



Wastewater Discharge Report

Return to: City of Redmond
 Business Licensing
 411 SW 9th St
 Redmond, OR 97756
 Phone: 541-504-5075

This report is intended to provide information needed by the City of Redmond to comply with state and federal wastewater discharge requirements. Failure to submit a complete and accurate report may result in penalties including the termination of service. The City may verify the data submitted through phone calls, site inspection, and sample analysis. Answer each question accurately to reflect existing conditions and conditions proposed to occur within 3 years. Attach additional sheets as necessary.

General Information

1.	Company Name:	
2.	Facility Name:	
3.	Business License Number	
4.	Site Address:	
	City, State, Zip:	
5.	Mailing Address:	
	City, State, Zip:	
6.	Representative completing this form	
	Name:	
	Title:	
	Phone Number:	
	Fax Number:	
	Email Address:	
7.	Person to be contacted in case of emergency	
	Name:	
	Title:	
	Phone Number:	
	Email Address:	
8.	Property owner	
	Name:	
	Title:	
	Phone Number:	
	Fax Number:	
	Email Address:	
9.	Will the building be connected to the public sewer system? Yes <input type="checkbox"/> No <input type="checkbox"/> , Wastewater disposal method:	
10.	Describe in detail the type of business activity conducted at this site. Include primary products or services:	

Business Activities

11.	North America Industry Classification System (NAICS) Code(s): Refer to: http://www.census.gov/epcd/www/naics.html			
12.	Starting date for your business at this site:			
13.	Construction date(s) for building(s) at this site (if known):			
14.	Normal operating schedule:	Actual times:	Days/week:	
15.	Number of employees per each shift:			
16.	Water consumption (gallons/month):		Estimate <input type="checkbox"/>	Actual <input type="checkbox"/>
17.	Wastewater volume generated (gallons/month):		Estimate <input type="checkbox"/>	Actual <input type="checkbox"/>

18.	Is this facility a categorical industry as defined by 40 CFR 403 through 40 CFR 471? (also check the appropriate category below)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unknown <input type="checkbox"/>
	<input type="checkbox"/> Aluminum Forming <input type="checkbox"/> Battery manufacturing <input type="checkbox"/> Builders' paper and board mills <input type="checkbox"/> Carbon black manufacturing <input type="checkbox"/> Coil coating <input type="checkbox"/> Copper forming <input type="checkbox"/> Electrical or electronic component <input type="checkbox"/> Electroplating <input type="checkbox"/> Feedlot <input type="checkbox"/> Fertilizer manufacturing <input type="checkbox"/> Glass manufacturing <input type="checkbox"/> Grain mill <input type="checkbox"/> Ink formulating <input type="checkbox"/> Inorganic chemicals manufacturing <input type="checkbox"/> Iron and steel manufacturing <input type="checkbox"/> Leather tanning and finishing	<input type="checkbox"/> Metal finishing <input type="checkbox"/> Metal molding or casting <input type="checkbox"/> Nonferrous metals forming or metal powders <input type="checkbox"/> Nonferrous metals manufacturing <input type="checkbox"/> Organic chemicals, plastics, & synthetic fibers manufacturing <input type="checkbox"/> Paint Formulating <input type="checkbox"/> Paving or roofing materials (tars & asphalt) <input type="checkbox"/> Pesticide chemicals <input type="checkbox"/> Petroleum refining <input type="checkbox"/> Pharmaceutical manufacturing <input type="checkbox"/> Porcelain enameling <input type="checkbox"/> Pulp, paper, or fiberboard manufacturing <input type="checkbox"/> Rubber manufacturing <input type="checkbox"/> Soaps or detergent manufacturing <input type="checkbox"/> Steam electric power generating <input type="checkbox"/> Timber products processing		
19.	Will you use EPA Toxics Release Inventory (TRI) chemicals in reportable quantities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Will you use chemicals that are reportable to the Oregon State Fire Marshal?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Identify the above chemicals and quantities used (attach additional sheets if necessary):			
20.	Will your site have an irrigation or drinking water well?	Yes <input type="checkbox"/> , Qty:	No <input type="checkbox"/>	
21.	Will your site have any underground injection control facilities (UICs such as drywells, drill holes, or drainage pipe galleries)?	Yes <input type="checkbox"/> , Qty:	No <input type="checkbox"/>	
22.	Will you store chemicals at your facility in a volume greater than 5 gallons each?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	If yes, attach a description of the contents, container size and type, storage location, frequency and method of container cleaning. Indicate if buried metal containers have cathodic protection.			
23.	Has your company ever been issued a local, state, or federal environmental permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	If so, list the permit(s):			

Waste Discharges

24.	Check all types of operations and wastewater generated at the site:			
	<input type="checkbox"/> Air pollution control equipment <input type="checkbox"/> Anodizing <input type="checkbox"/> Beverage bottling <input type="checkbox"/> Boiler/cooling blowdown <input type="checkbox"/> Chemical etching or milling <input type="checkbox"/> Cooling water, contact <input type="checkbox"/> Cooling water, non-contact <input type="checkbox"/> Domestic waste <input type="checkbox"/> Electroless plating <input type="checkbox"/> Electroplating <input type="checkbox"/> Equipment manufacturing <input type="checkbox"/> Fertilizer application service <input type="checkbox"/> Food processing <input type="checkbox"/> Food service establishment <input type="checkbox"/> Groundwater treatment <input type="checkbox"/> Laundry	<input type="checkbox"/> Medical/Dental services <input type="checkbox"/> Metal coating (chromating, phosphating, coloring) <input type="checkbox"/> Pesticide application service <input type="checkbox"/> Photographic/film processing <input type="checkbox"/> Plastics processing <input type="checkbox"/> Powder coating <input type="checkbox"/> Printed circuit board manufacturing <input type="checkbox"/> Printing and publishing <input type="checkbox"/> Process water <input type="checkbox"/> Slaughter/meat packing/rendering <input type="checkbox"/> Vehicle or equipment maintenance or repair <input type="checkbox"/> Vehicle or equipment washdown <input type="checkbox"/> Waste recycling <input type="checkbox"/> Water treatment <input type="checkbox"/> Wood preserving <input type="checkbox"/> Other, list here:		
25.	Will you use fats, oil, grease (cooking or petroleum), or dairy products in your business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
26.	Will there be a garbage disposal unit (food grinder) at your business site?	Yes <input type="checkbox"/> , Qty:	No <input type="checkbox"/>	

27.	Will there be an interceptor, separator, or other device installed to pretreat your wastewater prior to discharge? If so, check all that apply below:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Amalgam separator <input type="checkbox"/>	Hair trap <input type="checkbox"/>	Sand interceptor <input type="checkbox"/>	
	Amalgam chairside trap <input type="checkbox"/>	Lint trap <input type="checkbox"/>	Silver recovery system <input type="checkbox"/>	
	Grease interceptor, outside <input type="checkbox"/>	Oil/water separator <input type="checkbox"/>	Other (list):	
	Grease interceptor, inside <input type="checkbox"/>	pH neutralizer <input type="checkbox"/>	Other (list):	
	What is your normal frequency of maintenance for the pretreatment device?			
	Where will you dispose of materials removed during pretreatment device maintenance?			
28.	Will you have floor drains in areas other than restrooms? Yes <input type="checkbox"/> , Qty & locations:		No <input type="checkbox"/>	
29.	Will you generate hazardous waste as defined by Oregon DEQ and federal regulations (RCRA)? Yes <input type="checkbox"/> , Generator status:		No <input type="checkbox"/>	
	Will you discharge any RCRA listed or characteristic hazardous wastes to the sanitary sewer? Yes <input type="checkbox"/> , Waste description:		No <input type="checkbox"/>	
	Has your facility claimed the RCRA domestic sewer exclusion? Yes <input type="checkbox"/> , Filing date:		No <input type="checkbox"/>	
	If so, list these wastestreams:			
30.	Will any liquid, gaseous, or sludge wastes be generated but not discharged to the public sewer system? Yes <input type="checkbox"/>		No <input type="checkbox"/>	
	For these wastes, will your company practice:		Onsite storage <input type="checkbox"/>	Onsite disposal <input type="checkbox"/>
			Offsite storage <input type="checkbox"/>	Offsite disposal <input type="checkbox"/>
	Briefly describe the method(s) of storage or disposal of these wastes, including names of all waste haulers:			
31.	Do you have a wastewater slug control document to prevent spills of chemicals or slug discharges from entering the City's sanitary sewer or storm systems? If so, please attach.		Yes <input type="checkbox"/>	No <input type="checkbox"/>
32.	Provide any additional comments or explanations here:			

"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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Printed Name

Title

Signature

Date

(____)_____
Phone

The signing official must have authorization to provide such information on behalf of the company, corporation or partnership. In accordance with Oregon's Public Records Law, information and data provided in this questionnaire may be available for public review. Requests for confidential treatment of information will be governed by procedures specified in Oregon's Public Records Law.