



Industrial Pretreatment Division

Industrial Waste Questionnaire

Submit this completed and signed questionnaire via mail, email, or fax to:

City of Northglenn
Industrial Pretreatment Division
2350 W. 112th Ave.
Northglenn, CO 80234

Email: ipprogram@northglenn.org
Phone: 303-450-4026
Fax: 303-450-4020

All Businesses Must Complete this Form to Fulfill EPA Regulation.

For questions regarding this questionnaire, please contact the Industrial Pretreatment Division at 303-450-4026. Based upon your business or wastewater discharge classification, an additional survey may be required.

I. Contact Information (Please Print or Type)

Business Name: _____
Mailing Address: _____
Contact Name: _____ Title: _____
Phone: _____ Email: _____
Site Address (if different than mailing address): _____
City: _____ Zip: _____ Phone: _____

II. Facility Operations and Wastewater Information

1. Type of Business:

Commerical Industrial **SIC Code(s):** _____

2. Check all activities which are or will be present at your facility:

- | | | |
|--|---|---|
| <input type="checkbox"/> Assembly | <input type="checkbox"/> Laboratory | <input type="checkbox"/> Photo Processing |
| <input type="checkbox"/> Automotive Services | <input type="checkbox"/> Machine Shop | <input type="checkbox"/> Research |
| <input type="checkbox"/> Biotechnology | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Dental Office | <input type="checkbox"/> Material Transfer/Distribution | <input type="checkbox"/> Vehicle/Equipment Wash |
| <input type="checkbox"/> Dry Cleaning/Laundry | <input type="checkbox"/> Medical Office | <input type="checkbox"/> Warehousing |
| <input type="checkbox"/> Electroplating | <input type="checkbox"/> Metal Finishing | <input type="checkbox"/> Wholesale Trade |
| <input type="checkbox"/> Flammables/Explosives | <input type="checkbox"/> Office (not medical) | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Food Processing | <input type="checkbox"/> Painting/Stripping/Finishing | _____ |
| <input type="checkbox"/> Food Service/Restaurant | <input type="checkbox"/> Printing | _____ |

3. Briefly describe your business activities (processes, products, services, etc.):

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4. Is your business a Food Service Establishment (FSE)*?

Yes No

* "Food Service Establishment," (FSE) is any facility engaging in preparing food for consumption by the public such as, but not limited to, restaurants, commercial kitchens, caterers, hotels, bakeries, public and private schools, hospitals, or care institutions.

If yes, please fill out the Grease Interceptor Sizing Form (attached) and attach a kitchen design plan*.

* The kitchen design plan should include drawings displaying the location of all kitchen equipment, floor sinks, and floor drains. Hand drawings or copies of plumbing/equipment plans are acceptable.

5. Indicate the type and amount of solutions or materials used in manufacturing, cleaning, or other operations whose containers exhibit hazard warning labels. (Attach additional sheets as needed or MSDS documents. Amounts used should be listed in gallons/per day).

6. Description of facilities (Kitchen, number of restrooms, laundry facilities, chemical storage, etc.):

7. Are there any floor drains in the work storage areas at your facility?

Yes No If yes, please list location(s): _____

8. Water use (What it is used for and the approximate quantities in gallon/per day?):

III. Type of Wastewater Discharged into Municipal Sewer

Domestic Industrial

"Domestic" (sanitary) wastewater is liquid wastes: (a) from the non-commercial preparation, cooking, and handling of food, (b) containing only human excrement and similar matter from the sanitary conveniences of dwellings, commercial buildings, industrial facilities, and institutions. All other wastewater should be considered "Industrial."

Describe any pretreatment devices or processes used for treating wastewater or sludge. (Grease interceptor, DAF, filtration, pH adjustments, etc.):

IV. Certificate of Information

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining this information reported herein, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

Name: _____

(Please Print)

Title: _____

Signature: _____

Date: _____

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Fats, Oils, and Grease (FOG) Policy Grease Interceptor Sizing Form

Company Name: _____

Address: _____

Table 1: GGI Sizing Based on Fixture Flow

Fixture Type	Quantity	Fixture Surge Flow Rate (gpm)	Flow (gpm) = Quantity x Fixture Surge Flow Rate
Hand Sink		N/A ¹	N/A ¹
Bar Sink		N/A ¹	N/A ¹
Single Compartment Sink		20	
Double Compartment Sink		25	
Triple Compartment Sink		30	
Mop Sink		N/A ¹	N/A ¹
Wok Range (1-5 Wok Stations)		15	
Wok Range (5+ Wok Stations)		20	
Dishwasher (0-30 gallons)		15	
Dishwasher (30-50 gallons)		25	
Dishwasher (50-100 gallons)		40	
Floor Drains		N/A ¹	N/A ¹
Other ² : _____			
Please Return Form To: City of Northglenn Attn: Industrial Pretreatment Program 2350 W. 112th Ave. Northglenn, CO 80234 Phone: 303-450-4026 ipprogram@northglenn.org		Total Flow (gpm)	
		Loading Factor	
		Coffee Shop=0.5	
		Other Users ³ =1.0	
		Retention Time	30 Minutes
		GGI Size (gallons) =	
		Total Flow x	
		Loading Factor x	
		Retention Time	
		GGI Inlet Pipe Size ⁴	
Maximum GGI Size (gallons) ⁵			

Completed By (Please Print): _____

Completed By (Signature): _____

Date Completed: _____

* Instructions, Notes, and Tables are Located on Next Page

Grease Interceptor Sizing Form Instructions**Instructions:**

- a) Form must be completed and stamped by a licensed Professional Engineer.
- b) Include with completed GI Sizing Form:
 - Completed Industrial Waste Questionnaire
 - Completed Tableized List of Fixtures
 - Building/Kitchen Floor Plan with Fixtures Noted
 - Anticipated BMPs used to limit FOG entering system
 - Anticipated maintenance schedule for grease interceptor
- c) Return completed form and attachment to the City of Northglenn

Notes:

- 1) Hand sinks, bar hand sinks, mop sinks, and floor drains must be counted and connected to the GGI, but due to the frequency of typical use, the surge flow rate is not included in the calculation.
- 2) The surge flow rate for plumbing fixtures not listed shall be based on manufacturer rating or drain pipe size in Table 2. If a fixture type is listed and the listed standard surge flow rate is larger than that provided by a manufacturer, the lower surge flow rate may be used. Documentation of manufacturer rating used in the calculations shall be provided during the plan review.
- 3) The Division may apply a loading factor other than 1.0 for users if special circumstances warrant.
- 4) Enter the maximum GGI size based on the inlet pipe size from Table 3.
- 5) If the calculated GGI size is greater than the maximum GGI size, than the maximum GGI size shall be used.

Table 2: Surge Flow Rates Based on Fixture Discharge Pipe Size

Fixture Discharge Pipe Size (inches)	Surge Flow Rate (gpm)
1.3	7.5
1.5	15
2.0	22
2.5	30
3.0	37.5
4.0	45

Table 3: GGI Sizing for Unified Building Shells and Maximum GGI Size

GGI Inlet Pipe Size (inches)	GGI Size (gallons)
2	600
3	2000
4	4000
5	7000
6	12000