CITY OF BURLINGTON
Department of Public Works
Wastewater Utility
2100 S. Pine Street, Burlington, WI 53105
(262) 539-3646 - (262) 539-3 648 fax
www.burlington-wi.gov

NON-RESIDENTIAL WASTE QUESTIONNAIRE

General Information

Standard Industrial Classification Code (SIC)
Company Name: _____
Mailing Address: _____
Physical Address: _____
Name/Title of Signing Official: _____

Contact Official:
Name: _____
Title: _____
Address: _____
Phone: _____

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.

_____ _____
Signature of Official Date Signed

Plant Operational Characteristics

Brief description of manufacturing or service activity on premises:

_____
_____
_____

For Office Use Only

Sampling manhole required: _____ (Initial and Date)
Sampling manhole not required: _____ (Initial and Date)

Prinicipal Raw Materials Used:

_____

_____

Catalysts, Intermediates:

_____

_____

Principal Product or Service (Use Standard Industrial Classification manual if appropriate): _____

_____

Type of Dispatch: Batch _____ Continuous _____
If Batch, average number of batches/24 hours: _____

Is there a scheduled shutdown? Yes _____ No _____
If so, when? _____

Is production seasonal? Yes _____ No _____
If yes, explain indicating month(s) of peak production:

_____

_____

_____

Average number of employees per shift:
1st Shift _____ 2nd Shift_____ 3rd Shift _____

Shift start times: 1st Shift _____ 2nd Shift_____ 3rd Shift _____

Shifts normally worked each day:

	Sun	Mon	Tue	Wed	Thur	Fri	Sat
1st	_____	_____	_____	_____	_____	_____	_____
2nd	_____	_____	_____	_____	_____	_____	_____
3rd	_____	_____	_____	_____	_____	_____	_____

Describe any wastewater treatment equipment or processes in use:

_____

_____

_____

Raw Water Sources:

Source	Quantity (Gallons Per Day)
_____	_____
_____	_____
_____	_____

Describe any raw water treatment processes in use:

_____

_____

_____

List Water Consumption in Plant:

Cooling Water	_____	gallons per day
Boiler Feed	_____	gallons per day
Process Water	_____	gallons per day
Sanitary System	_____	gallons per day
Contained in Plant	_____	gallons per day
Other	_____	gallons per day

List average volume of discharge or water loss to:

City Sewer System	_____	gallons per day
Natural Outlet	_____	gallons per day
Waste Hauler	_____	gallons per day
Evaporation	_____	gallons per day
Contained in Plant	_____	gallons per day

Is discharge to sewer: Intermittent _____ Steady _____

List plant sewer outlets, size, flow: (Attach and Refer to Map)

_____

_____

_____

Is there a Spill Prevention Control and Countermeasure Plan in effect for this plant?

Yes _____ No _____

Please refer to Table 1 on Page 4. Are any of the toxic pollutants listed in the table being used at this facility in manufacutring of the product or is an by-product which may be discharged? If so, please indicate with an "X".

TABLE - 1

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

Acenapthene		Endrin and Metabolites	
Acrolein		Ethylbenzene	
Acrylonitrile		Fluoranthene	
Aldrin/Dieldrin		Haloethers	
Antimony and Compounds		Halomethanes	
Arsenic and Compounds		Heptachlor & Metabolites	
Asbestos		Hexachlorobutadiene	
Benzene		Hexachlorocyclopentadiene	
Benzidine		Hexachlorocyclohexane	
Beryllium and Compound		Isophorone	
Cadmium and Compounds		Lead and Compounds	
Carbon Tetrachloride		Mercury and Compounds	
Chlordane		Naphthalene	
Chlorinated Benzene		Nickel and Compounds	
Chlorinated Ethane		Nitrobenzene	
Chlorinalkyl Ethers		Nitrophenols	
Chlorinated Naphthalene		Nitrosamine	
Chlorinated Phenols		Pentachlorophenol	
Chloroform		Phenol	
2-Chlorophenol		Phthalate Esters	
Chromium and Compounds		Polychlorinated Byphenyls (PCB)	
Copper and Compounds		Polynuclear Aromatic Hydrocarbon	
Cyanide		Selenium and Compounds	
DDT and Metabolites		Silver and Compounds	
Dichlorobenzene		2, 3, 7, 8-Tetrachlorodibenzo- p-dioxin (TCDD)	
Dichlorobenzidine		Tetrachloroethylene	
Dichloroethylenes		Thallium and Compounds	
2, 4-Dichlorophenol		Toluene	
Dichloropropane/Dichloropropene		Toxaphene	
2, 4-Dimethylphenol		Trichloroethylene	
Dinitrotoluene		Vinyl Chloride	
Diphenylhydrazine		Zinc and Compounds	
Endosulfan & Metabolites			

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

Pretreatment

Is this plant subject to an existing Federal Pretereatment Standard?

Yes _____ No _____

If Yes, are Pretreatment Standards being met on a consistent basis?

_____

_____

Are additional pretreatment facilities and/or operation and maintenance required to meet Pretreatmetn Standards? If additional pretreatment and/or operation and maintenance are required, list the schedule by which they are provided:

_____

_____

_____

_____