



PINE BLUFF WASTEWATER UTILITY

1520 S. Ohio Street • Pine Bluff, Arkansas 71601-6055 • 870-535-6603 • FAX 870-535-6243

WASTEWATER QUESTIONNAIRE FORM

General Information

Company Name: _____

Address: _____

City, State, Zip: _____

Phone/Fax: _____

Contact Official: _____

Years of Operation: _____

Manufacturing Information

Please provide a brief description of your process activities:

Principal Raw Materials Used:

List Any Chemical and Solvents Used:

Number of Employees per shift:

1st _____ 2nd _____ 3rd _____

Is the production continuous or seasonal? _____

Is your facility expected to expand its operation within the next 12 months? *(if yes, please explain below):*

Yes No

Water Usage

List average water consumption in cubic feet per month *(can be obtained from your monthly water bill):*

What is your estimated water usage for production?

Waste Control

Please check the following pollutants which may be in your wastewater from process operations.

Arsenic	<input type="checkbox"/>	Manganese	<input type="checkbox"/>	Zinc	<input type="checkbox"/>
Barium	<input type="checkbox"/>	Mercury	<input type="checkbox"/>	Cyanide	<input type="checkbox"/>
Cadmium	<input type="checkbox"/>	Molybdenum	<input type="checkbox"/>		
Chromium	<input type="checkbox"/>	Nickel	<input type="checkbox"/>		
Copper	<input type="checkbox"/>	Selenium	<input type="checkbox"/>		
Lead	<input type="checkbox"/>	Silver	<input type="checkbox"/>		

Does your facility have any type of system for reducing waste discharged to the city sewer system (*pretreatment equipment*)? (*if yes, please explain below*)

Yes No

List any hazardous waste which may be stored and disposed of at your company.

Do you have Material Safety Data Sheets (MSDS) for chemical used at your facility?

Yes No

Signature of Company Official

Date

PLEASE DO NOT WRITE BELOW THIS LINE

Date Received: _____

Approved by: _____

Title: _____

Comments:
