FACILITY NAME:	NPDES PERMIT NUMBER:	EPA ID NUMBER: (for official use only)	*Form Approved OMB Number Approval Expires XX-XX-XX*

SIGNIFICANT INDUSTRIAL USER (SIU) INFORMATION

Supply the following information for each SIU. If more than one SIU discharges to your treatment works, copy questions C.5 – C.10 and provide the information requested for each SIU.

C.5. Significant Industrial User Information. Provide the name and address of each SIU discharging to your treatment works. (Submit additional pages as necessary.)

Name _____

Mailing address _____

_____

_____

C.6. Industrial Processes. Describe all of the industrial processes that affect or contribute to the SIU's discharge.

_____

_____

_____

C.7. Principal Product(s) and Raw Material(s).

Principal product(s):

_____

_____

Principal raw material(s):

_____

_____

C.8. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (____ continuous or ____ intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (____ continuous or ____ intermittent)

C.9. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits ____ Yes ____ No

b. Categorical pretreatment standards ____ Yes ____ No

If subject to categorical pretreatment standards, which category and subcategory?

_____

_____

C.10. Problems at the Treatment Works Attributed to Waste Discharged by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at your treatment works in the past three years?

____ Yes ____ No

If yes, describe each episode.

_____

_____

_____

_____

_____

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