

**City of Ames, Iowa
Water and Pollution Control**

Industrial Waste Questionnaire, Short Form

Facility Name: _____

Address: _____

Provide a general description of business/industry and typical daily activities:

Provide the NAICS or SIC code for the primary business activity: _____

Estimate how much water the facility uses during a typical work day:

☐ Less than 1,000 gallons ☐ 1,000 – 10,000 gallons ☐ 10,000 – 25,000 gallons ☐ More than 25,000 gallons

Does the facility have a laboratory?

☐ Yes ☐ No

If yes, please describe:

Are any hazardous chemicals stored on site?

☐ Yes ☐ No

If yes, please describe (include quantities):

Does the facility have a boiler, water softener, chiller system, etc?

☐ Yes ☐ No

If yes, please describe:

Does the facility discharge anything besides domestic sewage into the sewer system, possibly through floor drains, mop sinks, kitchen sinks, etc? ☐ Yes ☐ No

If yes, please describe:

Is any solid or liquid waste hauled off-site? ☐ Yes ☐ No

If yes, describe the waste and where it is hauled for disposal:

Does the facility perform any of the following processes? *Check all that apply.*

Yes	No		Yes	No	
		Metal Manufacturing (Forming, Casting, Molding, etc.)			Chemical Production (Organic, Inorganic, Pesticide, etc.)
		Food Processing			Pharmaceutical Production
		Metal Finishing (Plating, Coating, etc.)			Leather Tanning/Finishing
		Battery Manufacturing			Plastic Molding/Forming
		Fertilizer Manufacturing			Porcelain Enameling
		Glass Manufacturing			Rubber Manufacturing
		Ink/Dye/Pigment/Paint Formulating			Soap/Detergent Manufacturing
		Electronic Component Manufacturing			Grain Processing

Signature*

Date

Name (Printed)

Title: _____

Company: _____

Phone: _____

E-mail: _____

Fax: _____

*The above-named person will be the primary contact for all correspondence between the industry and the City of Ames Water and Pollution Control Department.

Please submit the completed form by one of the following ways:

Water & Pollution Control
1800 E. 13th St., Building 1
Ames, IA 50010

E-Mail
Pretreatment@cityofames.org

Fax
(515) 239-5251