

TOWN OF CENTERVILLE
102 EAST SWAN STREET, CENTERVILLE, TN 37033 • 931.729.4246
GARY JACOBS, MAYOR

Industrial Waste Survey Report 2023 Town of Centerville Wastewater Treatment Plant
Centerville, Tennessee NPDES permit# TN0024937.

1. Source of information used to identify users to survey were listings of commercial accounts from billing records, Listings of top water users from billing records, And knowledge of local businesses from town personnel.
2. Survey's were 36 mailed out July 1st 2023.

Follow up actions were 11 second notice letters mailed out September 1st 2023 to users who failed to respond to the first survey .

3. Survey summary 4 food services ,31 medical facilities and other small businesses, And 1SUI.

4. Significant Industrial Users: Agrana fruit LLC is a food processor with pollutants of concern are BOD, TSS, and PH. Agrana fruit LLC is the only SUI at this time.

In conclusion no new wastes of concern were found at this time. Though one small businesses Skaber Manufacturing has expressed A want to start an anodizing process so the Town of Centerville will work with and monitor there activities. Any new businesses that come to Centerville will be issued surveys and reviewed for the posabilities of new pollutants in waste stream. If tou have any questions or concerns about this survey report Please contact Chad Dotson at Town of Centerville Wastewater treatment plant at (931) 729-4265 Or Email at wwtp@centervilletn.org .

Thanks,

Jarrett Chad Dotson

Town of Centerville Wastewater Treatment Plant

Wastewater Discharger Survey

Application for: Domestic Wastewater Connection or Industrial Wastewater Survey
Complete all applicable items

Please return completed form to:

Mr./Ms. Jarrett Dotson

Pretreatment Coordinator _____

City of Centerville

Completion Date _____

1. Name: _____
Company Name: _____
Mailing Address: _____
Address of Premises: _____
Person to Contact: _____
Title: _____
Telephone Number: _____
2. Is this sewer service for a private residence only? Y/N _____ If No, please complete this form.
3. Under normal operating conditions, what is the average number of employees at this facility? _____
4. How many meals are cooked per day when the kitchen is operating? _____
Is the facility equipped with a grease trap? _____
5. Describe the nature of the business, service provided or manufacturing process performed.

6. What type of bulk liquid chemical are stored on site? _____

7. Are there any wastes other than wastewater from human origin being discharged to the sanitary sewer system, that is cooling water, wash water, process wastewater, etc.
_____ YES _____ NO
If YES, describe the waste being discharged to the sanitary sewer system.

Signature _____

INDUSTRIAL WASTEWATER DISCHARGE PERMIT APPLICATION

Section I

Applicant and Facility Description

Unless stated otherwise, all items are to be filled out completely. If an item is not applicable, indicate by noting "NA".

1. Name of Facility _____

2. Mailing Address _____

3. Address of Premises _____

4. Chief Executive Officer
Name _____ Title _____

5. Authorized individual to contact in case of emergency (i.e., spill, fire, process upset, etc.) or for information pertaining to this application. Also list backup contact.

Name _____ Backup contact, Name _____

Title _____ Title _____

Facility Phone Number _____

Home Phone Number _____

6. "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 violation."

Printed Name of Signing Official _____ Title _____

Section II

Plant Operations

1. Provide a detailed description of manufacturing processes, facilities or service activities provided on the premises, specifically those processes which involve process wastewater or hazardous materials. Use additional sheets if necessary: _____

Is there a wastewater generating process that would involve confidential information? _____

2. Principal raw materials used:

3. Chemicals and compounds used (Refer to Table I):

4. Solvents used:

5. Describe storage practices for the chemicals and solvents listed above:

6. List all products manufactured or services provided by your facility along with the corresponding SIC (Standard Industrial Code) number.

PRODUCT OR SERVICE	SIC CODE
_____	_____
_____	_____
_____	_____
_____	_____

7. If this facility is subject to Federal Categorical Pretreatment standards, as per 40 CFR 403, what is the categorical classification(s)? _____

What is the Federal Categorical Compliance Date? _____

8. Has a baseline report been submitted? _____

9. Shift Information

a. Shifts normally worked:

	Sun	Mon	Tue	Wed	Thur	Fri	Sat
1st	_____	_____	_____	_____	_____	_____	_____
2nd	_____	_____	_____	_____	_____	_____	_____
3rd	_____	_____	_____	_____	_____	_____	_____

b. Average # of employees/shift:

1st _____

2nd _____

3rd _____

c. Shift start and end times:

1st _____

2nd _____

3rd _____

10. Describe any routine or intermittent cleaning of equipment and facility. Include volumes of water used and type of cleaning chemicals used and how the cleaning water is discharged. Include a list of any automatically metered cleaning chemicals.

TABLE I

PRIORITY POLLUTANTS

If you use, or dispose of, any of the items on the following two pages, mark them by the following methods:

1. (U) = ITEM IS USED AT THIS LOCATION.
2. (DT) = DISPOSED OF, AFTER TREATMENT, TO THE SANITARY SEWER SYSTEM.
3. (DW) = DISPOSED OF, WITHOUT TREATMENT, TO THE SANITARY SEWER SYSTEM.
4. (DO) = DISPOSED OF, OFF SITE, AFTER BEING USED AND/OR GENERATED, SUCH AS SLUDGE, LIQUID, ETC.
5. (TU) = ITEM IS TOTALLY USED IN PRODUCTION, THEREFORE NO WASTE PRODUCT IS LEFT.
6. (VU) = ITEM IS VAPORIZED IN USE, AND THEREFORE NO WASTE PRODUCT IS LEFT.

An item may have several different markings after it, depending on the use, treatment and disposal of each by your company.

PRIORITY POLLUTANTS
VOLATILE COMPOUNDS

002	ACROLEIN	088	VINYL CHLORIDE
004	BENZENE	003	ACRYLONITRILE
006	CARBON TETRACHLORIDE	047	BROMOFORM
051	CHLORODIBROMOMETHANE	007	CHLOROBENZENE
019	2-CHLOROETHYL VINYL ETHER	016	CHLOROETHANE
048	DICHLOROBROMOMETHANE	023	CHLOROFORM
010	1,2-DICHLOROETHANE	013	1,1-DICHLOROETHANE
032	1,2-DICHLOROPROPANE	029	1,1-DICHLOROETHYLENE
038	ETHYLBENZENE	033	1,3-DICHLOROPROPYLENE
045	METHYL CHLORIDE	046	METHYL BROMIDE
015	1,1,2,2-TETRACHLOROETHANE	044	METHYLENE CHLORIDE
086	TOLUENE	085	TETRACHLOROETHYLENE
011	1,1,1-TRICHLOROETHANE	030	1,2-TRANS-DICHLOROETHYLENE
087	TRICHLOROETHYLENE	014	1,1,2-TRICHLOROETHANE

ACID COMPOUNDS

024	CHLOROPHENOL	031	2,4-DICHLOROPHENOL
034	2,4-DIMETHYLPHENOL	060	4,6-DINITRO-O-CRESOL
059	2,4-DINITROPHENOL	057	2-NITROPHENOL
058	4-NITROPHENOL	022	P-CHLORO-M-CRESOL
064	PENTACHLOROPHENOL	065	PHENOL
021	2,4,6-TRICHLOROPHENOL		

BASE/NEUTRAL COMPOUNDS

001	ACENAPHTHENE	077	ACENAPHTHYLENE
078	ANTHRACENE	005	BENZIDINE
072	BENZO(A)ANTHRACENE	073	BENZO(A)PYRENE
074	BENZO(B)FLUORANTHENE	079	BENZO(ghi)PERYLENE
075	BENZO(K)FLUORANTHENE	043	BIS(2-CHLOROETHOXY)METHANE
018	BIS(2-CHLOROETHYL)ETHER	042	BIS(2-CHLOROISOPROPYL)ETHER
017	BIS(CHLOROMETHYL)ETHER	041	4-BROMOPHENYL PHENYL ETHER
066	BIS(2-ETHYLHEXYL)PHTHALATE	020	2-CHLORONAPHTHALENE
067	BUTYL BENZYL PHTHALATE	076	CHRYSENE
025	1,2-DICHLOROBENZENE	040	4-CHLOROPHENYL PHENYL ETHER
082	DIBENZO(A,H)ANTHRACENE	027	1,4-DICHLOROBENZENE
026	1,3-DICHLOROBENZENE	070	DIETHYL PHTHALATE
028	3,3-DICHLOROBENZIDINE	068	DI-n-BUTYL PHTHALATE
071	DIMETHYL PHTHALATE	036	2,6-DINITROTOLUENE
035	2,4-DINITROTOLUENE	081	PHENANTHRENE
069	DI-N-OCTYL PHTHALATE	009	HEXACHLOROBENZENE
039	FLUORANTHENE	053	HEXACHLOROCYCLOPENTADIEN
080	FLUORENE	083	INDENO(1,2,3-cd)PYRENE
052	HEXACHLOROBUTADIENE	055	NAPHTHALENE
012	HEXACHLOROETHANE	061	N-NITROSODIMETHYLAMINE
054	ISOPHORONE	062	N-NITROSODIPHENYLAMINE
056	NITROBENZENE	084	PYRENE
008	1,2,4-TRICHLOROBENZENE	063	N-NITROSODI-n-PROPYLAMINE
037	1,2-DIPHENYLHYDRAZINE (AS AZOBENZENE)		

PESTICIDES AND PCB'S

089	ALDRIN	104	GAMMA-BHC
102	ALPHA-BHC	105	DELTA-BHC
103	BETA-BHC	091	CHLORDANE
092	4,4'-DDT	093	4,4'-DDE
094	4,4'-DDD	090	DIELDRIN
095	ALPHA-ENDOSULFAN	096	BETA-ENDOSULFAN
097	ENDOSULFAN SULFATE	098	ENDRIN
099	ENDRIN ALDEHYDE	113	TOXAPHENE
106	PCB-1242	109	PCB-1232
107	PCB-1254	111	PCB-1260
100	HEPTACHLOR	101	HEPTACHLOR EPOXIDE

METALS AND CYANIDE

114	ANTIMONY	115	ARSENIC
117	BERYLLIUM	118	CADMIUM
119	CHROMIUM	120	COPPER
122	LEAD	123	MERCURY
124	NICKEL	125	SELENIUM
126	SILVER	127	THALLIUM
128	ZINC	121	CYANIDE

MISCELLANEOUS

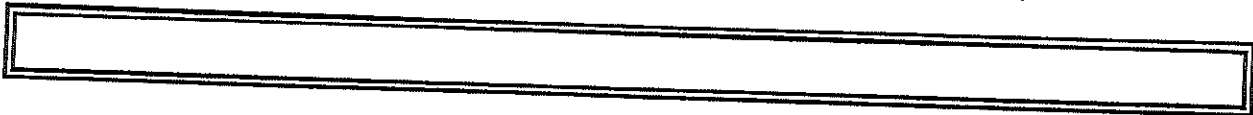
129	2,3,7,8-TETRACHLORODIBENZO-p-DIOXIN (TCDD)
116	ASBESTOS

TABLE 1 (ADDITIONAL ITEMS)

OTHER POLLUTANTS

Any Acids, Oils, Caustics, Fats, Grease or any other Chemicals NOT LISTED on the previous two pages that you Use, Generate, or Dispose of at this location. List these below and mark them according to the instruction page, titled Table 1.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____



Section III

Water Usage and Discharge Information

1. List intake water sources and volumes:

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
Municipal Water System	_____ gallons/day	_____ / _____
Private Well	_____ gallons/day	_____ / _____
Surface Water	_____ gallons/day	_____ / _____
Other	_____ gallons/day	_____ / _____

2. List average volume of discharge or water:

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
City Sewer System	_____ gallons/day	_____ / _____
Natural Outlet (NPDES)	_____ gallons/day	_____ / _____
Water Hauler	_____ gallons/day	_____ / _____
Evaporation	_____ gallons/day	_____ / _____
Contained in Product	_____ gallons/day	_____ / _____
Other (Specify)	_____ gallons/day	_____ / _____

3. Break down the water discharged to the sewer system into the following categories:

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
Process Wastestream #1	_____ gallons/day	_____ / _____
Process Wastestream #2	_____ gallons/day	_____ / _____
Process Wastestream #3	_____ gallons/day	_____ / _____
Process Wastestream #4	_____ gallons/day	_____ / _____

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
Contact Cooling	_____ gallons/day	_____ / _____
Non-Contact Cooling water	_____ gallons/day	_____ / _____

Section IV

Pretreatment

1. Describe any wastewater treatment equipment or processes in use: _____

2. Describe any process control testing that is used to monitor the pretreatment equipment and processes:

3. Describe any additional pretreatment facilities and/or processes under consideration. Include a specific time schedule for completion: _____

4. Do you dispose of any chemicals, solvents, sludges, or hazardous materials as a result of your processes?

_____ yes _____ no

If so, provide a description of each material, giving the composition, annual quantity, and means of disposal. _____

5. If a private hauler is used to haul sludges/residuals, provide name and EPA Identification Number.

6. Where is the ultimate disposal site for sludges/residuals?

7. Do you have copies of manifests for waste hauled off site?

_____ yes _____ no

8. Do you have a spill prevention, control, and countermeasure plan (SPCC) for your facility?

_____ yes _____ no

9. Do you have a solvent management plan for your facility?

_____ yes _____ no

Section V

Wastewater Characteristics - New Permittees Only

1. Attach any sampling data pertaining to the facility discharge to the sewer system. Explain where and when the sampling was accomplished, what type of sample was taken (i.e., grab, composite), and how many were analyzed.
2. A full scan of pollutants believed to be present and contained in Table I will be required for new discharge permits unless exempted by the City. The sample must be a 24-hour composite taken during normal production activity and/or representing typical wastewater flows.
3. Describe the exact procedure used to collect the sample:

MAILING ADDRESS

Please send completed application with all supporting attachments and enclosures to:

MR. Jarrett Dotson
Town Of Centerville
Wastewater Treatment Plant
P.O. Box 238

Centerville, TN 37033

Note:

The information contained on this permit application will be used as the basis for the Industrial User Discharge Permit. It is very important that this application be filled out as accurately as possible. Any individual who knowingly falsifies any information requested on this permit application may be subject to fines and penalties under the City's Pretreatment Ordinance, plus administrative fines by the POTW through the Enforcement Response Plan.

Signature of Signing Official

Date