



Industrial Pretreatment Survey: Food Services

City of Grass Valley, WWTP
Pretreatment Program
125 East Main Street
Grass Valley, California 95945

Business License # _____
Water Account # _____
Wastewater Acct # _____

FOR CITY USE ONLY

Classifications _____

Facility ID # _____

Notes: _____

Failure to complete and return this survey to the address above may result in cessation of sewer service or other enforcement action in accordance with Chapter 13 of the Municipal Code. If you have questions, please contact the Public Works Department, Water and Wastewater Division at (530) 274-4350.

Business Name _____ **Phone** _____

Business Street Address _____

Mailing Address _____

Business Owner(s) _____ **Phone** _____

Is the business: a sole proprietorship, a partnership, or a corporation? (Please Circle One)

Nature of Business (including products and/or services) _____

Federal SIC Number _____ (SIC numbers may be obtained at www.osha.gov/oshstats/sicser.html)

Federal NAICS Number _____ (SIC numbers may be obtained at www.census.gov/epcd/www/naics.html)

How many employees? _____ **Hours of Operation** _____ to _____ **Days per week of operation** _____

Do you or will you use fats, oils or greases in your business? Yes No

Do you have a grease trap or interceptor? Yes No If yes what is the type and size? _____ How often is it serviced? _____ By whom? _____ How is the grease disposed? _____

Do you utilize any other wastewater pretreatment device prior to discharge to the sewer? Yes No If yes, please describe _____ What is the size of the other wastewater pretreatment device? _____

What is done with spent cooking grease? _____

How much is generated? _____ **How is this grease disposed?** _____

What is the destination of grill cleaning residuals? _____

Are emulsifiers or acids used in your business? Yes No If yes, at what location do they enter the sewer system? _____

Do you use chemicals in your business? Yes No **Are these chemicals stored onsite?** Yes No

Do you generate hazardous waste? Yes No **Are there floor drains present at your facility?** Yes No

Do you have an accidental spill prevention plan for your business? Yes No

CERTIFICATION:

I certify that the information contained in this preliminary survey is true, correct, and complete to the best of my knowledge. I certify that I am either an owner of this business or the owner's designated agent. I certify that the business will comply with the following provisions.

- A. To furnish any additional information on wastewater discharges as required by the City of Grass Valley.
- B. To accept and abide by all provisions of Chapter 13 of the City of Grass Valley Municipal Code.
- C. To effectively operate and maintain any wastewater pretreatment equipment to ensure compliance with wastewater discharge limits.
- D. To cooperate at all times with reasonable requests by City personnel in the inspection, sampling, and monitoring of waste discharges to the City's sewer system.
- E. To notify the City of Grass Valley wastewater treatment plant (WWTP) IMMEDIATELY, at (530) 477-4625 in the event of an accident or other occurrence that results in discharge to the sewer of any material that, by nature and/or quantity, violates wastewater discharge limits or constitutes a hazard to WWTP operations or compliance, to City personnel, or to the environment.
- F. To pay the City of Grass Valley the required sewer use fees for wastewater treatment.
- G. To submit, as required by the City, accurate data on non-residential wastewater flows and constituents.
- H. To notify the City of Grass Valley, in writing, if there is a change in the business ownership, operations, or materials stored on site.

Signature _____ **Title** _____ **Date** _____
Printed Name _____ **Phone** _____