

DATE:

TO: All Great Falls Businesses

FROM: City of Great Falls Environmental Division

SUBJECT: Industrial Wastewater Classification Survey

The Official Code of the City of Great Falls Montana Section 13.12.010D requires all dischargers too accurately and timely reports the wastewater characteristics of its discharge.

In order to comply with these requirements and update the City's database on industrial wastewater dischargers, a short industrial wastewater classification survey is enclosed.

This survey MUST be completed and returned to the City by _____

If you have any questions, please call the City 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 complete and return this survey may result in a site visit of your facility to assist you.

Thank you for your help.

Industrial Wastewater Pre-Screening

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

Contact Information (Please Print or Type)

Business Name: _____

Mailing Address: _____

City: _____ Zip: _____ Telephone: _____

Address of facility discharging wastewater (if different from mailing address):

Address: _____

City: _____ Zip: _____ Telephone: _____

Person(s) to be contacted regarding this questionnaire:

Name: _____ Name: _____

Title: _____ Title: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

Facility Operations and Wastewater Information

Check all activities which are or will be present at your facility:

- | | |
|---|---|
| <input type="checkbox"/> Assembly | <input type="checkbox"/> Medical Services |
| <input type="checkbox"/> Auto Services | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Food Processing/Service | <input type="checkbox"/> Vehicle/Equipment Wash |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Warehousing |
| <input type="checkbox"/> Material Transfer/Distribution | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Office (not medical) | |

Briefly describe your Business Activities (processes, products, services, etc.):

What is your business Standard Industrial Classification (SIC) Code or North American Industry Classification System (NAICS) Code, if known?

SIC/NAICS Code(s) _____

Does or will the facility discharge anything to the City sewer system other than wastewater from the restrooms?

Yes No

If yes, please continue the pre-screening on following page.

If no, please skip to the last page (page 11) and sign and date the certification statement.

The City reserves the right to request additional information.

Industrial Wastewater Pre-Screening Cont.

Does or will your facility discharge more than 25,000 gallons per day of process wastewater to the City's sanitary sewer system? (Process wastewater does not include wastewater from restrooms, non-contact cooling water, and boiler blow down.) This information may come from an estimate, water bill, flow meter, or other source?

Yes No

Does or will your facility discharge wastewater to the City's sanitary sewer system which contains any of the Prohibited Discharges listed in 13.12.030.B Specific Prohibitions of the Official Code of the City of Great Falls? https://library.municode.com/mt/great_falls/_codes/code_of_ordinances

Yes No

Do or will your facility operations include any of the Categorical processes/activities listed on page 4?

Yes No

Does or will your facility use waste haulers and/or onsite treatment vendors?

Yes No

Aside from household cleaners, does or will your facility have individual chemical containers larger than 6 gallons?

Yes No

If yes, are the chemical containers stored in a room with floor drains?

Yes No

Does your facility provide treatment of wastewater prior to discharge to the City's collection system? (Please answer "Other" if treatment consists of a grease trap/interceptor)

Yes No Other

If **yes to any**, please continue filling out the entirety of the Pretreatment Survey on the following page.

If **no to all**, please skip to the last page (page 11) and sign and date the certification statement.

The City reserves the right to request additional information.



Industrial Wastewater Survey

Office Use Only:

____FR
____NACATT

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

Please describe your Business Activities in more detail (processes, products, services, etc.):

List the materials used, sold, and/or distributed in the operation at your facility:

Are there any floor drains in the work or storage areas at your facility? Yes No

If yes, **please list location and indicate on a floor plan:**

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

Below is a list of processes/activities that are either categorically defined by the US Environmental Protection Agency (EPA) or considered significant by the City of Great Falls Pretreatment Program. Do any operations in your facility include any of the following processes or activities?

Yes (check all that apply) **No**

- | | |
|---|--|
| <input type="checkbox"/> Adhesives | <input type="checkbox"/> Metal Finishing |
| <input type="checkbox"/> Airport Deicing | <input type="checkbox"/> Metal Molding & Casting (Foundry) |
| <input type="checkbox"/> Aluminum Forming | <input type="checkbox"/> Mineral Mining & Processing |
| <input type="checkbox"/> Asbestos Manufacturing | <input type="checkbox"/> Nonferrous Metals Forming & Metal Powders |
| <input type="checkbox"/> Battery Manufacturing | <input type="checkbox"/> Nonferrous Metals Manufacturing |
| <input type="checkbox"/> Beverage Manufacturing | <input type="checkbox"/> Oil & Gas Extraction |
| <input type="checkbox"/> Canned & Preserved Fruits & Vegetables | <input type="checkbox"/> Ore Mining & Dressing |
| <input type="checkbox"/> Canned & Preserved Seafood | <input type="checkbox"/> Organic Chemicals |
| <input type="checkbox"/> Carbon Black Manufacturing | <input type="checkbox"/> Paint Formulating |
| <input type="checkbox"/> Cement Manufacturing | <input type="checkbox"/> Paving & Roofing Materials |
| <input type="checkbox"/> Coal Mining | <input type="checkbox"/> Pesticide Chemicals |
| <input type="checkbox"/> Coil Coating | <input type="checkbox"/> Petroleum Refining |
| <input type="checkbox"/> Copper Forming | <input type="checkbox"/> Pharmaceutical Manufacturing |
| <input type="checkbox"/> Dairy Products | <input type="checkbox"/> Phosphate Manufacturing |
| <input type="checkbox"/> Electrical & Electronic Components | <input type="checkbox"/> Photographic or X-ray Processing |
| <input type="checkbox"/> Electroplating | <input type="checkbox"/> Plastics Manufacturing |
| <input type="checkbox"/> Explosives Manufacturing | <input type="checkbox"/> Plastics Molding & Forming |
| <input type="checkbox"/> Feedlots | <input type="checkbox"/> Porcelain Enameling |
| <input type="checkbox"/> Ferroalloy Manufacturing | <input type="checkbox"/> Pulp, Paper & Paperboard |
| <input type="checkbox"/> Fertilizer Manufacturing | <input type="checkbox"/> Rubber Manufacturing |
| <input type="checkbox"/> Glass Manufacturing | <input type="checkbox"/> Soap & Detergent Manufacturing |
| <input type="checkbox"/> Grain Mills | <input type="checkbox"/> Steam Electric Power Generating |
| <input type="checkbox"/> Gum & Wood Chemicals Manufacturing | <input type="checkbox"/> Sugar Processing |
| <input type="checkbox"/> Hazardous Waste Combustors | <input type="checkbox"/> Synthetic Fibers |
| <input type="checkbox"/> Hospitals | <input type="checkbox"/> Textile Mills |
| <input type="checkbox"/> Industrial Laundry | <input type="checkbox"/> Timber Products |
| <input type="checkbox"/> Ink Formulating | <input type="checkbox"/> Tobacco Products Processing |
| <input type="checkbox"/> Inorganic Chemicals | <input type="checkbox"/> Transportation Equipment Cleaning |
| <input type="checkbox"/> Iron & Steel Manufacturing | <input type="checkbox"/> Waste Treatment |
| <input type="checkbox"/> Landfills | Describe: _____ |
| <input type="checkbox"/> Leather Tanning & Finishing | _____ |
| <input type="checkbox"/> Meat Products | |

For each item checked above, describe the type of wastewater discharged: *Attach additional sheets if needed.*

Operation / Activity	Description of wastewater discharged from the operation/activity

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 the sanitary sewer?

Yes No

(i.e. interceptors/traps, metals treatment, trench drains, floor sumps, pH neutralization, filtration, etc.)

If yes, indicate pretreatment devices or processes that are used for treating wastewater.

(Check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Air Flotation | <input type="checkbox"/> Neutralization, (pH adjustment) |
| <input type="checkbox"/> Amalgam Separator | <input type="checkbox"/> Oil Separation (sand/oil/water-floor sump) |
| <input type="checkbox"/> Biological (specify): _____ | <input type="checkbox"/> Ozonation |
| <input type="checkbox"/> Centrifuge | <input type="checkbox"/> Precipitation |
| <input type="checkbox"/> Chlorination | <input type="checkbox"/> Sand Interceptor |
| <input type="checkbox"/> Cyclone | <input type="checkbox"/> Screening |
| <input type="checkbox"/> Filtration | <input type="checkbox"/> Sedimentation |
| <input type="checkbox"/> Flocculation | <input type="checkbox"/> Septic Tank |
| <input type="checkbox"/> Flow Equalization | <input type="checkbox"/> Silver Recovery |
| <input type="checkbox"/> Grease Trap / Interceptor | <input type="checkbox"/> Solvent Separation |
| <input type="checkbox"/> Grit Removal | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Ion Exchange | |

Describe the Treatment and/or Treatment Unit(s):

Attach a copy of any chemical analyses performed on your process wastewater flows within the last three (3) years:

Analyses Attached No Analyses Available

Indicate the total daily process (non-domestic) wastewater discharge from your facility. This information may come from an estimate, water bill, flow meter, or other source.

Daily Flow Volumes

- Less than 25,000 gal/day
- More than 25,000 gal/day
- None (Process waste water is hauled by a contract waste hauler, recycled, etc.)
- None produced (domestic only)

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.

Waste Hauler # 1

Type of waste: _____

Name: _____

Address: _____

City: _____ Zip: _____

Telephone: _____

Waste Hauler # 2

Type of waste: _____

Name: _____

Address: _____

City: _____ Zip: _____

Telephone: _____

Business Information

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 shoes, hearing and/or eye protection etc.)

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(chloromethyl)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					

Bases & Neutrals

Compound	Y/N	Quantity/Gallons	Compound	Y/N	Quantity/Gallons
Acenaphthene			3,3-Dichlorobenzidine		
Acenaphthylene			Diethylphthalate		
Anthracene			Dimethylphthalate		
Benzidine			Di-n-butylphthalate		
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					

Other Toxic Pollutants

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		

Conventional & Non-Conventional Pollutants

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
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: _____
Authorized Signature: Corporate officer, general partner, proprietor, or manager who has been assigned authority to sign documents.