



CITY OF TERRELL INDUSTRIAL WASTE SURVEY

Please return or Mail this form to the following:
City of Terrell
Attn: Terry Capehart, Director Municipal Development
P.O. Box 310/201 East Nash
Terrell, Texas 75160
Or email to: tcapehart@cityofterrell.org

A copy of this form can be printed
from the City's website
www.cityofterrell.org/utility.htm

If you have any questions or require
technical assistance call Sonny Groessel,
Pretreatment Coordinator
At: 972-551-6600
Email: sgroessel@cityofterrell.org

GENERAL INFORMATION: (PLEASE PRINT)

Industry Representative: _____

Title: _____

Industry (IU)/Business Name: _____

Premises Address: _____

Mailing Address (if different from above): _____

Phone #: _____ Fax #: _____ email: _____

Standard Industrial Classification (SIC) Code: _____

What does the business manufacture or service provided: _____

What are the raw materials used: _____

Is water used in the manufacturing process? Yes No N/A

Is the water other than toilets, drinking fountains and hand wash sinks discharged? Yes No

Does the business use solvents, chemicals, paints/inks or oils? Yes No N/A

How are these disposed? _____

Is there any Hazardous Materials on site? Yes No Location: _____

Are there any floor drains in the facility? Yes No Location: _____

What is the square footage of the facility? _____ # of employees? _____

What are the hours of operation? _____ # of shifts worked? _____

PRETREATMENT

Is this plant, or any processes, subject to an existing Federal Categorical Pretreatment Standard?

_____ YES _____ NO

If so, describe the Category and state whether the Standards are being met on a constant basis:

Are additional pretreatment facilities required to meet the Standards? _____ YES _____ NO

If so, please list a schedule by which they will be provided. _____

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: _____ Date: _____