

**SUBMIT**

**CITY OF LUDINGTON**  
**WASTEWATER SURVEY FOR NON-RESIDENTIAL USERS**  
**APPLICATION FOR WASTEWATER DISCHARGE PERMIT OR**  
**PERMIT RENEWAL**

SECTION A-GENERAL INFORMATION

A-1 Company name, mail address and telephone number:

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A-2 Name, title and telephone number of the person authorized to represent this firm in Official dealings with the Sewer Use Authority and/or the City of Ludington:

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A-3 Alternate person to contact concerning information provided herein:

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone No. \_\_\_\_\_

A-4 Identify the type of business conducted, (auto body, food processing, hospital, meat processing, metal plating, foundry, etc).

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Note to signing Official: In accordance with Title 40 of the Code of Federal Regulations, Part 403, Section 403.14, information and data provided in this questionnaire which identifies the nature and frequency of discharge shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed by procedures specified in 40CFR Part 2. Should a discharge permit be required for your facility, the information in the questionnaire will be used to issue the permit.

This is to be signed by an official of your firm after adequate completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining information reported herein, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

Date \_\_\_\_\_ Signature of Official \_\_\_\_\_

A-5 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts:

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A-6 Standard Industrial Classification Number(s) (SIC Code) for your facility:

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A-7 This facility generates the following types of waste: (check all that apply)

	<u>Average gallons per day</u>	<u>estimated</u>	<u>measured</u>
1. Domestic waste (restrooms, showers, etc.)	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. Cooling water-non contact	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. Boiler/tower blow down	_____	<input type="checkbox"/>	<input type="checkbox"/>
4. Cooling water, contact	_____	<input type="checkbox"/>	<input type="checkbox"/>
5. Process	_____	<input type="checkbox"/>	<input type="checkbox"/>
6. Equipment/facility wash down	_____	<input type="checkbox"/>	<input type="checkbox"/>
7. Air pollution control	_____	<input type="checkbox"/>	<input type="checkbox"/>
8. Storm water run off to sewer	_____	<input type="checkbox"/>	<input type="checkbox"/>
9. (Other) describe	_____	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL A-7(1) thru A-7(9)	_____		

A-8 Wastewaters are discharged to: (check all that apply)

	<u>Average gallons per day</u>	<u>estimated</u>	<u>measured</u>
Sanitary Sewer	_____	<input type="checkbox"/>	<input type="checkbox"/>
Storm Sewer	_____	<input type="checkbox"/>	<input type="checkbox"/>
Surface Water	_____	<input type="checkbox"/>	<input type="checkbox"/>
Ground Water	_____	<input type="checkbox"/>	<input type="checkbox"/>
Waste Haulers	_____	<input type="checkbox"/>	<input type="checkbox"/>
Evaporation	_____	<input type="checkbox"/>	<input type="checkbox"/>
(Other) describe	_____	<input type="checkbox"/>	<input type="checkbox"/>

Provide the name and address of Waste Haulers used:

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A-9 Is a Spill Prevention Control and Countermeasure Plan prepared for this facility?

Yes                       No \*

\* If No is the answer, one must be in place for a permit renewal or the issuance of a Wastewater Discharge Permit.

SECTION B- FACILITY OPERATION CHARACTERISTICS

B-1 Number of employee shifts worked per 24-hour day: \_\_\_\_\_  
Average number of employees per shift: \_\_\_\_\_

B-2 Starting time for each shift: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

THE FOLLOWING INFORMATION MUST BE COMPLETED FOR EACH PRODUCT LINE:

B-3 Principle product produced:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B-4 Raw materials and process additives used:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B-5 Production process is:  
 Batch  Continuous  Both  %Batch  %Continuous

B-6 Hours of operation: \_\_\_\_\_ a.m. to \_\_\_\_\_ p.m. Continuous

B-7 Is production subject to seasonal variation?  Yes  No

If yes, briefly describe seasonal production cycle:  
\_\_\_\_\_  
\_\_\_\_\_

B-8 Are any process changes or expansions planned during the next three years?

Yes  No  
If Yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

SECTION C- WASTEWATER INFORMATION

C-1 If your facility employs processes in any of the 34 Industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. (check all that apply)

- |     |                                  |                          |
|-----|----------------------------------|--------------------------|
| 1.  | Adhesives                        | <input type="checkbox"/> |
| 2.  | Aluminum forming                 | <input type="checkbox"/> |
| 3.  | Auto & other laundries           | <input type="checkbox"/> |
| 4.  | Battery manufacturing            | <input type="checkbox"/> |
| 5.  | Coal mining                      | <input type="checkbox"/> |
| 6.  | Coil coating                     | <input type="checkbox"/> |
| 7.  | Copper forming                   | <input type="checkbox"/> |
| 8.  | Electric & electronic components | <input type="checkbox"/> |
| 9.  | Electroplating                   | <input type="checkbox"/> |
| 10. | Explosive manufacturing          | <input type="checkbox"/> |
| 11. | Foundries                        | <input type="checkbox"/> |
| 12. | Gum and wood chemicals           | <input type="checkbox"/> |
| 13. | Inorganic chemicals              | <input type="checkbox"/> |
| 14. | Iron & steel                     | <input type="checkbox"/> |
| 15. | Leather tanning finishing        | <input type="checkbox"/> |
| 16. | Mechanical products              | <input type="checkbox"/> |
| 17. | Nonferrous metals                | <input type="checkbox"/> |
| 18. | Ore mining                       | <input type="checkbox"/> |
| 19. | Organic chemicals                | <input type="checkbox"/> |
| 20. | Paint & ink                      | <input type="checkbox"/> |
| 21. | Pesticides                       | <input type="checkbox"/> |
| 22. | Petroleum refining               | <input type="checkbox"/> |
| 23. | Pharmaceuticals                  | <input type="checkbox"/> |
| 24. | Photographic supplies            | <input type="checkbox"/> |
| 25. | Plastics & synthetic materials   | <input type="checkbox"/> |
| 26. | Plastics processing              | <input type="checkbox"/> |
| 27. | Porcelain enamel                 | <input type="checkbox"/> |
| 28. | Printing & publishing            | <input type="checkbox"/> |
| 29. | Pulp & paper                     | <input type="checkbox"/> |
| 30. | Rubber                           | <input type="checkbox"/> |
| 31. | Soaps & detergents               | <input type="checkbox"/> |
| 32. | Steam electric                   | <input type="checkbox"/> |
| 33. | Textile mills                    | <input type="checkbox"/> |
| 34. | Timber                           | <input type="checkbox"/> |

Other Business Activity:

- |                                  |                          |
|----------------------------------|--------------------------|
| Dairy products                   | <input type="checkbox"/> |
| Slaughter/Meat Packing/Rendering | <input type="checkbox"/> |
| Food/Edible Products Processor   | <input type="checkbox"/> |
| Beverage Bottler                 | <input type="checkbox"/> |

C-2 Pretreatment devices or processes used for treating wastewater or sludge: (check all that apply)

- Air flotation
- Centrifuge
- Chemical precipitation
- Chlorination
- Cyclone
- Filtration
- Flow equalization
- Grease or oil separation
- Type: \_\_\_\_\_
- Grease trap
- Grit removal
- Ion exchange
- Neutralization, pH correction
- Ozonation
- Reverse Osmosis
- Screening
- Sedimentation
- Septic tank, tanks
- Solvent Separation
- Spill protection, prevention
- Sump
- Biological treatment
- Type: \_\_\_\_\_
- Rain water diversion or storage
- Type: \_\_\_\_\_
- Other chemical treatment
- Type: \_\_\_\_\_
- Other physical treatment
- Type: \_\_\_\_\_
- No pretreatment provided

C-3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this questionnaire. Be sure to include the date, name of laboratory used and the location from which the sample(s) were taken.