



Wastewater Profile for Non-Residential Establishments

Submit the completed profile and attach any additional documents

Date: _____

Company Information

Business Name: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____

Phone: _____ Work Phone: _____ Email: _____

Business Description: _____

Mailing Address if different from above: _____

Number of Employees per shift: 1/ _____ 2/ _____ 3/ _____

Hours of Operation per shift: 1/ _____ 2/ _____ 3/ _____

1. Standard Industrial Classification (NAICS/SIC) Number: _____

SIC Code Web Pages- www.naics.com/search.htm
www.census.gov/epcd/naics02/naicod02.htm

2. Check all activities performed within this facility:

Office

Retail Briefly describe what you sell _____

Warehouse Briefly describe what is warehoused _____

Manufacturing Briefly describe what you manufacture _____

3. List principal raw materials that will be used: _____

4. List types of chemicals (in greater quantities than five gallons) that will be used: _____

5. Will this facility be preparing food or have a cafeteria on site? Yes No

If yes, indicate Grease Trap size (gallons) _____

6. Approximate average of water usage or expected water usage in (gallons/ per day).
Account Number: _____

7. Does this facility discharge wastewater (other than domestic waste from bathrooms, etc.) to the public sewer system? Yes No

8. Does this facility have floor drains in the process area or chemical storage area(s)? Yes No

9. Does this facility use any products containing PHOSPHORUS? Yes No

10. Does this facility use any products containing AMMONIA? Yes No

11. Does this facility use INKS or DYES? Yes No

12. Does this facility use SOLVENTS or THINNERS? Yes No

Is this facility classified with Effluent Guidelines found in 40 CFR (Parts 400-699)? Yes No

Check the regulated categories below. Definitions of 40 CFR categories can be found at the following US EPA Website: <http://www.gpoaccess.gov/cfr/index.html>

Applicable Category and Description (if any) _____

List any environmental control permits that are held by your facility (air, stormwater, etc.): _____

Will this facility generate any Hazardous Waste? _____

Estimated gallons or pounds of total waste per year: _____

I certify under penalty of law 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.

Date: _____ Name (Print): _____

Signature: _____ Title: _____

NOTE: All questions in the profile must be answered in order to be considered complete.

If you have any questions please contact:

Village of Addison Environmental Services Division

Environmental Compliance Coordinator

(630) 279-2140