronic Components	☐ Phosphate Manufacturing
☐ Electroplating	☐ Photographic or X-ray Processing
☐ Explosives Manufacturing	☐ Plastics Manufacturing
Feedlots	☐ Plastics Molding & Forming
☐ Ferroalloy Manufacturing	☐ Porcelain Enameling
☐ Fertilizer Manufacturing	☐ Pulp, Paper & Paperboard
☐ Glass Manufacturing	☐ Rubber Manufacturing
Grain Mills	☐ Soap & Detergent Manufacturing
☐ Gum & Wood Chemicals Manufacturing	☐ Steam Electric Power Generating
Hazardous Waste Combustors	☐ Sugar Processing
☐ Hospitals	Synthetic Fibers
☐ Industrial Laundry	☐ Textile Mills
☐ Ink Formulating	☐ Timber Products
☐ Inorganic Chemicals	☐ Tobacco Products Processing
☐ Iron & Steel Manufacturing	☐ Transportation Equipment Cleaning
☐ Landfills	☐ Waste Treatment
☐ Leather Tanning & Finishing	Describe:
☐ Meat Products	
	astewater discharged: Attach additional sheets if needed.
Operation / Activity Description of wastew	vater discharged from the operation/activity
<u> </u>	

Do you anticipate any operational or process changes in	the future? Yes □ No □
If yes, please explain:	
Is any of your wastewater treated prior to discharge to t (i.e. interceptors/traps, metals treatment, trench drains, fl	· · · · · · · · · · · · · · · · · · ·
If yes, indicate pretreatment devices or processes that are (Check all that apply)	e used for treating wastewater.
□ Air Flotation □ Amalgam Separator □ Biological (specify): □ Centrifuge □ Chlorination □ Cyclone □ Filtration □ Flocculation □ Flow Equalization □ Grease Trap / Interceptor □ Grit Removal □ Ion Exchange Describe the Treatment and/or Treatment Unit(s):	 □ Neutralization, (pH adjustment) □ Oil Separation (sand/oil/water-floor sump) □ Ozonation □ Precipitation □ Sand Interceptor □ Screening □ Sedimentation □ Septic Tank □ Silver Recovery □ Solvent Separation □ Other (specify):
Attach a copy of any chemical analyses performed on yo years:	our process wastewater flows within the last three (3) No Analyses Available
Indicate the total daily process (non-domestic) wastewate come from an estimate, water bill, flow meter, or other se	· · · · · · · · · · · · · · · · · · ·
Daily Flow Volumes ☐ Less than 25,000 gal/day ☐ More than 25,000 gal/day ☐ None (Process waste water is hauled by a ☐ None produced (domestic only)	contract waste hauler, recycled, etc.)

Waste Disposal

Provide the following information on all waste hauler(s) and/or onsite treatment vendor(s) if used or proposed to be used (**not including typical garbage haulers**): Examples, Sump Cleaning, Waste Oil, Solvent Collection, or Grease Interceptors.

Type of waste:	Waste Haule	er # 1
Name:	Type of waste:	
Address:		
City: Zip: Telephone: Waste Hauler # 2 Type of waste: Name: Zip:		
Type of waste:		
Type of waste:	Telephone:	
Name:	Waste Haule	er # 2
Name:	Type of waste:	
Address: Zip:		
City: Zip: Telephone: Zip: Business Information What is your business Standard Industrial Classification (SIC) Code, if known? (SIC) Code Schedule of Facility Operations: A. Shifts/day B. Hrs./day Days/week Weeks/year Safety Describe any safety precautions to be observed by those visiting your facility? (Example, hard hat, safety shoe		
Business Information What is your business Standard Industrial Classification (SIC) Code, if known? (SIC) Code Schedule of Facility Operations: A. Shifts/day B. Hrs./day Days/week Weeks/year Safety Describe any safety precautions to be observed by those visiting your facility? (Example, hard hat, safety shoe		
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Describe any safety precautions to be observed by those visiting your facility? (Example, hard hat, safety shoe	(SIC) Code Schedule of Facility Operations:	
	·	ting your facility? (Example, hard hat, safety shoes,
	hearing and/or eye protection etc.)	

		M	aterials Storage			
Do you	u have any chem	ical storage areas, tar	nks, bins, etc?	Yes □	No □	
	your facility use a collutants?	and/or manufacture a Yes □ No □	_	erials that wo	ould be cons	idered nanomaterials or
	If yes, please propollutants:	ovide further informa	tion on the use, mar	nufacture and	discharge o	f these materials or
		amounts in gallons (Include with your s	-	•	ity. Describe	e how and where these
	Description	Volume	Type Storage	I	Location	
		A	ttach additional she	ets as needec	d	
			Spill Prevention	on		
	Is secondary co.	ntainment provided f	for these materials?	Yes	. 🗆	No □
	Do you have a S	pill Control and Cou	ntermeasures Plan?	Ye	s 🗆	No □
	If yes, p	lease attach copy.				
	Does roof, parki	ng lot or similar drai	ns discharge to the s	anitary sewe	r? Yes □	No □
		drawing(s) of faci	•	_		abrication

Conventional, Non-Conventional and Other Pollutant Information

Please include quantity & gallons of any additional compounds expected to be present at your facility and include them in the following list. **Do not leave any sections blank.**

Volatiles

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Acrolein			1,2-Dichloroethane		
Acrylonitrile			1,1-Dichloroethene		
Benzene			1,2-Dichloropropane		
Bis(chloromethlyl)ether			1,3-Dichloropropene		
Bromodichloromethane			Ethylbenzene		
Bromoform			Methylene Chloride		
Bromomethane			1,1,2,2,-Tetrachloroethane		
Carbon Tetrachloride			Tetrachloroethylene		
Chlorobenzene			Toluene		
Dibromochloromethane			trans-1,2-Dichloroethene		
Chloroethane			1,1,1-Trichloroethane		
2-Chlorethylvinylether			1,1,2-Trichloroethane		
Chloroform			Trichloroethylene		
Chloromethane			Trichlorofluoromethane		
Dichlorodifluoromethane			Vinyl Chloride		
1,1-Dichloroethane					'

Acids

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
2-Chlorophenol			2-Nitrophenol		
4-Chloro-3 methyl phenol			4-Nitrophenol		
2,4-Dichlorophenol			Pentachlorophenol		
2,4-Dimethylphenol			Phenol(s)		
2,4-Dinitrophenol			2,4,6-Trichlorophenol		
4,6-Dinitro-o-cresol				•	•

Pesticides & TCDD

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Aldrin			Endrin aldehyde		
alpha-BHC			Heptachlor		
beta-BHC			Heptachlor epoxide		
gamma-BHC or (Lindane)			PCB-1016		
delta-BHC			PCB-1221		
Chlordane			PCB-1232		
4,4'-DDD			PCB-1242		
4,4'-DDE			PCB-1248		
4,4'-DDT			PCB-1254		
Dieldrin			PCB-1260		
alpha-Endosulfan			Tetrahydrofuran		
beta-Endosulfan			Toxaphene		
Endosulfan sulfate			TCDD or Dioxin		
Endrin				,	

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Acenaphthene			3,3-Dichlorobenzidine		
Acenaphthylene			Diethylphthalate		
Anthracene			Dimethylphthalate		
Benzidine			Di-n-butylphthatate		
Benz(a)anthracene			2,4-Dinitrotoluene		
Benzo(a)pyrene			2,6-Dinitrotoluene		
Benzo(b)fluoranthene			Di-n-octylphthalate		
Benzo(ghi)perylene			1,2-Diphenylhydrazine (as azobenzene)		
Benzo(k)fluoranthene			Fluoranthene		
Bis(2-Chloroethoxy)methane			Fluorene		
Bis(2-chloroethyl)ether			Hexachlorobenzene		
Bis(2-chloroisopropyl)ether			Hexachlorobutadiene		
Bis(2-ethylhexyl)phthalate			Hexachlorocyclopentadiene		
4-Bromophenylphenylether			Hexachloroethane		
o-Dichlorobenzene			Indeno(1,2,3-cd)pyrene		
Benzylbutylphthalate			Isophorone		
2-Chloronaphthalene			Naphthalene		
4-Chlorophenylphenylether			Nitrobenzene		
Chrysene			N-Nitrosodimethylamine		
Dibenzo(a,h)anthracene			N-Nitrosodi-n-propylamine		
1,2-Dichlorobenzene			N-Nitrosodiphenylamine		
1,3-Dichlorobenzene			Phenanthrene		
1,4-Dichlorobenzene			Pyrene		
1,2,4-Trichlorobenzene					

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Antimony, total			Lead, total		
Asbestos, total			Mercury, total		
Arsenic, total			Nickel, total		
Beryllium, total			Phenol, total		
Cadmium, total			Selenium, total		
Chromium, total			Silver, total		
Copper, total			Thallium, total		
Cyanide, total			Zinc, total		

Acids, Caustics & Miscellaneous Compounds

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Acetic Acid			Ammonium hydroxide		
Hydrochloric Acid			Magnesium hydroxide		
Hydrofluoric Acid			Potassium hydroxide		
Nitric Acid			Sodium hydroxide		
Perchloric Acid			(n)Heptane		
Phosphoric Acid			(n)Hexane		
Sulfuric Acid			Methyl tertiary butyl ether		
Pentane			1-Pentane		
Acrylonitrile			Tetraethyl lead		

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Aluminum, total			Organic Nitrogen, total		
Ammonia			Osmium, total		
Barium, total			Palladium, total		
Bismuth, total			Petroleum Hydrocarbons, total		
Boron, total			Platinum, total		
Bromide			Radioactivity		
Chlorine			Rhenium, total		
Cobalt, total			Rhodium, total		
Color			Ruthenium, total		
Fecal Coliform			Silica, total		
Fluoride			Sulfate		
Indium, total			Sulfide		
Iron, total			Sulfite		
Magnesium, total			Surfactants		
Manganese, total			Tin, total		
Molybdenum, total			Phosphorous, total		
Nitrate			Titanium, total		
Oil & Grease, total			Nitrite		
Hazardous Compounds					
Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Acetaldehyde			2,3-Dichloroaniline		
Acetone			2,2-Dichloropropionic acid		
Allyl alcohol			Dichlorvos		
Allyl chloride			Diethyl amine		
Amyl acetate			Dimethyl amine		
n-Amyl acetate			Dinitrobenzene		
n-Butyl acetate			Diquat		
Aniline			Disulfoton		
Benzonitrile			Diuron		
Benzyl chloride			Epichlorohydrin		
Butyl acetate			Ethanolamine		
Butylamine			Ethion		
Captan			Ethyl acetate		
Carbaryl			Ethylene diamine		
Carbazole			Ethylene dibromide		
Carbofuran			Fluoranthene		
Carbon disulfide			Formaldehyde		
Chlorpyrifos			Furfural		
Coumaphos			Guthion		
Cresol			Isobutyraldehyde		
o-Cresol			Isoprene		
p-Cresol			Isopropanolamine		
Crotonaldehyde			Isopropyl ether		
Cyclohexane			Kelthane		
n-Decane			Kepone		

Malathion	Pyrethrins	
Mercaptodimethur	Phosgene	
Methoxychlor	Propargite	
Methyl Cellosolve	Propylene oxide	
Methyl formate	Pyrethrins	
Methyl mercaptan	Quinoline	
Methyl methacrylate	Resorcinol	
Methyl parathion	Strontium	
4-Methyl-2-pentanone (MIBK)	Strychnine	
Mevinphos	Styrene	
Mexacarbate	2,4,5-Trichlorophenoxy acetic acid	
Monoethyl amine	Tetrachlorodiphenylethane (TDE)	
Monomethyl amine	2-(2,4,5- Trichlorophenoxy)propionic acid	
Naled	Trichlorofon	
Napthenic acid	2,4,6-Trichlorophenol	
Nitrotoluene	Triethylamine	
n-Octadecane	Trimethylamine	
Parathion	Uranium	
Phenolsulfanate	Vanadium	

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.

Under City Code 13.12.080 J: All reports and other submittals required to be submitted the City shall include the following statement and signatory requirements:

The Authorized Representative of the industrial user signing any application, questionnaire, report or other information required to be submitted to the City must sign and attach the following certification statement with each such report or information submitted to the City.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or the persons directly responsible for the gathering of the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of a fine and imprisonment for knowing violations.

Name:	Title:
(Please Print)	
Signature:	Date:
	partner, proprietor, or manager who has been assigned authority to sign documents.