



**City of St. Joseph, MO, Water Protection Division
Industrial Wastewater Survey Questionnaire - Short Form**

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Please complete this form in its entirety and return it, signed and dated, to the following address:
St. Joseph Water Protection, 3500 State Route 759, St. Joseph, MO 64504

If your business has more than one location in the City of St. Joseph, please submit a separate questionnaire for each location.

Company Name	
Facility Physical Address	
Facility City & State	
Company Mailing Address (if different than above)	
Company Mailing City & State	
Name & Title of Primary Contact	
Telephone #	Primary Contact Email Address
Name & Title of Alternate Contact	
Telephone #	Alternate Contact Email Address

Please provide a brief description of the primary manufacturing or service activity at the premise address and the applicable Standard Industrial Classification (SIC) Code(s).

Process Activity Description	SIC #

Type of wastewater to be discharged to the sanitary or combined sewer system*

Domestic and/or Industrial

* "Domestic" wastewater includes wastewater produced from the non-commercial preparation of food or wastewater containing only human excrement and similar matter from the sanitary conveniences of dwellings, commercial, industrial, or institutional buildings. **All other wastewater is to be classified as "Industrial."**



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	YES	NO	N/A
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1. Are any liquids, acids, chemicals, or waste products stored which are considered flammable, corrosive, hazardous, or that bear any hazard warning label?

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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2. Are any chemicals, acids, or liquids stored in areas near floor drains?

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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If you answered "Yes" to question #1 or #2, please describe the products below.

3. Is your domestic wastewater separated from your industrial wastewater flow?

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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4. Is your industrial wastewater discharged to the sewer system?

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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5. Is your industrial wastewater pretreated prior to discharge to the sewer?

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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If you answered "Yes" to question #5, for what pollutants is it treated?

6. Have laboratory analyses been conducted on you industrial wastewater?

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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If you answered "Yes" to question #6 please attach a copy of a laboratory report.

7. What is the average daily water use for your facility in gallons per day?

I certify under penalty of law that 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.

Signature

Date

Printed Name and Title