



Wallace Regional Wastewater Treatment Plant Industrial Waste Survey Short Form

This form has been sent to your business to determine types and sources of wastewater that are entering the Town of Wallace's Wastewater Treatment Plant. This form must be completed in accordance with section 5.7 of the Town of Wallace's Sewer Use Ordinance by current and potential industrial and commercial users of the Town's sewer system. Our Sewer Use Ordinance can be examined during normal business hours at the Town Hall, 316 E. Murray St., Wallace. If you have any question or concerns while completing the form please contact Lisa Cottle at 910-665-2091.

If you are not currently a user of the Town of Wallace's sewer system and you do not plan to request use of the system, please indicate this in the comments section of the form.

Representative completing survey (please Print) _____

Name of Business _____

Address _____

City/State/Zip Code _____

Telephone: _____ Fax: _____

Number of Employees _____

What Standard Industrial Classification (SIC) Code(s) do you report under?

_____, _____, _____, _____.

Briefly describe your business include products manufactured or services performed

Please list all water uses and **approximate** volume used in gallons per day for each use, including facility washdown water.

Water Use	Volume Used (gallons per day)
Process:	
Facility Washdown	
Domestic(bathrooms, cafeteria)	
Total:	

SURVEY CONTINUED ON REVERSE



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Briefly describe any existing or planned pretreatment equipment in line with your wastewater discharge (e.g. grease trap, sand filter, oil/water separator):

Do you utilize or plan to utilize commercial waste haulers or hazardous waste haulers such as Safety-Kleen? Please list those below:

If your business is or will be a food service establishment, please complete the following:

Type of food being prepared/served	Number of meals/day**	Number of seats available for customers	Will your establishment provide take-out options? Yes or No

** Breakfast + Lunch + Supper =3, Lunch + Supper =2, Breakfast + Lunch = 2

Comments:

Our Sewer Use Ordinance requires that an Authorized Representative of the User sign all reports to the Sewer Authority. Authorized Representative is defined as a Person responsible for Principle Business decisions or other policy decisions for the facility.

To the Best of my knowledge the information on this form is true and accurate,

Print Name _____

Signature _____ Date _____

Title _____

Failure to return this form is enforceable in accordance with the Town of Wallace's Sewer Use Ordinance.

Return this form within 30 days to:

**Town of Wallace Attn: Lisa Cottle
316 E Murray St
Wallace, NC 28466**