HETHCOAT DAVIS

February 23, 2023

Laurel Rognstad
State Pretreatment Coordinator
Division of Water Resources
William R. Snodgrass Tennessee Tower, 11th floor
312 Rosa L. Parks Avenue
Nashville, TN 37243

Re: Industrial Wastewater Survey Results
Sparta Wastewater Treatment Facility
Sparta, TN

Dear Ms. Rognstad,

On behalf of the City of Sparta, please find the attached Industrial Wastewater Survey (IWS) results. This survey was completed per the requirement of the City's NPDES Permit (Section 3.2 a. viii). The IWS contains an explanation of how the facilities to be surveyed were selected, which facilities were sent surveys and what the survey results were. The survey results are summarized in Table 2 and 3. It was determined that the City of Sparta receives wastewater from six (6) industrial users, two (2) of which are Significant Industrial Users. Appendix C and Appendix D include the survey results that were received from the facilities. The survey does include any users from the White County contribution.

If you have any questions or need additional information regarding the survey, please contact me at your convenience at breanna.fowler@hdengr.com or 615-577-4300. Thank you.

Sincerely,
Hethcoat & Davis, Inc.

Breanna Fowler

Breanna Fowler, H&D

c: F. Brandon Young, Pretreatment Coordinator, City of Sparta, with a copy of the report
DC Bussell, Superintendent of Sewer Department, City of Sparta
Dillard Quick, Public Works Director, City of Sparta
Andrew Mcelhenny, PE, MEM, H&D

SPARTA, TN
INDUSTRIAL WASTEWATER SURVEY

FEBRUARY 13, 2023

Reviewed by: 

Forrest B. Young, Pretreatment Coordinator
City of Sparta

Date: 2/24/23

Report Prepared By:

Hethcoat & Davis, Inc.
278 Franklin Road, Building 4, Suite 200
Brentwood, Tennessee 37027
(615) 577-4300

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APPENDICES

INTRODUCTION

As part of its NPDES permit (TN0061166) renewal process, the City of Sparta is evaluating the types of wastewater that are received at its wastewater treatment plant. This report summarized the actions taken to determine the sources of wastewater and also the results of the findings.

1. Sources for Potential Industrial Users

The sources used to find potential industrial users, both categorical and major, were:

- List of top 25 water customers that were categorized as "industrial", see appendix A, page 1.
- List of top 25 water customers that were categorized as "commercial", see appendix A, page 1.
- List of new industrial users sewer customers since the last IWS in 2017- see Appendix B, page 1.

These lists were reviewed with Frederick Currier and Forrest Brandon Young using their local knowledge, it was determined which facilities needed to be sent surveys. Surveys were sent out on 12/02/22 and 12/12/22. Table 1 on page 2 shows the facilities that were sent surveys.

2. Dentists

In addition, since the 2017 IWS surveys sent, five (5) new dentists were sent a simple one-page survey to determine if they discharge silver amalgam or use an X-Ray system that produces X-Ray fixer waste. The list of dentists was determined by reviewing the yellow pages for Sparta, TN. Dental surveys were sent on 11/02/22.

Dental Surveys were sent to:

1. Spring Street Dental Care – POC Jeremy Robinson/Adam Grimm – 223 N. Spring Street, Sparta, TN 38583 – (931) 260-2114 / (832) 474-8059
2. Rockin' Smiles Denta, PLLC – POC Morris R. Graves – 154 E. Bockman Way, Sparta, TN 38583 – (931) 488-8544
3. Boston, Smith and Driver General Dentistry – POC Kevin C. Smith – 124 South Main Street, Sparta, TN 38583 – (931) 836-2717
4. Highlands Dental LLC – POC Harlen D. Hobbs II – 114 Mayberry Street, Sparta, TN 38583 – (931) 836-2416
5. Waymon T. Haston DDS – POC Waymon Haston – 9 Hampton Drive, Sparta, TN 38583 – (931) 836-2157

3. Returned Industrial Wastewater Surveys

Table 2 on page 4 shows the results of the returned Industrial Wastewater Surveys. Actual wastewater survey forms are included in Appendix C, in alphabetical order. The following companies were contacted various times and did not return back a wastewater survey: Dometic, Happy Trails Brewing Co. Inc, and Red-Y Lock & Roll Storage. The following companies are now closed or no longer have an operation in Sparta, TN: Lanmills, Nuera Transport, N.O.D. Company, and Fitzgerald Trucking.

4. Significant Industrial Users

Of the Industrial Wastewater Surveys returned, facilities discharging more than 25,000 gallons per day are: BASF. Facilities that were significant industrial users were THK Rhythm (categorical) and BASF. Both THK Rhythm and BASF are currently under discharge permits with the City of Sparta. Endura Products also has some industrial wastewater. The filtered solid waste is disposed as special waste in a local landfill. We do not feel they need a permit for the facility wastewater. UPS discharges about 500 gpd of floor and truck wash water, but does have an oil water separator in place. We do not feel they need to be permitted. Altium Healthcare generates wastewater from compressors, but treats the discharge via two oil filters, so, again, we do not feel they need to be permitted. Industrial Air Purification has industrial waste water, but they implement filtration, sedimentation, and grease separation. We do not feel they need to be permitted. Table 3 on page 5 shows the 5 facilities that are considered industrial users.

5. Returned Dental Surveys

Of the dental surveys returned, it was determined that Dr. Smith, Dr. Haston, and Dr. Hobbs still uses Amalgam and has a separator in place. Dr. Graves does not place amalgam and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances. Dr. Graves does have a separator in place. Dr. Robinson and Dr. Grimm at Spring Street Dentalcare still use Amalgam and has a separator in place.

Appendix D includes the returned dental surveys, in alphabetical order.

TABLE 1

City of Sparta, TN
2023 Industrial Waste Survey - Recipients

#	Company Name	Street Address	City, State, Zip	Survey Sent	Survey Returned	Significant Industrial User	Comments
1	Altium Healthcare	600 Vista Drive	Sparta, TN 38583	12/2/2022	1/17/2023	No	
2	Bailey Tire Company	6150 Roberts Matthews Hwy.	Sparta, TN 38583	12/2/2022	1/20/2023	No	
3	BASF	200 Iris Drive	Sparta, TN 38583	12/2/2022	12/8/2022	Yes, (Subject to local limits also >25, 000 GPD)	
4	BBB	5687 Smithville Hwy.	Sparta, TN 38583	12/2/2022	12/13/2022	No	
5	Best Bath Systems Inc.	155 Churchill Drive	Sparta, TN 38583	12/2/2022	1/25/2023	No	
6	Dometic (INCA Products)	801 N. Spring Street	Sparta, TN 38583	12/2/2022	n/a	n/a	Company failed to return back survey.
7	Dunn & Bybee Tool Co.,Inc	635 Industrial Drive	Sparta, TN 38583	12/2/2022	1/24/2023	No	
8	East Coast Millwork	620 Industrial Drive	Sparta, TN 38583	12/2/2022	1/16/2023	No	
9	Endura Products	130 Sunset Drive	Sparta, TN 38583	12/2/2022	1/11/2023	No	
10	Fitzgerald Trucking	575 Technology Drive	Sparta, TN 38583	12/2/2022	n/a	n/a	No longer operate in Sparta, TN.
11	Happy Trails Brewing Co.	120 Paula Lane	Sparta, TN 38583	12/2/2022	n/a	n/a	Company failed to return back survey.
12	HMMI	189 Churchill Drive	Sparta, TN 38583	12/2/2022	1/31/2023	No	
13	Hormann LLC	450 Airport Road	Sparta, TN 38583	12/2/2022	12/16/2022	No	
14	Jackson Kayak	3300 McMinnville Hwy	Sparta, TN 38583	12/2/2022	12/16/2022	No	
15	KRM Fabrications	101 Moore Street	Sparta, TN 38583	12/2/2022	12/19/2022	No	
16	N.O.D. Company	342 Bockman Way	Sparta, TN 38583	12/12/2022	n/a	n/a	This company is closed.
17	Nuera Transport	7100 Roberts Matthews Hwy.	Sparta, TN 38583	12/2/2022	n/a	n/a	This company is closed.
18	TexTrail Trailer Parts	5590 Roberts Matthews Hwy.	Sparta, TN 38581	12/2/2022	12/19/2022	No	
19	Quality Service	325 Iris Drive	Sparta, TN 38582	12/2/2022	1/25/2023	No	
20	Rebo Lighting & Electronics	325 Sewell Drive	Sparta, TN 38583	12/2/2022	1/26/2023	No	
21	Red-Y Lock & Roll Storage	2276 Smithville Hwy.	Sparta, TN 38583	12/2/2022	n/a	n/a	Company failed to return back survey.
22	Sparta Woodworks	PO Box 240, One Quality Lane	Sparta, TN 38583	12/2/2022	12/15/2022	No	
23	Sparta Metal Processing	1922 Smithville Hwy.	Sparta, TN 38583	12/2/2022	12/7/2022	No	
24	Taco Metals	1922 Smithville Hwy.	Sparta, TN 38583	12/2/2022	1/17/2023	No	
25	THK Rhythm North America Co., LTD	549 Vista Drive	Sparta, TN 38583	12/2/2022	5/20/2021	Yes (Local Limits Apply, and is a Categorical ICU)	
26	TLT Inc.	390 Sewell Drive	Sparta, TN 38583	12/2/2022	1/24/2023	No	
27	United Parcel Service	630 Industrial Drive	Sparta, TN 38583	12/2/2022	2/13/2023		
28	Upper Cumberland Regional Airport	750 Airport Road	Sparta, TN 38583	4/17/2022	5/17/2022	No	
29	Wilson Sporting Good	4600 Roberts Matthews Hwy.	Sparta, TN 38583	12/2/2022	12/6/2022	No	
30	ColinX (Lanmills)	321 Fitzgerald Industrial Dr.	Sparta, TN 38583	12/2/2022	n/a	n/a	This company is closed.
31	Industrial Air Purification	580 Technology Dr.	Sparta, TN 38583	12/2/2022	1/16/2023	No	
32	Tractor Supply Co.(Olivia Jones, Mgr)	768 Millers Point Road	Sparta, TN 38583	12/2/2022	1/17/2023	No	

Table 2

City of Sparta, TN
2023 Industrial Waste Survey - Industrial Users Discharging Domestic Wastewater Only

#	Company Name	Average Flow (gpd)	SIC Code and Name	Treatment Plant	Domestic, Noncontact cooling, Boiler/Tower Blowdown Wastewater only
12	KRM Fabrications	7,000	3060: Fabricated rubber products, NEC 3089: Plastic Proodcuts, NEC	Sparta WWTP	Yes. 7,000 gpd process wastewater is sent to waste hauler
13	TexTrail Trailer Parts	5	4931: warehousing, wholesale distribution of trailer parts/ warehousing	Sparta WWTP	Yes
14	Quality Service	100	4899: Comunications Services, NEC	Sparta WWTP	Yes
15	Rebo Lighting & Electronics	1,500	3600: Electronic & other Electrical Equipment	Sparta WWTP	Yes
16	Sparta Woodworks	50	2426 Hardwood dimension mills	Sparta WWTP	Yes
17	Sparta Metal Processing	80	3357: Drawing & Insulating of Nonferrous Metals	Sparta WWTP	Yes
18	Taco Metals	722	3089: Miscellaneous Plastics products, 3541: Machine tools, metal cutting type	Sparta WWTP	Yes
19	THK Rhythm North America Co., LTD	11,911	3714 Motor Vehicle parts and accessories	Sparta WWTP	**No - see Table 3**
20	TLT Inc.	3.92	2511: Wood Household Furniture, no upholstery	Sparta WWTP	Yes
21	United Parcel Service	500	4215: Courier Services, Except by Air	Sparta WWTP	**No - see Table 3**
22	Upper Cumberland Regional Airport	500	4581: Airports, Flying fields, & Airport Terminal Services	Sparta WWTP	Yes

Table 2

City of Sparta, TN

2023 Industrial Waste Survey - Industrial Users Discharging Domestic Wastewater Only

#	Company Name	Average Flow (gpd)	SIC Code and Name	Treatment Plant	Domestic, Noncontact cooling, Boiler/Tower Blowdown Wastewater only
23	Wilson Sporting Good	740	3949: Sporting and Athletic Goods	Sparta WWTP	Yes
24	Industrial Air Purification	70	3564: Industrial & Commercial fans & Blowes & Air Purification	Sparta WWTP	**No - see Table 3**
25	Tractor Supply Co.(Olivia Jones, Mgr)	200	5080: WHOLESALE-Machinery, Equipment, and Supplies	Sparta WWTP	Yes

Table 2

City of Sparta, TN
2023 Industrial Waste Survey - Industrial Users Discharging Domestic Wastewater Only

#	Company Name	Average Flow (gpd)	SIC Code and Name	Treatment Plant	Domestic, Noncontact cooling, Boiler/Tower Blowdown Wastewater only
1	Altium Healthcare	3,000	3085: Plastic Bottles, 5047: wholesale mdical, dental and hostpital equipment and supplies	Sparta WWTP	**No - see Table 3**
2	Bailey Tire Company	600	3011: Tires and Inner Tubes	Sparta WWTP	Yes
3	BASF	88,700	2821: Plastic materials, systhetic resins and nonvulcanized Elastomers	Sparta WWTP	**No - see Table 3**
4	BBB	3,415	3694: Electrical Equipment for Internal Combustion Engines	Sparta WWTP	Yes. 285 gpd process wastewater is sent to waste hauler
5	Best Bath Systems Inc.	360	3083: Plastic Products, NEC	Sparta WWTP	Yes
6	Dunn & Bybee Tool Co.,Inc	245	NAICS # 33324: Industrial machinery manufacturing	Sparta WWTP	Yes
7	East Coast Millwork	450	493110: Warehousing and Storage	Sparta WWTP	Yes
8	Endura Products	40	2431: Millwork	Sparta WWTP	**No - see Table 3**
9	HMMI	2,625	3261: Plastics product manufacturing. (injection molding)	Sparta WWTP	Yes
10	Hormann LLC	200	2540: Partitions, Shelvg, Lockers, & Office & Storage Fixtures	Sparta WWTP	Yes
11	Jackson Kayak	400	336612: Boat Building	Sparta WWTP	Yes

Table 3

City of Sparta, TN
2023 Industrial Waste Survey - Industrial Users Discharging Non-Domestic Wastewater

#	Company Name	Average Flow (gpd)	SIC Code	Non-Domestic Wastewater		Pollutants Known or Suspected Present in Nondomestic Wastestream	Average Pollutant Concentration, If Known	Is Pretreatment of Nondomestic Wastestream Provided?	Treatment Plant
				Contains any of the 126 Priority Pollutants	Prohibited Pollutants See 40 CFR 403.5(b)				
1	BASF	88,700	2821: Plastic materials, systhetic resins and nonvulcanized Elastomers	Yes, Metals and volatiles, see monitoring reports	Yes, used oil, it is recycled	N/A see responses to the left	Yes, see monitoring reports	YES, and they are under permit	Sparta WWTP
2	Endura Products	40	2431: Millwork	No	Yes, but tar and pitch from mechanical product is serviced by outside company	110 gallons annualy of process wastewater containing mechanical products	N/A	No, Filtrate is sent away as special waste by Safety Kleen.	Sparta WWTP
3	THK Rhythm North America Col, LTD	11,911	3714: Motor Vehicle parts and Accessories	Yes, some metals and some volatiles, see monitoring reports	Yes, but used oil is taken off-site	3,400 gallons per day of process wastewater to the sewer.	Yes, see monitoring reports	YES, they use chemical precipitation and reverse osmosis; and they are under permit	Sparta WWTP
4	United Parcel Service (UPS)	500	4215 Courier Services, Except by Air	No	Yes, oil is seperated via oil water seperator and hauled off	N/A see responses to the left	N/A	Yes, via oil/water seperators	Sparta WWTP
5	Industrial Air Purification	70	3564: Industrial & Commercial fans & Blowes & Air Purification	No	Yes, Metals hauled by Scott's Sludge	N/A see responses to the left	N/A	Yes, filtration, sedimentation, grease separation	Sparta WWTP
6	Altium Healthcare	3,000	3080: Plastic Bottles, 5047: wholesale mdical, dental and hostpital equipment and supplies	No	Yes, oil from compressor wash down	N/A see responses to the left	N/A	YES, they use two filters before discharging the compressor wastewater	Sparta WWTP

SPARTA TN
INDUSTRIAL WASTEWATER SURVEY

APPENDIX A

LIST OF TOP 25 WATER CUSTOMERS,

INDUSTRIAL

AND

COMMERCIAL

Top 25 Commercial Water customers

GALLONS DURING LAST 12 MONTHS

AVERAGE GALLONS PER MONTH

Location	Rate	First Name	Last Name	Street Number	Service Address	Service City	Total Use	Average Use
000024	235CON		DAVITA 440400	150	SAM WALTON	SPARTA	7,070.00000	589.16666
000127	235CON		STONERIDGE ESTA	500	STONERIDGE	SPARTA	20,988.00000	954.00000
000148	214CON		MIDDLE TENN TRU	5760	MCMINNVILLE	DOYLE	32,937.00000	2,744.75000
000241	235CON		ARBY'S #8949	681	ROOSEVELT	SPARTA	7,655.00000	588.84615
000362	235CON		WCMS ATHLETIC C	300	TURN TABLE	SPARTA	10,513.00000	438.04166
200587	235CON		WHITE CO CRIMIN	111	DEPOT	SPARTA	52,018.00000	4,334.83333
202100	235CON		EL TAPATIO #2	243	SPRING	SPARTA	11,561.00000	825.78571
202278	235CON		WHITE CO MIDDLE	300	TURN TABLE	SPARTA	15,288.00000	637.00000
202321	235CON		SPARTA BLOCK	380	SPRING	SPARTA	9,979.00000	831.58333
202470	235CON		CITY OF SPARTA	123	MOORE	SPARTA	5,389.00000	449.08333
202507	235CON		CLASSY WASH & S	124	CHURCHILL	SPARTA	7,362.00000	613.50000
202577	235CON		MESON SAN PEDR	184	CHURCHILL	SPARTA	8,835.00000	736.25000
202632	235CON		PREMIER APTS	200	CHESTNUT	SPARTA	14,268.00000	1,189.00000
202769	235CON	J TURNER	MCKINNIE	627	BOCKMAN	SPARTA	16,008.00000	1,334.00000
202997	235CON		NHC HEALTH CAR	34	GRACEY	SPARTA	54,005.00000	2,250.20833
203472	235CON		SPARTA APARTME	701	ELMWOOD	SPARTA	13,876.00000	533.69230
203914	235CON		KNOLLCREST APTS	601	KNOLLCREST	SPARTA	16,303.00000	679.29166
204012	214CON		MOUNTAIN VIEW		RADIO	SPARTA	8,061.00000	671.75000
204050	235CON		SPARTA HOUSING	300	CRAGROCK	SPARTA	25,711.00000	1,071.29166
204069	235CON		WHITE CO HIGH S	267	ALLEN	SPARTA	28,892.00000	601.91666
204077	235CON		HIGLANDS MEDIC	401	SEWELL	SPARTA	18,800.00000	783.33333
204097	235CON		LIFE CARE CENTER	508	MOSE	SPARTA	7,753.00000	646.08333
204098	235CON		LIFE CARE CENTER	508	MOSE	SPARTA	51,118.00000	4,259.83333
204101	235CON		ROYAL INN	803	VALLEY VIEW	SPARTA	9,990.00000	832.50000

							GALLONS DURING LAST 12 MONTHS	AVERAGE GALLONS PER MONTH
204118	235CON		KENTUCKY FRIED C	810	ROOSEVELT	SPARTA	6,428.00000	535.66666

Top 25 Industrial Water Customers

GALLONS DURING LAST 12 MONTHS

AVERAGE GALLONS PER MONTH

Location	Rate	First Name	Last Name	Street Number	Street Name	Service City	Total Use	Average Use
200798	280CON		ENDURA PRODUC	130	SUNSET	SPARTA	41.00000	3.72727
200799	280CON		ENDURA PRODUC	130	SUNSET	SPARTA	0.00000	0.00000
200800	280CON		ENDURA PRODUC	130	SUNSET	SPARTA	0.00000	0.00000
200801	280CON		ENDURA PRODUC	130	SUNSET	SPARTA	0.00000	0.00000
200924	280CON		QUALITY SERVICE	325	IRIS	SPARTA	247.00000	22.45454
200925	280CON		QUALITY SERVICE	325	IRIS	SPARTA	497.00000	45.18181
200926	280CON		SPARTA WOOD W	1	QUALITY	SPARTA	1,127.00000	102.45454
200927	280CON		SPARTA WOOD W	1	QUALITY	SPARTA	254.00000	23.09090
200928	280CON		BASF	200	IRIS	SPARTA	130,905.00000	11,900.45454
200929	280CON		BASF	200	IRIS	SPARTA	32,178.00000	2,925.27272
200930	280CON		BASF	200	IRIS	SPARTA	134,808.00000	12,255.27272
201618	280CON		JACKSON KAYAK	3300	MCMINNVILLE	SPARTA	1,511.00000	24.77049
201712	280CON	MICHAEL	GURGAINERS	4105	MCMINNVILLE	SPARTA	558.00000	46.50000
202009	285CON		NOD COMPANY	342	BOCKMAN	SPARTA	8.00000	0.66666
202606	285CON		BESTBATH SYSTEM	155	CHURCHILL	SPARTA	2,652.00000	204.00000
202607	285CON		BESTBATH SYSTEM	155	CHURCHILL	SPARTA	1,040.00000	80.00000
204053	285CON		AUSTIN MACHINE	139	MAIN	SPARTA	301.00000	21.50000
204073	285CON		SPARTA METAL PI	327	TURN TABLE	SPARTA	505.00000	38.84615
204079	285CON		TLT INC	394	SEWELL	SPARTA	730.00000	60.83333
204081	285CON		REBO LIGHTING &	325	SEWELL	SPARTA	4,900.00000	102.08333
204083	285CON		HMMI	189	CHURCHILL	SPARTA	22,130.00000	922.08333
204085	285CON		ALTIUM HEALTHC/	600	VISTA	SPARTA	11,832.00000	197.20000
204086	285CON		RHYTHM NORTH A	549	VISTA	SPARTA	42,211.00000	1,758.79166
204146	285CON		EAST COAST MILL	620	INDUSTRIAL	SPARTA	699.00000	58.25000

							GALLONS DURING LAST 12 MONTHS	AVERAGE GALLONS PER MONTH
204148	285CON		EAST COAST MILL	600	INDUSTRIAL	SPARTA	77.00000	3.20833

SPARTA, TN
INDUSTRIAL WASTEWATER SURVEY

APPENDIX B

LIST OF CUSTOMERS

WITH REASON FOR

INCLUSION OR NON-INCLUSION

IN THE IWS

APPENDIX B

SPARTA TN 2022 IWS

List of New Industrial Customers from billing records/ and why they were added or eliminated

Name	Address	Business Type	Send Survey?
Industrial Air Purification	580 Technology Drive	Dust, Mist, and Fume Systems	YES
Altium Healthcare	600 Vista Drive	Pharmacy Packaging	YES
Bailey Tire Company	6150 Roberts Matthews Hwy.	Tires	YES
Best Bath Systems Inc.	155 Churchill Drive	Showers/Baths	YES
Upper Cumberland Regional	750 Airport Road	Airport	YES
Dometic (INCA Products)	801 N. Spring Street	Outdoor Gear	YES
Happy Trails Brewing Co.	120 Paula Lane	Brew Beer	YES
N.O.D. Company	342 Bockman Way	n/a	YES
Hormann LLC	450 Airport Road	Garage Doors	YES
KRN Fabrications	101 Moore Street	Foam and Plastic Fabrication	YES
Quality Service	325 Iris Drive	Support Rep/ Trucking	YES
ColinX	321 Fitzgerald Industrial Dr.	Warehouse- Freight Transportation	YES
Rebo Lighting & Electronics	325 Sewell Drive	Lighting/ Electronics	YES
Red-Y Lock & Roll Storage	2276 Smithville Hwy.	Storage Building	YES
Sparta Metal Processing	327 Turntable Road	Insulated Wire & Cable Recycling	YES
Tractor Supply Co.(Olivia Jones,	768 Millers Point Road	Supplies, Livestock Feed, Power Equipment	YES
S & S Screw Machine Co Inc	1500 McMinnville Hwy	Automobile Machine Shop	NO - Company Closed
Austin Machine Shop	139 South Main Street	Machine Shop	NO
CLS Rotational Molding	600 Industrial Dr.	Plastics Manufacturing	NO
Federal Mogul	325 Sewell Dr.	Transport Equipment	NO
Moeller Marine Products	801 N. Spring St.	Boating Products	NO
Norcom, Inc.	155 Churchhill Dr.	Bathing Systems	NO

SPARTA, TN
INDUSTRIAL WASTEWATER SURVEY

APPENDIX C

RETURNED

Industrial Wastewater Surveys

IN ALPHABETICAL ORDER

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
Altium Packaging
600 Vista Dr, Sparta, TN
Zip: 38583 Telephone (931) 738-2174

A.2 Address of production or manufacturing facility.
"Same as above."

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
ADAM GOFF, Plant Manager, 931-738-2174

A.4 Alternate person to contact concerning information provided herein:
Name Lori Eades Title HR Manager Telephone (931) 738-2174

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Bottle mfg - plastics

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/17/23
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Injection mold, reheat stretch blow molding of plastic bottles and lid closures.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3080

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	2000	estimated	measured
b.	[X]	Cooling water, non contact	400	estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[X]	Sanitary	2400	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____
_____
_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ]Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____
_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ]	Air Flotation	[ ]	Chlorination	[ ]	Flow Equalization
[ ]	Centrifuge	[ ]	Cyclone	[ ]	Grease or Oil Separation
[ ]	Chemical Precipitation	[ ]	Filtration	[ ]	Grease Trap
[ ]	Grit Removal	[ ]	Ozonation	[ ]	Sedimentation
[ ]	Ion Exchange	[ ]	Reverse Osmosis	[ ]	Septic Tank
[ ]	Sump	[ ]	Screen	[ ]	Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

BASF CORPORATION
200 Iris Drive, Sparta, TN
Zip: 38583 Telephone (931) 738-2210

A.2 Address of production or manufacturing facility.

Same As Above

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Andy Schmitt, Site Manager
(931) 738-7234

A.4 Alternate person to contact concerning information provided herein:
Name Michael Akehinmi Title EHS Specialist Telephone (931) 738-7269

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Manufacturing of Engineered plastic materials

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12/7/2022
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Dry mixing of resin chips, additives, pigments & concentrates, melting and extruding and pelletizing
producing Color Concentrates by mixing resin chips & pigments.
Then melting, extruding, Cooling and pelletizing

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

2821

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	2200	estimated	measured
b.	[✓]	Cooling water, non contact	1000	estimated	measured
c.	[✓]	Boiler/tower blowdown	4500	estimated	measured
d.	[✓]	Cooling water, contact	80,000	estimated	measured
e.	[ ]	Process		estimated	measured
f.	[✓]	Equipment/Facility washdown	1000	estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i	88,700		

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	1000	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[✓]	Waste haulers	500	estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g	1500		

Provide name and address of waste hauler(s), if used,
Clean Harbors - 3300 Cummings Road, Chattanooga, TN 37419
Waste Management, Atlanta GA - Vacuum Waste

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [✓] no [ ]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 2
Average number of employees per shift: ~30

B.2 Starting times of each shift: 1st 6:00 am / pm 2nd 6:00 am / pm 3rd _____ am / pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Engineering "High Performance" Thermoplastics

B.4 Raw materials and process additives used:
Polymer resin pellets, fiberglass, Mineral fillers & Other additives

B.5 Production is:
[ ] Batch [ ] Continuous [√] Both 50 % Batch 50 % Continuous
Average Number of batches per 24-hour day

B.6 Hours of operation: _____ a.m. to _____ p.m. [√] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [√] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [√] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [✓] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[✓] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent
[ ] Neutralization, pH Correction		
[ ] Biological Treatment, Type		
[ ] Rainwater Diversion or Storage		
[ ] Other Chemical Treatment,		
[ ] Other physical Treatment,		
[✓] Other,		
[ ] No Pretreatment Provided		

Aeration using Bubble diffusers & Settling Containment for Sedimentation

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

Most recent waste water analysis is attached with this form.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known mg/L
1.	Antimony	[✓]	[ ]	[ ]	[ ]	ND
2.	Arsenic	[ ]	[ ]	[ ]	[✓]	
3.	Asbestos	[ ]	[ ]	[ ]	[✓]	
4.	Beryllium	[ ]	[ ]	[ ]	[✓]	
5.	Cadmium	[✓]	[ ]	[ ]	[ ]	ND
6.	Chromium	[✓]	[ ]	[ ]	[ ]	ND
7.	Copper	[✓]	[ ]	[ ]	[ ]	0.024
8.	Cyanide	[✓]	[ ]	[ ]	[ ]	.0058
9.	Lead	[✓]	[ ]	[ ]	[ ]	
10.	Mercury	[✓]	[ ]	[ ]	[ ]	0.00
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[✓]	[ ]	[ ]	[ ]	ND
14.	Thallium	[ ]	[ ]	[ ]	[✓]	
15.	Zinc	[✓]	[ ]	[ ]	[ ]	ND
16.	Phenol (n)	[✓]	[ ]	[ ]	[ ]	0.166
17.	Phenol 2-chloro	[ ]	[ ]	[✓]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[✓]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[✓]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[✓]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[✓]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[✓]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known mg/L
23.	Benzene	[✓]	[ ]	[ ]	[ ]	0.0496
24.	Benzene, chloro	[✓]	[ ]	[ ]	[ ]	0.00126
25.	Benzene, 1,2-dichloro	[ ]	[✓]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[✓]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[✓]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[✓]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[✓]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[✓]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[✓]	[ ]	
32.	Toluene	[✓]	[ ]	[ ]	[ ]	0.012
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[✓]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[✓]	[ ]	
35.	PCB-1016	[ ]	[ ]	[✓]	[ ]	
36.	PCB-1221	[ ]	[ ]	[✓]	[ ]	
37.	PCB-1232	[ ]	[ ]	[✓]	[ ]	
38.	PCB-1242	[ ]	[ ]	[✓]	[ ]	
39.	PCB-1248	[ ]	[ ]	[✓]	[ ]	
40.	PCB-1254	[ ]	[ ]	[✓]	[ ]	
41.	PCB-1260	[ ]	[ ]	[✓]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[✓]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[✓]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[✓]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[✓]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[✓]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[✓]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[✓]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[✓]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[✓]	[ ]	
51.	Benzidine	[ ]	[ ]	[✓]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[✓]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[✓]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[✓]	[ ]	
		[ ]	[ ]	[✓]	[ ]	
55	Methane, bromo	[ ]	[✓]	[ ]	[ ]	
56	Methane, chloro	[ ]	[✓]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[✓]	[ ]	
58	Methane, chlorodibromo	[ ]	[✓]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[✓]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[✓]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[✓]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[✓]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[✓]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[✓]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[✓]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[✓]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[✓]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[✓]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[✓]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[✓]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[✓]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[✓]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[✓]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[✓]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[✓]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[✓]	[ ]	
	Acenaphthylene	[ ]	[ ]	[✓]	[ ]	
79.	Anthracene	[ ]	[ ]	[✓]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[✓]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[✓]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[✓]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[✓]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[✓]	[ ]	
85	Chrysene	[ ]	[ ]	[✓]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[✓]	[ ]	
87	Fluorathene	[ ]	[ ]	[✓]	[ ]	
88	Fluorene	[ ]	[ ]	[✓]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[✓]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[✓]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[✓]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known mg/L
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[✓]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[✓]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[✓]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[✓]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[✓]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[✓]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[✓]	[ ]	
103	DDT	[ ]	[ ]	[✓]	[ ]	
104	Dieldrin	[ ]	[ ]	[✓]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[✓]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[✓]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[✓]	[ ]	
108	Endrin	[ ]	[ ]	[✓]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[✓]	[ ]	
110	Heptachlor	[ ]	[ ]	[✓]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[✓]	[ ]	
112	Isophorone	[ ]	[ ]	[✓]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[✓]	[ ]	
114	Toxaphene	[ ]	[ ]	[✓]	[ ]	
115	Naphthalene	[✓]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[✓]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known mg/L
117.	Pyrene	[ ]	[ ]	[✓]	[ ]	
118.		[ ]	[ ]	[✓]	[ ]	
119.	Acrolein	[ ]	[ ]	[✓]	[ ]	
	Aldrin	[ ]	[ ]	[✓]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[✓]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[✓]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[✓]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[✓]	[ ]	
124.	Chlordane	[ ]	[ ]	[✓]	[ ]	
125.	DDD	[ ]	[ ]	[✓]	[ ]	
126.	DDE	[ ]	[ ]	[✓]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[✓] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[✓]	Acids and Alkalines	Spent Sulfuric Acid + methanol = 1500 lbs/yr
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[✓]	Oil and/or grease	Used & waste Oil waste = 2500 lbs/yr
[ ]	Organic Compounds	
[✓]	Paints	Waste paint cans = 500 lbs/yr
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[✓]	Other Hazardous Wastes, describe:	Cadmium Containing Pigment waste = 1500 lbs/yr Spent phenol dichlorobenzene + Acetone waste = 500 lbs/yr
[✓]	Other Wastes, (describe),	20,000 gals of Vacuum/Caprolactam waste

D.3 For the above checked wastes, does your company practice:

[✓] On-site storage
[✓] Off-site storage
[ ] On-site disposal
[✓] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

Vacuum wastes are generated onsite & drummed before being transported to offsite warehouse for storage until disposal by waste management off site.
All other listed wastes are drummed & stored onsite in respective accumulation areas before they are hauled off site by Clean Harbors for disposal

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
BBB Industries
5687 Smithville Hwy, Sparta, TN
Zip: 38583 Telephone (931) 761-2600

A.2 Address of production or manufacturing facility.
BBB Industries
5687 Smithville Hwy, Sparta, TN
Zip: 38583 Telephone (931) 761-2600

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
Jay Peterson, Plant Manager, 931-761-2600

A.4 Alternate person to contact concerning information provided herein:
Name Stephanie Beveridge Title EHS Manager Telephone (931) 761-2600

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Remanufacturing of auto parts

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12/8/22
Date

Jay J Peterson
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Disassembly of starters, alternators, CV axles, Turbos, and Brake calipers; then wash and degrease components. Reassemble units per customer requirements and specifications.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3714 (Motor Vehicle Parts and Accessories)

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	3700	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[X]	Process	285	estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i	3415		

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[X]	Waste haulers	285	estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g	285		

Provide name and address of waste hauler(s), if used,

Superior Solvents and Chemicals
518 Swinging Bridge Rd, Old Hickory, TN 37138

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [✓] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 180
Average number of employees per shift: 180

B.2 Starting times of each shift: 1st 7:00 (am) / pm 2nd _____ am / pm 3rd _____ am / pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Starters, Alternators, CV Axles, Turbos, Brake Calipers

B.4 Raw materials and process additives used:
used product (core) containing small amounts of new components

B.5 Production is:
[ ] Batch [✓] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: 7:00 a.m. to 5:30 p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [✓] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [✓] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation
[ ] Centrifuge
[ ] Chemical Precipitation
[ ] Grit Removal
[ ] Ion Exchange
[ ] Sump
[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type
[ ] Rainwater Diversion or Storage
[ ] Other Chemical Treatment,
[ ] Other physical Treatment,
[ ] Other,
[ ] No Pretreatment Provided

[ ] Chlorination
[ ] Cyclone
[ ] Filtration
[ ] Ozonation
[ ] Reverse Osmosis
[ ] Screen

[ ] Flow Equalization
[ ] Grease or Oil Separation
[ ] Grease Trap
[ ] Sedimentation
[ ] Septic Tank
[ ] Solvent

_____
_____
_____
_____
_____
_____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [X] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

BEST BATH SYSTEMS
155 NORCOM WAY SPARTA, TN
Zip: 38583 Telephone (931) 836-6339

A.2 Address of production or manufacturing facility.

SAME AS ABOVE

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

KEVIN PIEPER OPS MANAGER 931-836-6339

A.4 Alternate person to contact concerning information provided herein:
Name FRANK ALVAREZ Title FACILITY MGR Telephone (~~205~~) 906-4996

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

PLASTICS / FRP MANUFACTURING

Note to Signing Official: *In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1-25-23
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

MANUFACTURING + ASSEMBLY OF WALK-IN-BATHTUBS AND TRUCK BODIES

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3083

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	360	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[X]	Sanitary	360	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] no [X]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 1
Average number of employees per shift: 35

B.2 Starting times of each shift: 1st 6:30 (am) pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: WALK-IN-BATHTUBS & TRUCK BODIES

B.4 Raw materials and process additives used:

_____

_____

_____

B.5 Production is:
[ ] Batch [✓] Continuous [ ] Both _____ % Batch 100 % Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: 6:30 a.m. to 5 p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [X] no
If yes, briefly describe seasonal production cycle:

_____

_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [X] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-diehloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Mcthane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthraeene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthcne	[ ]	[ ]	[ ]	[ ]	
82	Bcnzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathcne	[ ]	[ ]	[ ]	[ ]	
88	Fluorenc	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetraehloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [X] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Charles Bailey Trucking Inc
7052 Roberts Matthews Hwy Cookeville TN
Zip: 38506 Telephone (931) 738-5065

A.2 Address of production or manufacturing facility.

7052 Roberts Matthews Hwy Cookeville 38506
6150 Roberts Matthews Hwy Sparta TN 38583
Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Paul Bailey

A.4 Alternate person to contact concerning information provided herein:
Name Janice Wagner Title HR Telephone (931) 738-1481

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Trucking for hire

Note to Signing Official: *In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1-20-23
Date

Janice Wagner
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

No Production- No manufacturing
Trucking Company
wash Trucks @ Sparta Location

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

4213

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	100	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[✓]	Equipment/Facility washdown	500	estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[✓]	Other, describe Sewer		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 1
Average number of employees per shift: 25

B.2 Starting times of each shift: 1st 7:00 am / pm 2nd NA am / pm 3rd NA am / pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: NA

B.4 Raw materials and process additives used:
NA

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both ____% Batch ____% Continuous
Average Number of batches per 24-hour day ____

B.6 Hours of operation: 7:00 a.m. to 5:00 p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [✓] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [✓] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [✓] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Ycar
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dycs	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
Dunn & Bybee Tool Co., 635 Industrial Drive, Sparta, TN
Zip: 38583 Telephone ( ) 931-738-3611

A.2 Address of production or manufacturing facility.
Same

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
Kinion Dunn, President
931-738-3611

A.4 Alternate person to contact concerning information provided herein:
Name Morgan Dunn Title Sales Mang. Telephone ( ) 931-738-3611

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
OEM manufacture

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/17/23
Date

Kinion Dunn
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Light manufacturing - Machine design and built; CNC lathe and mill operation

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3540

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	240	estimated	measured
b.	[✓]	Cooling water, non contact	5	estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i	245		

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	240	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[✓]	Surface	5	estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g	245		

Provide name and address of waste hauler(s), if used,

Crystal Clean, 2000 Center Drive, Suite East C300, Hoffman Estates, IL 60192

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] no [✓]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 20
Average number of employees per shift: 20

B.2 Starting times of each shift: 1st 7:00 am / 3:30 pm 2nd N/A am / pm 3rd N/A am / pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Machine Tools

B.4 Raw materials and process additives used: Steel, Aluminum, Delrin

B.5 Production is:
[✓] Batch [ ] Continuous [ ] Both 100 % Batch _____ % Continuous
Average Number of batches per 24-hour day N/A

B.6 Hours of operation: 7:00 a.m. to 3:30 p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [✓] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [✓] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[✓] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[✓]	Oil and/or grease	Cutting Fluid 100gal/yr
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[✓] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[✓] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

Store in 55gal Drums, (2)

Contact Crystal Clean to pick up

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

ECMD, INC.
620 INDUSTRIAL DRIVE, SPARTA, TN
Zip: 38583 Telephone (931) 836.3865

A.2 Address of production or manufacturing facility.

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

ED HOLLAND, ECMD, INC., VP-PROPERTY & FACILITIES
828.773.9641

A.4 Alternate person to contact concerning information provided herein:
Name KIM CARNEY Title OFFICE TECH Telephone (931. 836.3865

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

DISTRIBUTION WAREHOUSING

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

01.16.2023 _____
Date Signature of Official
(Seal is applicable)

ECMD, INC.
P.O. BOX 130
N. WILKESBORO, NC 28659
CELL: 828.773.9641
OFFICE: 336.667.5976
EMAIL: edholland@ecmd.com

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

DISTRIBUTION OF BUILDING PRODUCTS (i.e., MOULDINGS, BOARDS, STAIRPARTS)

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

493110

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee ~~showers~~, etc.)		estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	400 - 500	estimated	~~measured~~
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Endoren Products
8817 West Market Street, Colfax NC
Zip: 27235 Telephone (336) 662-2472

A.2 Address of production or manufacturing facility.

130 Sunset Dr
Sparta, TN
Zip: 38583 Telephone (336) 668-2472

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Jordan Geras
336-414-7047

A.4 Alternate person to contact concerning information provided herein:
Name N/A Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Machine Shop

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/5/23
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

All manufacturing operations have been shut-down. The facility has a small equipment building shop used to design and test new equipment.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3 21911

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	40 gallons	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[✓]	Waste haulers	.3gal	estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

1 (55) gallon Drum Annually (maybe 2)

Provide name and address of waste hauler(s), if used,

Safety Kleen

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] no [✓]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____

_____

_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____

_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [X] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type
[ ] Rainwater Diversion or Storage
[ ] Other Chemical Treatment,
[ ] Other physical Treatment,
[ ] Other,
[X] No Pretreatment Provided

Waste material is taken off Site by Safety Kleen

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
Hillsman Modular Molding, Inc. (HMMI)
189, Churchill Drive, Sparta, TN
Zip: 38583 Telephone ( ) 931.837.9040

A.2 Address of production or manufacturing facility.
189 Churchill Dr.
Sparta, TN
Zip: 38583 Telephone ( )

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
Rodney Hillsman, Owner
931.837.9040, x103

A.4 Alternate person to contact concerning information provided herein:
Name Kymber Corbin Title Administrative Manager Telephone ( ) 931.837.9040 x115

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Production of small plastic parts

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

2/1/2023
Date

Kymber A Corbin
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Produce small plastic parts

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	2,625	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____

_____

_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____

_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [✓] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4-bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

N/A

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Hormann LLC 450 Airport Rd Sparta TN 38583
1-931- 345 - 2050 ext 403

Zip: 38583 Telephone ( ) 1-931- 345 - 2050 ext 403

A.2 Address of production or manufacturing facility.

450 Airport Road sparta TN

Zip: 38583 Telephone ( ) 1-931- 345 2050 ext 403

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Dusty Tidwell Maintenance Manager - 1-931-316-6632

A.4 Alternate person to contact concerning information provided herein:

Name Jeff Bussell Title Plant Manager Telephone ( ) 1-931-316-0808

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Production of Residential & Commerical Garage Doors

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12-14-22
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

We recieve Raw material in Coils we run it through of machines which Press & form Raw material into a Garage Door, Stud & track rails, we Produce 3 Different types of Door Sandwich, Pan & Polyurethane. we also install windows in Doors & Paint to specific color.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

Facility ID 93-0118

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	200	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	10	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

NA

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] no [✓]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 1
Average number of employees per shift: 100

B.2 Starting times of each shift: 1st 8:00 (am) pm 2nd NA am pm 3rd NA am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Garage Doors, Strait & Track

B.4 Raw materials and process additives used:
Steel, Polyol, oil & Isocyanate, Pentane

B.5 Production is:
[ ] Batch [✓] Continuous [ ] Both ____% Batch 50 % Continuous
Average Number of batches per 24-hour day

B.6 Hours of operation: 8:00 (a.m.) to 4:30 (p.m.) [✓] Continuous

B.7 Is production subject to seasonal variation? [✓] yes [ ] no
If yes, briefly describe seasonal production cycle:
There is on Seasonal Production to be exact all Depends on Demand of Product

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [✓] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [✓] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [√] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Industrial Air Purification
580 Technology Dr.
Zip: 38583 Telephone ( ) 931-372-0050

A.2 Address of production or manufacturing facility.

SAA

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

. Michael Bradshaw

A.4 Alternate person to contact concerning information provided herein:
Name Cindy Bradshaw Title Owner Telephone ( ) 931-372-0050

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Design, Service, + Sell Air Purification Equipment

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1-16-2023 M. Bradshaw

Date Signature of Official (Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Warehouse of Material. We do wash off equipment in a wash bay. We plan to have a sheet metal fabrication area in 2024. We have a paint booth that is intermittedly used and waste is stored in containers

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

333413 35640104

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	20-50	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[✓]	Equipment/Facility washdown	10-20	estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i	30-70		

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	30-70	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

Metal – Scott's Salvage, 5840 Roberts Massiew Hwy Spawn TN 38583

Trash – Wilson Brothers, 1549 East Spring St Cookeville TN 38506

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] no [✓]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 1
Average number of employees per shift: 10 - 12

B.2 Starting times of each shift: 1st 6 am / pm 2nd _____ am / pm 3rd _____ am / pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Air Purification Equipment

B.4 Raw materials and process additives used:
Cardboard, Steel

B.5 Production is: N/A - Warehouse
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: 6 a.m. to 6 p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [✓] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [✓] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

- Fabrication Shop
- Another Building

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [✓] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[✓] Grease or Oil Separation
[ ] Chemical Precipitation	[✓] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[✓] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type
[ ] Rainwater Diversion or Storage
[ ] Other Chemical Treatment,
[ ] Other physical Treatment,
[ ] Other,
[ ] No Pretreatment Provided

Building was purchased with an existing wash bay, which includes:
- drop out pit w/ screen
- tank with separator, filter & skimmer

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol. 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1.3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene. 2.4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene. 2.6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol. 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine. diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine. di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane. bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane. dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane. tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether. bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate. di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1.2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [✓] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Jackson Kayak
3300 McMinnville Hwy Sparta Tn 38583
Zip: 38583 Telephone (931) 738-6436

A.2 Address of production or manufacturing facility.

same as above

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Jeff Leach Human Resources/EHS - 931-738-6436
Randall Walker General Manager 931-738-6420

A.4 Alternate person to contact concerning information provided herein:
Name Randall Walker Title GM Telephone (931) 738-6420

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Manufacturing

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12/16/22
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Plastic Rotomolding, Plastic thermoforming and Raw Assembly

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3732

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	400	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[X]	Storm water runoff to sanitary sewer		estimated	measured Unmetered
i.	[ ]	Other, describe		estimated	measured

Total A.8.a - A.8.i

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	1x1	Sanitary		estimated	measured
b.		Storm Sewer		estimated	measured
c.	X	Surface		estimated	measured
d.		Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured

Total A.9.a - A.9.g

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: ~~0~~ 3
Average number of employees per shift: 40 1st - 2nd 7- 3rd

B.2 Starting times of each shift: 1st 7:00 am 3:15 pm 2nd 2:30 PM ~~am~~ 11:00 PM pm 3rd 10:45 P ~~am~~ PM 7:15 ~~pm~~ AM

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Plastic Kayaks and outdoor goods

B.4 Raw materials and process additives used:
HDPE Plastics

B.5 Production is:
[ ] Batch [X] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day 120

B.6 Hours of operation: _____ a.m. to _____ p.m. [✓] Continuous

B.7 Is production subject to seasonal variation? [X] yes [ ] no
If yes, briefly describe seasonal production cycle:
Peak season - Spring - Summer

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [X] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Suspected Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Suspected Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [X] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[X] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[X] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

Landfill - dispose of it properly

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

KRM Fab, LLC
101 Moore Street Sparta TN
Zip: 38583 Telephone (931) 837-3626

A.2 Address of production or manufacturing facility.

KRM Fab, LLC
101 Moore Street Sparta TN
Zip: 38583 Telephone (931) 837-3626

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Mike Evanichko, CFO, 931-837-3626

A.4 Alternate person to contact concerning information provided herein:
Name Ben Pletcher Title Sales Mgr Telephone (931) 837-3626

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Foam & plastic fabrication & Corrugated assembly

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12/7/2022
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Fabrication of plastic and foam.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

30- Rubber & Misc plastic products

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	7000	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured

Total A.8.a - A.8.i

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[X]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[X]	Other, describe		estimated	measured

Tradebe Environmental Services

Total A.9.a - A.9.g

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [X] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 1
Average number of employees per shift: 20

B.2 Starting times of each shift: 1st 7 am / 3:30 pm 2nd _____ am / pm 3rd _____ am / pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Foam / Corrugated

B.4 Raw materials and process additives used:

Foam

B.5 Production is:
[ ] Batch [X] Continuous [ ] Both _____ % Batch 100 % Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: 7 a.m. to 3:30 p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [X] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [X] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[X] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [X] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
QUALITY SERVICE GROUP

Zip: 38583 Telephone ( ) 615-815-9056

A.2 Address of production or manufacturing facility.
325 IRIS DRIVE
SPARTA TN
Zip: 38583 Telephone ( ) 615-815-9056

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
TODD PRUNICH - OWNER 615-815-9056

A.4 Alternate person to contact concerning information provided herein:
Name N/A Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
QUALITY

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1-24-23
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

We DO NOT MANUFACTURE OR Produce ANY Products

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

8018

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	100	estimated	measured
b.	[ ]	Cooling water, non contact	N/A	estimated	measured
c.	[ ]	Boiler/tower blowdown	N/A	estimated	measured
d.	[ ]	Cooling water, contact	N/A	estimated	measured
e.	[ ]	Process	N/A	estimated	measured
f.	[ ]	Equipment/Facility washdown	N/A	estimated	measured
g.	[ ]	Air pollution control unit	N/A	estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer	Unknown	estimated	measured
i.	[ ]	Other, describe	N/A	estimated	measured

Total A.8.a - A.8.i _____

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary	N/A	estimated	measured
b.	[X]	Storm Sewer	20	estimated	measured
c.	[ ]	Surface	N/A	estimated	measured
d.	[ ]	Ground water	N/A	estimated	measured
e.	[ ]	Waste haulers	N/A	estimated	measured
f.	[ ]	Evaporation	N/A	estimated	measured
g.	[ ]	Other, describe	N/A	estimated	measured

Total A.9.a - A.9.g _____

Provide name and address of waste hauler(s), if used,

N/A

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [X] no [ ]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
REBO LIGHTING & ELECTRONICS
325 SEWELL DR. SPARTA TN
Zip: 38583 Telephone (931) 738-4203

A.2 Address of production or manufacturing facility.
325 SEWELL DR. SPARTA TN
Zip: 38583 Telephone (931) 738-4203

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
. DENNIS TRUSTY MFG. ENGINEER MNG

A.4 Alternate person to contact concerning information provided herein:
Name SANDRA BOHANNON Title DIR. OPERAT. ON Telephone (931) 738-4261

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
~~REB~~ AUTOMOTIVE LIGHTING

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/18/23
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Automotive lighting → INJECTION MOLDING → SMT → Assembly

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

Group 364 → 3647

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	1,500	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i	1,500		

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [X] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 3
Average number of employees per shift: 20

B.2 Starting times of each shift: 1st 7 am 3 pm 2nd 3 am 3 pm 3rd _____ am 11 pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Interior Automotive lighting

B.4 Raw materials and process additives used:
Plastics

B.5 Production is:
[ ] Batch [ ] Continuous [X] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [X] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [X] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [X] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[X] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	BATTERIES 55 GALLON DRUMS/YEAR
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	USED OIL & GREASE 1DRUM/YEAR
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe), ELECTRONIC WASTE	

D.3 For the above checked wastes, does your company practice:

[X] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[X] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

MRS takes away once/year BATTERY, OIL & ELECTRONIC WASTE

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Redy Lock & Roll Storage – Sam Cash Enterprises Inc.
P.O. Box 1370 Cookeville, TN
Zip: 38503 Telephone (931) 400-5277

A.2 Address of production or manufacturing facility.

2276 Smithville Hwy Sparta, TN
Zip: 38583 Telephone (931) 400-5277

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Nancy Jones, President

A.4 Alternate person to contact concerning information provided herein:
Name _____ Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Self Storage.

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12/13/23	Nancy Jones
Date	Signature of Official (Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts. Leasing of Various Sizes of Storage Units

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[ ]	Domestic Waste (restrooms, employee showers, etc.)		estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____
_____
_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____
_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation
[ ] Centrifuge
[ ] Chemical Precipitation
[ ] Grit Removal
[ ] Ion Exchange
[ ] Sump
[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type
[ ] Rainwater Diversion or Storage
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided

[ ] Chlorination
[ ] Cyclone
[ ] Filtration
[ ] Ozonation
[ ] Reverse Osmosis
[ ] Screen

[ ] Flow Equalization
[ ] Grease or Oil Separation
[ ] Grease Trap
[ ] Sedimentation
[ ] Septic Tank
[ ] Solvent

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	_____
[ ]	Heavy Metal Sludges	_____
[ ]	Inks/Dyes	_____
[ ]	Oil and/or grease	_____
[ ]	Organic Compounds	_____
[ ]	Paints	_____
[ ]	Pesticides	_____
[ ]	Plating Wastes	_____
[ ]	Pretreatment sludges	_____
[ ]	Solvents/Thinners	_____
[ ]	Other Hazardous Wastes, describe:	_____

_____

_____

[ ] Other Wastes, (describe), _____

_____

_____

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

_____

_____

_____

_____

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

SPARTA METAL PROCESSING
327 Turntable RD SPARTA, TN
Zip: 38583 Telephone ( ) 931-738-9369

A.2 Address of production or manufacturing facility.

SAME AS Above

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

JIM ENGLERT PRESIDENT 469-652-3639

A.4 Alternate person to contact concerning information provided herein:
Name Julio Lopez Title PLANT MANAGER Telephone ( ) 317-800-0831

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

INS Aluminum & INS Copper wire Recycling

Note to Signing Official: *In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12-07-2022
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Wire is RAN Through A MTB wire Processing Line that Seperates the Alum & copper from the Plastic, then we Sell the metal to Consumers who Re-Melt it BACK into Rod.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

50930203

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	80	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[X]	Sanitary	80	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used.

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [X] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____

_____

_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____

_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.

Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[ ]	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Sparta Wood Works
One Quality Lane
Zip: 38583 Telephone (931) 738-2231

A.2 Address of production or manufacturing facility.

SAME AS ABOVE

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Jay Dee Hanna, Operations Mgr 931-738-2231

A.4 Alternate person to contact concerning information provided herein:
Name _____ Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

wood component manufacturer

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12-5-22
Date

Jay Dee Hanna
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Wood components for end users, sale of hardwood lumber and squares.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

2521

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	40	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i	1		

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[X]	Other, describe	40	estimated	measured
		Total A.9.a - A.9.g	1		

City Sewer System

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____
_____
_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____
_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation	[ ] Chlorination	[ ] Flow Equalization
[ ] Centrifuge	[ ] Cyclone	[ ] Grease or Oil Separation
[ ] Chemical Precipitation	[ ] Filtration	[ ] Grease Trap
[ ] Grit Removal	[ ] Ozonation	[ ] Sedimentation
[ ] Ion Exchange	[ ] Reverse Osmosis	[ ] Septic Tank
[ ] Sump	[ ] Screen	[ ] Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	

[ ] Other Wastes, (describe),

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
Taco Metals 1922 Smithville Hwy
Sparta TN
Zip: 38583 Telephone (931) 652-8566

A.2 Address of production or manufacturing facility.

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
Eric Hutchinson Maintenance Manager
931-256-5015

A.4 Alternate person to contact concerning information provided herein:
Name _____ Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Marine manufacturing

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/17/23
Date

Signature of Official
(Seal is applicable)

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Taco Metals 1922 Smithville Hwy
Sparta TN
Zip: 38583 Telephone (305) 652-8566

A.2 Address of production or manufacturing facility.

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Eric Hutchinson Maintenance Manager
931-256-5015

A.4 Alternate person to contact concerning information provided herein:
Name _____ Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Marine manufacturing

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/17/23
Date

EAH
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Produce Rub rail for boats & sport fishing Equipment for the marine Industry

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	722	(estimated)	measured
b.	[X]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[X]	Other, describe		estimated	measured

Used coolant hauled off in 55 gallon drums by Safety Kleen

Total A.8.a - A.8.i

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[X]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[X]	Waste haulers	500 gal	estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured

Total A.9.a - A.9.g

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: _____
Average number of employees per shift: _____

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: _____

B.4 Raw materials and process additives used:

_____

_____

_____

B.5 Production is:
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [ ] no
If yes, briefly describe seasonal production cycle:

_____

_____

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ]	Air Flotation	[ ]	Chlorination	[ ]	Flow Equalization
[ ]	Centrifuge	[ ]	Cyclone	[ ]	Grease or Oil Separation
[ ]	Chemical Precipitation	[ ]	Filtration	[ ]	Grease Trap
[ ]	Grit Removal	[ ]	Ozonation	[ ]	Sedimentation
[ ]	Ion Exchange	[ ]	Reverse Osmosis	[ ]	Septic Tank
[ ]	Sump	[ ]	Screen	[ ]	Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Textrail Trailer Parts
5590 Roberts Matthews Hwy, Sparta, TN
Zip: 38583 Telephone (931) 739-4034

A.2 Address of production or manufacturing facility.

Same, we are a distributor

Zip: _____ Telephone ( ) _____

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Tawnia Hodges Branch Manager

A.4 Alternate person to contact concerning information provided herein:
Name Troy Pennington Title Asst. Branch Mgr Telephone (931) 739-4034

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Trailer Parts Distributor

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12/19/22
Date

Tawnia Hodges
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

We are a distributor of trailer parts. We load and unload trucks.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

N/A

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	5	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
e.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary (septic tank)	5	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

yes [ ] N/A no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
THK Rhythm North America Co., LTD
549 Vista Drive Sparta TN
Zip: 38583 Telephone ( ) 931-738-2250

A.2 Address of production or manufacturing facility.
549 Vista Drive
Sparta TN
Zip: 38583 Telephone ( ) 931-738-2250

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
. Kell Stott EHS/Compliance Manager 931-738-2250 ext 223

A.4 Alternate person to contact concerning information provided herein:
Name Jackie Dodson Title Compliance Coordinator Telephone ( ) 931-738-2250 ext 480

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Manufacture of steering / suspension components for automotive industry, including e-coat painting operation

Note to Signing Official: *In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

20 / MAY / 2021
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

TRNA cold forms, welds, machines, paints and assembles components parts for steering/suspension systems for the automotive industry

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

3714

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	8461	(estimated)	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[✓]	Boiler/tower blowdown	50	(estimated)	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[✓]	Process	3400	estimated	(measured)
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	11911	(estimated)	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used.

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [✓] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 3
Average number of employees per shift: 1ST: 186 2nd: 80 3rd: 20

B.2 Starting times of each shift: 1st 0700 am / 3:30 pm 2nd 3:00 PM ~~am~~ / 11:30 pm 3rd 11:00 ~~am~~ pm / 7:30 ~~pm~~ am

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Ball Joints, Stabilizer Connecting Rods, Tie Rods, Control Arms

B.4 Raw materials and process additives used:
steel, electrodeposition paint, pretreatment chemicals & cleaners, waste treatment chemicals, oils, solvents, greases, coolants, hydraulic fluids, aluminum

B.5 Production is:
[ ] Batch [✓] Continuous [ ] Both ____% Batch 100 % Continuous
Average Number of batches per 24-hour day

B.6 Hours of operation: 0700 a.m. to 11:30 p.m. [✓] Continuous
11:00 pm to 0730 am

B.7 Is production subject to seasonal variation? [ ] yes [✓] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [✓] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [✓] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [✓] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ] Air Flotation
[ ] Centrifuge
[✓] Chemical Precipitation
[ ] Grit Removal
[ ] Ion Exchange
[ ] Sump
[✓] Neutralization, pH Correction
[ ] Biological Treatment, Type
[ ] Rainwater Diversion or Storage
[ ] Other Chemical Treatment,
[ ] Other physical Treatment,
[ ] Other,
[ ] No Pretreatment Provided

[ ] Chlorination
[ ] Cyclone
[ ] Filtration
[ ] Ozonation
[✓] Reverse Osmosis
[ ] Screen

[ ] Flow Equalization
[ ] Grease or Oil Separation
[ ] Grease Trap
[ ] Sedimentation
[ ] Septic Tank
[ ] Solvent

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

C.4 Priority Pollutant Information.

Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[✓]	
2.	Arsenic	[ ]	[ ]	[ ]	[✓]	
3.	Asbestos	[ ]	[ ]	[ ]	[✓]	
4.	Beryllium	[ ]	[ ]	[ ]	[✓]	
5.	Cadmium	[ ]	[ ]	[ ]	[✓]	
6.	Chromium	[ ]	[ ]	[ ]	[✓]	
7.	Copper	[ ]	[ ]	[ ]	[✓]	
8.	Cyanide	[ ]	[ ]	[ ]	[✓]	
9.	Lead	[ ]	[ ]	[ ]	[✓]	
10.	Mercury	[ ]	[ ]	[ ]	[✓]	
11.	Nickel	[✓]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[✓]	
13.	Silver	[ ]	[ ]	[ ]	[✓]	
14.	Thallium	[ ]	[ ]	[ ]	[✓]	
15.	Zinc	[✓]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[✓]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[✓]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[✓]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[✓]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[✓]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[✓]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[✓]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[✓]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[✓]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[✓]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[✓]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[✓]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[✓]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[✓]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[✓]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[✓]	
32.	Toluene	[ ]	[ ]	[ ]	[✓]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[✓]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[✓]	
35.	PCB-1016	[ ]	[ ]	[ ]	[✓]	
36.	PCB-1221	[ ]	[ ]	[ ]	[✓]	
37.	PCB-1232	[ ]	[ ]	[ ]	[✓]	
38.	PCB-1242	[ ]	[ ]	[ ]	[✓]	
39.	PCB-1248	[ ]	[ ]	[ ]	[✓]	
40.	PCB-1254	[ ]	[ ]	[ ]	[✓]	
41.	PCB-1260	[ ]	[ ]	[ ]	[✓]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[✓]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[✓]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[✓]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[✓]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[✓]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[✓]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[✓]	
49.	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[✓]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[✓]	
51.	Benzidine	[ ]	[ ]	[ ]	[✓]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[✓]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[✓]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[✓]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[✓]	
56	Methane, chloro	[ ]	[ ]	[ ]	[✓]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[✓]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[✓]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[✓]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[✓]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[✓]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[✓]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[✓]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[✓]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[✓]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[✓]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[✓]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[✓]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[✓]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[✓]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[✓]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[✓]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[✓]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[✓]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[✓]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[✓]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[✓]	
	Acenaphthylene	[ ]	[ ]	[ ]	[✓]	
79.	Anthracene	[ ]	[ ]	[ ]	[✓]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[✓]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[✓]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[✓]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[✓]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[✓]	
85	Chrysene	[ ]	[ ]	[ ]	[✓]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[✓]	
87	Fluorathene	[ ]	[ ]	[ ]	[✓]	
88	Fluorene	[ ]	[ ]	[ ]	[✓]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[✓]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[✓]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[✓]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[✓]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[✓]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[✓]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[✓]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[✓]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[✓]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[✓]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[✓]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[✓]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[✓]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[✓]	
103	DDT	[ ]	[ ]	[ ]	[✓]	
104	Dieldrin	[ ]	[ ]	[ ]	[✓]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[✓]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[✓]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[✓]	
108	Endrin	[ ]	[ ]	[ ]	[✓]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[✓]	
110	Heptachlor	[ ]	[ ]	[ ]	[✓]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[✓]	
112	Isophorone	[ ]	[ ]	[ ]	[✓]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[✓]	
114	Toxaphene	[ ]	[ ]	[ ]	[✓]	
115	Naphthalene	[ ]	[ ]	[ ]	[✓]	
116	Phenathrene	[ ]	[ ]	[ ]	[✓]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[✓]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[✓]	
	Aldrin	[ ]	[ ]	[ ]	[✓]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[✓]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[✓]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[✓]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[✓]	
124.	Chlordane	[ ]	[ ]	[ ]	[✓]	
125.	DDD	[ ]	[ ]	[ ]	[✓]	
126.	DDE	[ ]	[ ]	[ ]	[✓]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[✓] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[✓]	Oil and/or grease	Used oil = 20,628 lbs/year Used Grease = 17534 lbs/year
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[✓]	Pretreatment sludges	10,000 lbs/year
[✓]	Solvents/Thinners	137 lbs/year
[ ]	Other Hazardous Wastes, describe:	
[✓]	Other Wastes, (describe), machine coolants & Mop water	55,050 gal/year

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[✓] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

oil/grease are shipped to Agua Treat Inc in Chattanooga for disposal/reclamation
machine coolant/mop water shipped to Agua Treat Inc in Chattanooga for reclamation/treatment back to potable water
Solvents/thinners are shipped to Marion Environmental Chattanooga then to Clean Earth in Calvert City KY for disposal/reclamation as appropriate
sludges are special waste permitted to go to local landfill
aluminum pucks, shaving picked up by Scotts Auto Salvage - goes to recycle
Metal scrap picked up by Scotts Auto Salvage - goes to recycle

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
TLT, Inc. The Lord's Table
390 Sewell Drive Sparta Tn.
Zip: 38583 Telephone 931 739-1986

A.2 Address of production or manufacturing facility.
390 Sewell Drive
Sparta, Tn. ~~38583~~
Zip: ~~38583~~ Telephone ~~931~~ 739 1986

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
Tahir Rajab - Owner (256) 499-0984

A.4 Alternate person to contact concerning information provided herein:
Name Denise Knowles Title _____ Telephone (931-739-1986

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
manufacturer of Director Chairs

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1/24/23
Date

Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Manufacturing of Director Chairs, barstool, wood table tops.
Production/Service of embroidery, screening

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry: 2511 / 5712

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	3.92	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[ ]	Sanitary		estimated	measured
b.	[X]	Storm Sewer	3.92	estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [X] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 20
Average number of employees per shift: 20

B.2 Starting times of each shift: 1st 7:00 am 2nd _____ am 3rd _____ am
3:30 pm pm pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: Director Chairs

B.4 Raw materials and process additives used:
Beech, Ash, Red oak (rough and Surfaced)

B.5 Production is:
[ ] Batch [ ] Continuous [X] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: 7 a.m. to 3:30 p.m. [X] Continuous

B.7 Is production subject to seasonal variation? [X] yes [X] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [X] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [X] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[ ]	Oil and/or grease	
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[ ] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Tractor Supply
768 Millers Point Road Sparta, TN
Zip: 38583 Telephone ( ) 931 256 8560

A.2 Address of production or manufacturing facility.

5401 Virginia Way
Brentwood TN
Zip: 37027 Telephone ( ) 615 440 4600

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Annie Pippin Store Manager 931 644 2221

A.4 Alternate person to contact concerning information provided herein:

Name Katie Deitrich Title assistant Manager Telephone ( ) 409 549 0344

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Retail

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

1.31.23
Date

Katie Deitrich
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Retail. We have a Pet Wash Station and Propane Refill Station

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	~200	(estimated)	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured

Total A.8.a - A.8.i _____

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary		estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured

Total A.9.a - A.9.g _____

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [✓] no [ ]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

WASTEWATER SURVEY FOR NONRESIDENTIAL ESTABLISHMENTS:
APPLICATION FOR WASTEWATER DISCHARGE PERMIT

SECTION A - GENERAL INFORMATION

A.1. Company name, mailing address, and telephone number:
Upper Cumberland Regional Airport
750 Airport Rd.
Sparta, TN
Zip Code 38583 Telephone No. (931) 739-7000

A.2. Address of production or manufacturing facility. (If same as above, check ✓.)

Zip Code _____ Telephone No. ( )

A.3. Name, title, and telephone number of person authorized to represent this firm in official dealings with the Sewer Authority and/or City:
Dean Selby, Airport Manager (931) 261-4008

A.4. Alternate person to contact concerning Information provided herein
Name Denny Wayne Robinson Title White County Executive Tel. No. (931) 619-7250

A.5. Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, meat packing, food processing, etc.).
Regional Airport

Note to Signing Official: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provided in this questionnaire which identifies the nature and frequency of discharge shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed by procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire will be used to issue the permit.

This is to be signed by an authorized official of your firm after adequate completion of this form and review of the information by the signing official.

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 the 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, including the possibility of fine and/or imprisonment.

5-17-22
Date

Signature of Official
(Seal if applicable)

A.6. Provide a brief narrative description of the manufacturing, production, or service activities your firm conducts.

Regional Airport - Aircraft landing and navagation; runway management; Airport terminal business operations

Maintenance Shop/Air Ambulance Services

A.7. Standard Industrial Classification Number(s) (SIC Code) for your facilities:

4581

A.8. This facility generates the following types of wastes (check all that apply):

		Average gallons per day	
1.	[✓] Domestic wastes (restrooms, employee showers, etc.)	500	[✓] estimated [ ] measured
2.	[ ] Cooling water, non-contact		[ ] estimated [ ] measured
3.	[ ] Boiler/Tower blowdown		[ ] estimated [ ] measured
4.	[ ] Cooling water, contact		[ ] estimated [ ] measured
5.	[ ] Process		[ ] estimated [ ] measured
6.	[ ] Equipment/Facility Washdown		[ ] estimated [ ] measured
7.	[ ] Air Pollution Control Unit		[ ] estimated [ ] measured
8.	[ ] Storm water runoff to sewer		[ ] estimated [ ] measured
9.	[ ] Other (describe)		[ ] estimated [ ] measured
	Total A.8.1 - A.8.9		

A.9. Wastes are discharged to (check all that apply):

	Average Gallons per day		
[✓] Sanitary sewer	500	[✓] estimated	[ ] measured
[ ] Storm sewer		[ ] estimated	[ ] measured
[ ] Surface water		[ ] estimated	[ ] measured
[ ] Ground water		[ ] estimated	[ ] measured
[ ] Waste haulers		[ ] estimated	[ ] measured
[ ] Evaporation		[ ] estimated	[ ] measured
[ ] Other (describe)		[ ] estimated	[ ] measured

Provide name and address of waste hauler(s), if used.

A.10. Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?

[✓] yes [ ] no

Note: If your facility did not check one or more of the items listed in A.8.4 through A.8.9 above, then you do not need to complete any further sections in this survey/application. If any items A.8.4 through A.8.9 were checked, complete the remainder of this survey/application.

SECTION B - FACILITY OPERATION CHARACTERISTICS

B.1 Number of employee shifts worked per 24-hour day is 5.
Average number of employees per shift is 15.

B.2 Starting times of each shift: 1st 7 [am] pm 2nd 3 am [pm] 3rd N/A am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: N/A

B.4 Raw materials and process additives used:
N/A

B.5 Production process is:
[ ] Batch [ ] Continuous [ ] Both _____%batch _____%continuous
Average number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. [✓] continuous

B.7 Is production subject to seasonal variation? [ ] yes [✓] no
If yes, briefly describe seasonal production cycle.

B.8 Are any process changes or expansions planned during the next three years?
[✓] yes [ ] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

ECTION C - WASTEWATER INFORMATION

.1 If your facility employs processes in any of the 34 industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity (check all that apply)

A. 34 Industrial Categories

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Auto & Other Laundries
4. [ ] Battery Manufacturing
5. [ ] Coal Mining
6. [ ] Coil Coating
7. [ ] Copper Forming
8. [ ] Electric & Electronic Components
9. [ ] Electroplating
10. [ ] Explosives Manufacturing
11. [ ] Foundries
12. [ ] Gum & Wood Chemicals
13. [ ] Inorganic Chemicals
14. [ ] Iron & Steel
15. [ ] Leather Tanning & Finishing
16. [ ] Mechanical Products
17. [ ] Nonferrous Metals
18. [ ] Ore Mining
19. [ ] Organic Chemicals
20. [ ] Paint & Ink
21. [ ] Pesticides
22. [ ] Petroleum Refining
23. [ ] Pharmaceuticals
24. [ ] Photographic Supplies
25. [ ] Plastic & Synthetic Materials
26. [ ] Plastics Processing
27. [ ] Porcelain Enamel
28. [ ] Printing & Publishing
29. [ ] Pump & Paper
30. [ ] Rubber
31. [ ] Soaps & Detergents
32. [ ] Steam Electric
33. [ ] Textile Mills
34. [ ] Timber

B. Other Business Activity

[ ] Dairy Products

[ ] Slaughter/Meat Packing/Rendering

[ ] Food/Edible Products Processor

[ ] Beverage Bottler

C.2 Pretreatment devices or processes used for treating wastewater or sludge (check as many as appropriate)

[ ] Air flotation
[ ] Centrifuge
[ ] Chemical precipitation
[ ] Chlorination
[ ] Cyclone
[ ] Filtration
[ ] Flow Equalization
[ ] Grease or oil separation, type _____
[ ] Grease trap
[ ] Grit Removal
[ ] Ion Exchange
[ ] Neutralization, pH correction
[ ] Ozonation
[ ] Reverse Osmosis
[ ] Screen
[ ] Sedimentation
[✓] Septic tank
[ ] Solvent separation
[✓] Spill protection
[ ] Sump
[ ] Biological treatment, type _____
[ ] Rainwater diversion or storage _____
[ ] Other chemical treatment, type _____
[ ] Other physical treatment, type _____
[ ] Other, type _____
[ ] No pretreatment provided

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this questionnaire. Be sure to include the date of the analysis, name of laboratory performing the analysis, and location(s) from which sample(s) were taken (attach sketches, plans, etc., as necessary).

C.4 Priority Pollutant Information: Please indicate by placing an "x" in the appropriate box by each listed chemical whether it is "Suspected to be Absent," "Known to be Absent," "Suspected to be Present," or "Known to be Present" in your manufacturing or service activity or generated as a by-product.

CHEMICAL COMPOUND	Known Present	Suspected Present	Known Absent	Suspected Absent	Known or Suspected Concentration/day
I. METALS & INORGANICS					
1. Antimony	[ ]	[ ]	[ ]	[ ]	___
2. Arsenic	[ ]	[ ]	[ ]	[ ]	___
3. Asbestos	[ ]	[ ]	[ ]	[ ]	___
4. Beryllium	[ ]	[ ]	[ ]	[ ]	___
5. Cadmium	[ ]	[ ]	[ ]	[ ]	___
6. Chromium	[ ]	[ ]	[ ]	[ ]	___
7. Copper	[ ]	[ ]	[ ]	[ ]	___
8. Cyanide	[ ]	[ ]	[ ]	[ ]	___
9. Lead	[ ]	[ ]	[ ]	[ ]	___
10. Mercury	[ ]	[ ]	[ ]	[ ]	___
11. Nickel	[ ]	[ ]	[ ]	[ ]	___
12. Selenium	[ ]	[ ]	[ ]	[ ]	___
13. Silver	[ ]	[ ]	[ ]	[ ]	___
14. Thallium	[ ]	[ ]	[ ]	[ ]	___
15. Zinc	[ ]	[ ]	[ ]	[ ]	___
II. PHENOLS AND CRESOLS					
16. Phenol(s)	[ ]	[ ]	[ ]	[ ]	___
17. Phenol, 2-chloro	[ ]	[ ]	[ ]	[ ]	___
18. Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	___
19. Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	___
20. Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	___
21. Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	___
22. Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	___
23. Phenol, 2,4-dinitro	[ ]	[ ]	[ ]	[ ]	___
24. Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	___
25. m-Cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	___
26. o-Cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	___
III. MONOCYCLIC AROMATICS (EXCLUDING PHENOLS, CRESOLS AND PHTHALATES)					
27. Benzene	[ ]	[ ]	[ ]	[ ]	___
28. Benzene, chloro	[ ]	[ ]	[ ]	[ ]	___
29. Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	___
30. Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	___
31. Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	___
32. Benzene, 1,2,4-trichloro	[ ]	[ ]	[ ]	[ ]	___
33. Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	___
34. Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	___
35. Benzene, nitro	[ ]	[ ]	[ ]	[ ]	___
36. Toluene	[ ]	[ ]	[ ]	[ ]	___
37. Toluene, 2,4-dinitro	[ ]	[ ]	[ ]	[ ]	___
38. Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	___
IV. PCBs & RELATED COMPOUNDS					
39. PCB-1016	[ ]	[ ]	[ ]	[ ]	___
40. PCB-1221	[ ]	[ ]	[ ]	[ ]	___
41. PCB-1232	[ ]	[ ]	[ ]	[ ]	___
42. PCB-1242	[ ]	[ ]	[ ]	[ ]	___
43. PCB-1248	[ ]	[ ]	[ ]	[ ]	___
44. PCB-1254	[ ]	[ ]	[ ]	[ ]	___
45. PCB-1260	[ ]	[ ]	[ ]	[ ]	___
46. 2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	___
V. ETHERS					
47. Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	___
48. Ether, bis(2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	___
49. Ether, bis(2-chloroisopropyl)	[ ]	[ ]	[ ]	[ ]	___
50. Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	___
51. Ether, 4-bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	___
52. Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	___
53. Bis(2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	___
VI. NITROSAMINES AND OTHER NITROGEN-CONTAINING COMPOUNDS					
54. Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	___
55. Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	___
56. Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	___
57. Benzidine	[ ]	[ ]	[ ]	[ ]	___
58. Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	___
59. Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	___
60. Acrylonitrile	[ ]	[ ]	[ ]	[ ]	___

CHEMICAL COMPOUND	Known Present	Suspected Present	Known Absent	Suspected Absent	Known or Suspected Concentration/day
VII. HALOGENATED ALIPHATICS					
61. Methane, bromo-	[ ]	[ ]	[ ]	[ ]	___
62. Methane, chloro-	[ ]	[ ]	[ ]	[ ]	___
63. Methane, dichloro	[ ]	[ ]	[ ]	[ ]	___
64. Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	___
65. Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	___
66. Methane, tribromo	[ ]	[ ]	[ ]	[ ]	___
67. Methane, trichloro	[ ]	[ ]	[ ]	[ ]	___
68. Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	___
69. Methane, trichlorofluoro	[ ]	[ ]	[ ]	[ ]	___
70. Methane, dichlorodifluoro	[ ]	[ ]	[ ]	[ ]	___
71. Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	___
72. Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	___
73. Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	___
74. Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	___
75. Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	___
76. Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	___
77. Ethene, chloro	[ ]	[ ]	[ ]	[ ]	___
78. Ethene, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	___
79. Ethene, trans-dichloro	[ ]	[ ]	[ ]	[ ]	___
80. Ethene, trichloro	[ ]	[ ]	[ ]	[ ]	___
81. Ethene, tetrachloro	[ ]	[ ]	[ ]	[ ]	___
82. Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	___
83. Propene, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	___
84. Butadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	___
85. Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	___
VIII. PHTHALATE ESTERS					
86. Phthalate, di-c-methyl	[ ]	[ ]	[ ]	[ ]	___
87. Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	___
88. Phathalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	___
89. Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	___
90. Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	___
91. Phthalate, butyl benzyl	[ ]	[ ]	[ ]	[ ]	___
IX. POLYCYCLIC AROMATIC HYDROCARBONS					
92. Acenaphthene	[ ]	[ ]	[ ]	[ ]	___
93. Acenaphthylene	[ ]	[ ]	[ ]	[ ]	___
94. Anthracene	[ ]	[ ]	[ ]	[ ]	___
95. Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	___
96. Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	___
97. Benzo (k) fluoranthene	[ ]	[ ]	[ ]	[ ]	___
98. Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	___
99. Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	___
100. Chrysene	[ ]	[ ]	[ ]	[ ]	___
101. Dibenzo (a,n,) anthracene	[ ]	[ ]	[ ]	[ ]	___
102. Fluoranthene	[ ]	[ ]	[ ]	[ ]	___
103. Fluorene	[ ]	[ ]	[ ]	[ ]	___
104. Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	___
105. Naphthalene	[ ]	[ ]	[ ]	[ ]	___
106. Phenanthrene	[ ]	[ ]	[ ]	[ ]	___
107. Pyrene	[ ]	[ ]	[ ]	[ ]	___
X. PESTICIDES					
108. Acrolein	[ ]	[ ]	[ ]	[ ]	___
109. Aldrin	[ ]	[ ]	[ ]	[ ]	___
110. BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	___
111. BHC (Beta)	[ ]	[ ]	[ ]	[ ]	___
112. BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	___
113. BHC (Delta)	[ ]	[ ]	[ ]	[ ]	___
114. Chlordane	[ ]	[ ]	[ ]	[ ]	___
115. DDD	[ ]	[ ]	[ ]	[ ]	___
116. DDE	[ ]	[ ]	[ ]	[ ]	___
117. DDT	[ ]	[ ]	[ ]	[ ]	___
118. Dieldrin	[ ]	[ ]	[ ]	[ ]	___
119. Endosulfan (Alpha)	[ ]	[ ]	[ ]	[ ]	___
120. Endosulfan (Beta)	[ ]	[ ]	[ ]	[ ]	___
121. Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	___
122. Endrin	[ ]	[ ]	[ ]	[ ]	___
123. Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	___
124. Heptachlor	[ ]	[ ]	[ ]	[ ]	___
125. Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	___
126. Isophorone	[ ]	[ ]	[ ]	[ ]	___
127. TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	___
128. Toxaphene	[ ]	[ ]	[ ]	[ ]	___

C.5 If you are unable to identify the chemical constituents of products you use that discharged in your wastewater, attach copies of the materials safety data sheets for such products.

"TION D - OTHER WASTES

1 Are any liquid wastes or sludges from this firm disposed of by means other than discharge to the sewer system?

[ ] yes [✓] no

If "no," skip remainder of Section E.
If "yes," complete items 2 and 3.

2 These wastes may best be described as:

	Estimated Gallons or Pounds/Year
[ ] Acids and Alkalies	
[ ] Heavy Metal Sludges	
[ ] Inks/Dyes	
[ ] Oil and/or Grease	
[ ] Organic Compounds	
[ ] Paints	
[ ] Pesticides	
[ ] Plating Wastes	
[ ] Pretreatment Sludges	
[ ] Solvents/Thinners	
[ ] Other Hazardous Wastes (specify)	
_____	
_____	
[ ] Other wastes(specify)	
_____	
_____	

3 For the above checked wastes, does your company practice:

[ ] on-site storage
[ ] off-site storage
[ ] on-site disposal
[ ] off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

ONE WORLD RESOURCE
ENVIRONMENTAL CONSULTANTS

Breanna Fowler
Hethcoat & Davis, Inc.
278 Franklin Road, Suite 200
Brentwood, Tennessee 37027

Subject:
Wastewater Survey for Non-Residential Establishments
United Parcel Service, Inc. – Sparta
630 Industrial Drive
Sparta, Tennessee 38583

Date:
February 13, 2023

Contact:
Pam McIlwain

Phone:
(225) 266-7840

Email:
pam@owr-group.com

Dear Ms. Fowler:

On behalf of our client, United Parcel Service, Inc. (UPS), One World Resource, LLC, hereby submits a Wastewater Survey for Non-Residential Establishments for the above-listed facility (Attachment A)

If you have any questions regarding the content of this correspondence or other matters, please contact me at (225) 266-7840 or Mr. Jeff Strachan with UPS at (615) 207-8996.

Sincerely,

One World Resource, LLC

Pam McIlwain

Pam McIlwain
Principal Environmental Scientist

Copies:
Mr. Jeff Strachan, Corporate Environmental Coordinator, UPS (electronic)

Attachment

ATTACHMENT A

Wastewater Survey for Non-Residential Establishments

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:
United Parcel Service, Inc.
630 Industrial Drive, Sparta, TN
Zip: 38583 Telephone ( ) 615-207-8996

A.2 Address of production or manufacturing facility.
630 Industrial Drive, Sparta, TN
Zip: 38583 Telephone ( ) 615-207-8996

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
. Jeff Strachan, UPS Corporate Environmental Coordinator
615-207-8996

A.4 Alternate person to contact concerning information provided herein:
Name _____ Title _____ Telephone ( ) _____

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Facility activities include sorting, loading, and delivery of packages and parcels. Site personnel fuel UPS vehicles. The vehicles are also washed inside the building using biodegradable soap.

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment. 2/13/2023

DocuSigned by:
Jeff Strachan
724566FF60EA4BF...

Date Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.
Incoming packages are sorted and reloaded on package cars for distribution to customers.
Package cars are washed indoors on site. The vehicles are washed using biodegradable soap.

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:
SIC Code 4215 - Courier Services, Except by Air

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[X]	Domestic Waste (restrooms, employee showers, etc.)	**250 gpd estimated**	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[X]	Equipment/Facility washdown	**250 gpd estimated**	estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured

Total A.8.a - A.8.i **500 gpd estimated**

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[X]	Sanitary	**500 gpd estimated**	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured

Total A.9.a - A.9.g **500 gpd estimated**

Provide name and address of waste hauler(s), if used,
NorthStar Environmental Group, Inc.
417 N Blythe Street, Gallatin TN 37066

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [X]

Note: If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: **M-F 3:30 am to 11:30 pm Sat 3:30 am to 8:30 pm Sun Closed**

Average number of employees per shift: **50 employees but the majority of those are ~~drivers and~~ they are ~~only on site~~ a short period of time.**

B.2 Starting times of each shift: 1st _____ am pm 2nd _____ am pm 3rd _____ am pm

Note: The following information in this section must be completed for each product line.

B.3 Principal product produced: No products are produced, but packages are sorted and shipped.

B.4 Raw materials and process additives used:
Only material added is biodegradable soap to wash the vehicles. The safety data sheet is attached.

B.5 Production is: **X - Intermittent**
[ ] Batch [ ] Continuous [ ] Both _____% Batch _____% Continuous
Average Number of batches per 24-hour day _____

B.6 Hours of operation: _____ a.m. to _____ p.m. **See answer to B.1.** [ ] Continuous

B.7 Is production subject to seasonal variation? [ ] yes [X] no
If yes, briefly describe seasonal production cycle:

B.8 Are any process changes or expansions planned during the next five years? [ ] yes [X] no
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

C.1 If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply: **None of the industrial categories below apply to the UPS facility.**

1. [ ] Adhesives
2. [ ] Aluminum Forming
3. [ ] Asbestos Manufacturing
4. [ ] Auto & other Laundries
5. [ ] Battery Manufacturing
6. [ ] Builder's Paper and Board Mills
7. [ ] Can Making
8. [ ] Carbon Black Manufacturing
9. [ ] Cement Manufacturing
10. [ ] Coal Mining
11. [ ] Coil Coating
12. [ ] Copper Forming
13. [ ] Dairy Products
14. [ ] Electric & Electronic Components
15. [ ] Electroplating
16. [ ] Explosives Manufacturing
17. [ ] Feedlots
18. [ ] Ferroalloy Manufacturing
19. [ ] Fertilizer Manufacturing
20. [ ] Foundries, (metal molding & casting)
21. [ ] Fruits and Vegetables Processing
22. [ ] Glass Manufacturing
23. [ ] Grain Mills
24. [ ] Gum & Wood Chemical
25. [ ] Hospitals
26. [ ] Inorganic Chemical
27. [ ] Iron & Steel
28. [ ] Leather Tanning & Finishing
29. [ ] Meat Products
30. [ ] Mechanical Products
31. [ ] Metal finishing
32. [ ] Mineral Mining and Processing
33. [ ] Nonferrous Metals Manufacture
34. [ ] Nonferrous Metals, Forming
35. [ ] Ore Mining and Dressing
36. [ ] Organic Chemical, Plastic & Synthetic Fibers
37. [ ] Organic Chemical
38. [ ] Paint & ink
39. [ ] Paving and Roofing Materials
40. [ ] Pesticides, Formulating, Packaging, Repackaging
41. [ ] Pesticides, Manufacturing
42. [ ] Petroleum Refining
43. [ ] Pharmaceuticals
44. [ ] Phosphate Manufacturing
45. [ ] Photographic Supplies
46. [ ] Plastic Molding and Forming
47. [ ] Plastics Processing
48. [ ] Porcelain Enameling
49. [ ] Printing & Publishing
50. [ ] Pulp, Paper and Paperboard
51. [ ] Rubber Manufacturing
52. [ ] Seafood Processing
53. [ ] Soaps & Detergents
54. [ ] Steam Electric Power Generating
55. [ ] Sugar Processing
56. [ ] Textiles Mills
57. [ ] Timber
58. [ ] Waste Disposal, Treating, and/or Incinerating

C.2 Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

[ ]	Air Flotation	[ ]	Chlorination	[ ]	Flow Equalization
[ ]	Centrifuge	[ ]	Cyclone	[X]	Grease or Oil Separation **OWS**
[ ]	Chemical Precipitation	[ ]	Filtration	[ ]	Grease Trap
[ ]	Grit Removal	[ ]	Ozonation	[ ]	Sedimentation
[ ]	Ion Exchange	[ ]	Reverse Osmosis	[ ]	Septic Tank
[ ]	Sump	[ ]	Screen	[ ]	Solvent

[ ] Neutralization, pH Correction
[ ] Biological Treatment, Type _____
[ ] Rainwater Diversion or Storage _____
[ ] Other Chemical Treatment, _____
[ ] Other physical Treatment, _____
[ ] Other, _____
[ ] No Pretreatment Provided _____

C.3 If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

Not applicable.

C.4 Priority Pollutant Information. **None of the priority polluntants listed below should be present in the wastewater.**
Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
1.	Antimony	[ ]	[ ]	[ ]	[ ]	
2.	Arsenic	[ ]	[ ]	[ ]	[ ]	
3.	Asbestos	[ ]	[ ]	[ ]	[ ]	
4.	Beryllium	[ ]	[ ]	[ ]	[ ]	
5.	Cadmium	[ ]	[ ]	[ ]	[ ]	
6.	Chromium	[ ]	[ ]	[ ]	[ ]	
7.	Copper	[ ]	[ ]	[ ]	[ ]	
8.	Cyanide	[ ]	[ ]	[ ]	[ ]	
9.	Lead	[ ]	[ ]	[ ]	[ ]	
10.	Mercury	[ ]	[ ]	[ ]	[ ]	
11.	Nickel	[ ]	[ ]	[ ]	[ ]	
12.	Selenium	[ ]	[ ]	[ ]	[ ]	
13.	Silver	[ ]	[ ]	[ ]	[ ]	
14.	Thallium	[ ]	[ ]	[ ]	[ ]	
15.	Zinc	[ ]	[ ]	[ ]	[ ]	
16.	Phenol (n)	[ ]	[ ]	[ ]	[ ]	
17.	Phenol 2-chloro	[ ]	[ ]	[ ]	[ ]	
18.	Phenol, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
19.	Phenol, 2,4,6-trichloro	[ ]	[ ]	[ ]	[ ]	
20.	Phenol, pentachloro	[ ]	[ ]	[ ]	[ ]	
21.	Phenol, 2-nitro	[ ]	[ ]	[ ]	[ ]	
22.	Phenol, 4-nitro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
23.	Benzene	[[	[ ]	[ ]	[ ]	
24.	Benzene, chloro	[ ]	[ ]	[ ]	[ ]	
25.	Benzene, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
26.	Benzene, 1,3-dichloro	[ ]	[ ]	[ ]	[ ]	
27.	Benzene, 1,4-dichloro	[ ]	[ ]	[ ]	[ ]	
28.	Benzene, 1,2, 4-trichloro	[ ]	[ ]	[ ]	[ ]	
29.	Benzene, hexachloro	[ ]	[ ]	[ ]	[ ]	
30.	Benzene, ethyl	[ ]	[ ]	[ ]	[ ]	
31.	Benzene, nitro	[ ]	[ ]	[ ]	[ ]	
32.	Toluene	[ ]	[ ]	[ ]	[ ]	
33.	Toluene, 2,4 dinitro	[ ]	[ ]	[ ]	[ ]	
34.	Toluene, 2,6-dinitro	[ ]	[ ]	[ ]	[ ]	
35.	PCB-1016	[ ]	[ ]	[ ]	[ ]	
36.	PCB-1221	[ ]	[ ]	[ ]	[ ]	
37.	PCB-1232	[ ]	[ ]	[ ]	[ ]	
38.	PCB-1242	[ ]	[ ]	[ ]	[ ]	
39.	PCB-1248	[ ]	[ ]	[ ]	[ ]	
40.	PCB-1254	[ ]	[ ]	[ ]	[ ]	
41.	PCB-1260	[ ]	[ ]	[ ]	[ ]	
42.	2-Chloronaphthalene	[ ]	[ ]	[ ]	[ ]	
43.	Ether, bis(chloromethyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[ ]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[ ]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[ ]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[ ]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[ ]	
49	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[ ]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[ ]	
51.	Benzidine	[ ]	[ ]	[ ]	[ ]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[ ]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[ ]	
54	Acrlonitrile	[ ]	[ ]	[ ]	[ ]	
		[ ]	[ ]	[ ]	[ ]	
55	Methane, bromo	[ ]	[ ]	[ ]	[ ]	
56	Methane, chloro	[ ]	[ ]	[ ]	[ ]	
57	Methane, dichloro	[ ]	[ ]	[ ]	[ ]	
58	Methane, chlorodibromo	[ ]	[ ]	[ ]	[ ]	
59	Methane, dichlorobromo	[ ]	[ ]	[ ]	[ ]	
60	Methane, tribromo	[ ]	[ ]	[ ]	[ ]	
61	Methane, trichloro	[ ]	[ ]	[ ]	[ ]	
62	Methane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
63	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
64	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
65	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[ ]	
66	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[ ]	
68	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
69	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[ ]	
70	Bis (2-chloroethoxy) methane	[ ]	[ ]	[ ]	[ ]	
71	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[ ]	
72	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[ ]	
73	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[ ]	
74	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[ ]	
75	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[ ]	
76	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[ ]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[ ]	
	Acenaphthylene	[ ]	[ ]	[ ]	[ ]	
79.	Anthracene	[ ]	[ ]	[ ]	[ ]	
80	Benzo (a) anthracene	[ ]	[ ]	[ ]	[ ]	
81	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[ ]	
82	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[ ]	
83	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[ ]	
84	Benzo (a) pyrene	[ ]	[ ]	[ ]	[ ]	
85	Chrysene	[ ]	[ ]	[ ]	[ ]	
86	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[ ]	
87	Fluorathene	[ ]	[ ]	[ ]	[ ]	
88	Fluorene	[ ]	[ ]	[ ]	[ ]	
89	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[ ]	
90	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[ ]	
91	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[ ]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[ ]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[ ]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[ ]	
96.	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[ ]	
97.	Ethane, trichloro	[ ]	[ ]	[ ]	[ ]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[ ]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[ ]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[ ]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[ ]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[ ]	
103	DDT	[ ]	[ ]	[ ]	[ ]	
104	Dieldrin	[ ]	[ ]	[ ]	[ ]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[ ]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[ ]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[ ]	
108	Endrin	[ ]	[ ]	[ ]	[ ]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[ ]	
110	Heptachlor	[ ]	[ ]	[ ]	[ ]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[ ]	
112	Isophorone	[ ]	[ ]	[ ]	[ ]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[ ]	
114	Toxaphene	[ ]	[ ]	[ ]	[ ]	
115	Naphthalene	[ ]	[ ]	[ ]	[ ]	
116	Phenathrene	[ ]	[ ]	[ ]	[ ]	

	Chemical compound	Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[ ]	
118.		[ ]	[ ]	[ ]	[ ]	
119.	Acrolein	[ ]	[ ]	[ ]	[ ]	
	Aldrin	[ ]	[ ]	[ ]	[ ]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[ ]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[ ]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[ ]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[ ]	
124.	Chlordane	[ ]	[ ]	[ ]	[ ]	
125.	DDD	[ ]	[ ]	[ ]	[ ]	
126.	DDE	[ ]	[ ]	[ ]	[ ]	

C.5 *If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.*

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?

[**X**] yes [ ] no

If "no", skip remainder of Section D.
If "yes", complete remaining items.

D.2 These wastes may best be described as:

		Estimated Gallons or Pounds/Year
[ ]	Acids and Alkalines	
[ ]	Heavy Metal Sludges	
[ ]	Inks/Dyes	
[**X**]	Oil and/or grease **/Sludge**	**916 gallons in 2022**
[ ]	Organic Compounds	
[ ]	Paints	
[ ]	Pesticides	
[ ]	Plating Wastes	
[ ]	Pretreatment sludges	
[ ]	Solvents/Thinners	
[ ]	Other Hazardous Wastes, describe:	
[ ]	Other Wastes, (describe),	

D.3 For the above checked wastes, does your company practice:

[ ] On-site storage
[ ] Off-site storage
[ ] On-site disposal
[**X**] Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

NorthStar cleans out the OWS and manifests the waste for disposal.

MATERIAL SAFETY DATA SHEET
VWA® Vehicle Washing Agent

ENZYMES INCORPORATED
1099 Brown St. Unit #102
Wauconda, IL 60084 USA

V: (877) 436-9462
F: (847) 487-5403
http://ups.Enzymes-Inc.com

Enzymes, Inc. (EI) urges each customer or recipient of this MSDS to study it carefully to become aware of and understand the hazards associated with the product. The reader should consider consulting reference works or individuals that are experts in ventilation, toxicology, and fire prevention,as necessary or appropriate to use and understand this MSDS.

To promote safe handling, each customer or recipient should: (1) notify its employees, agents, contractors and others whom it knows or believes will use this material or the information in this MSDS and any other information regarding hazards or safety: (2) furnish this same information to each of its customers for the product: and (3) request its customers to notify their employees, customers, and other users of the product of this information.

SECTION 1 - PRODUCT & COMPANY IDENTIFICATION

Trade Name:	VWA® Vehicle Washing Agent
Revision Date:	02/24/2009
CAS Name:	Mixed Enzyme Cleaning Agent
Product Description:	Concentrated non-bacterial, 100% readily biodegradable enzymatic cleaning solution.
Manufacturer's Name:	Enzymes Incorporated
Address:	1099 Brown Street #102 Wauconda, IL 60084-3105 USA
Phone:	(877) 436-9462

SECTION 2 - COMPOSITION & INFORMATION ON INGREDIENTS

NAME	CAS#	WT.	% TLV

VWA® is a proprietary formula and considered NON-HAZARDOUS under OSHA Hazard Communication Standard 29 CFR-1910.1200

SECTION 3 - PHYSICAL & CHEMICAL PROPERTIES

Vapor Pressure:	As water @ 68°F (20°C)	**Boiling Point:**	> 212°F (100°C)
Vapor Density (air = 1):	0.62	**Flash Point:**	> 212°F (100°C)
Specific Gravity:	1.01 – 1.02 @ 68°F (20°C)	**Freezing Point:**	< 2°F (-17°C)
Solubility in Water:	Miscible	**Viscosity:**	1.0 cps @ 68°F (20°C)
Volatile Organic Content:	None	**Evaporation Rate:**	<0.01 *N-butyl acetate = 1
Appearance:	Translucent amber liquid	**Weight:**	8.47 – 8.51 lb./ gallon
pH:	6.3 - 7.2 Neat @ 68°F (20°C)	**Odor:**	Mild non-offensive

SECTION 4 - FIRE FIGHTING MEASURES

Flash point:	> 212°F (100° C)	**Explosion Characteristics**:	N/A
Method Used:	Open Cup	**Flammable Properties:**	Non-Flammable
Flammable Limits:	Does Not Apply	**NFPA Rating:**	Health = 1
Suitable Fire Extinguishing Media:	Water, Foam or Halon		Flammability = 0
Hazardous Combustion Products:	None known		Reactivity = 0

SECTION 5 - STABILITY & REACTIVITY

Hazardous Polymerization:	Hazardous polymerization will not occur.
Materials to Avoid:	Any contact with strong oxidizing and reducing agents.
Conditions to Avoid:	See Section 11.
Hazardous Decomposition Products:	None known.

SECTION 6 - HAZARDS IDENTIFICATION & FIRST AID MEASURES

HMIS® III HAZARD RATINGS

HEALTH – 1 FIRE – 0 PHYSICAL HAZARD – 0 PPE – A

Routes of Entry: Product may enter the body via eye and skin contact, and ingestion.

POTENTIAL HEALTH EFFECTS:

Eye: Eye contact may cause irritation. Avoid eye contact.

Skin: Prolonged skin contact may cause irritation. Avoid skin contact.

Ingestion: Swallowing product may cause irritation of mouth and throat. It may also cause nausea. Do not taste or swallow product.

Inhalation: If aerosol of neat product is inhaled seek medical attention if allergic response is exhibited.

FIRST AID MEASURES

Eye Contact: Check for and remove contact lenses if present and immediately flush eyes with a directed stream of water for at least 15 minutes while forcibly holding eyelids open to ensure complete irrigation of all eye and eyelid tissue. Do not rub eyes while rinsing.

Skin Contact: Flush skin with water while gently rubbing the affected area. If clothing is penetrated remove clothing and flush skin with water as described. Wash clothing before reuse.

Ingestion: Give 2 glasses of water. RInse mouth and throat thoroughly with water. Do not induce vomiting. If spontaneous vomiting is inevitable, prevent aspiration by keeping victim's head below the knees.

Inhalation: Remove to fresh air. Seek medical attention if allergic response is exhibited.

SECTION 7 - ACCIDENTAL RELEASE MEASURES

Any Spill: Contain spill. Use absorbent and sweep up material. Dispose in accordance with all applicable federal, state, and local health and environmental regulations. Rinse area with water.

SECTION 8 - TOXICOLOGICAL INFORMATION

Toxicity: Not applicable.

Pathogenicity: Not applicable.

Carcinogenicity: Not applicable.

SECTION 9 - ECOLOGICAL INFORMATION

This product is believed not to be dangerous to the environment with respect to mobility, persistency and degradability, bioaccumulative potential, aquatic toxicity and other data relating to ecotoxicity. Product is 100% readily biodegradable.

SECTION 10 - EXPOSURE CONTROLS & PERSONAL PROTECTION

Gloves: Gloves are recommended for prolonged and direct undiluted product exposure.

Safety Glasses: Use of safety glasses is recommended when handling undiluted product.

Inhalation: Do not atomize or form an aerosol. No respiratory protection is required for proper use.

SECTION 11 - STORAGE & HANDLING

Storage: Store product below 100°F (38°C) in a cool, dry, well ventilated area away from heat, sparks, flame, oxidizers, and out of direct sunlight. Do not allow product to freeze. For best results, use product within 12 months. Never combine with bactericides or quaternary disinfectants as these degrade / inactivate enzymes. Never mix or combine with other products.

General Precautions: Keep container closed and away from children and animals. Do not atomize or create an aerosol.

SECTION 12 - OTHER INFORMATION

Disclaimer: The information contained herein is based upon data available to us and reflects our best professional judgment. However, no warranty is expressed or implied regarding the accuracy of such information or the results obtained from the use thereof. EI assumes no legal responsibility whatsoever for any damage resulting from reliance upon this information since it is being furnished upon the condition that the person receiving it shall make his or her own determination of the suitability of the material described herein for a particular application or storage situation.

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

on A General Information

A.1 Company name, mailing address and telephone number:
Wilson Sporting Goods Company
4600 Roberts Matthews Hwy, Sparta TN
Zip: 38583 Telephone (931) 738-7500

A.2 Address of production or manufacturing facility
4600 Roberts Matthews Highway
Sparta TN
Zip: 38583 Telephone (931) 738-7500

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:
Lisa Braddom
Finance & Operations Mgr.

A.4 Alternate person to contact concerning information provided herein:
Name Dewayne Marcus Title Production Telephone (931) 738-7500

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)
Warehousing, decoration, sewing garments

***Note to Signing Official**: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.*

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the 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, including the possibility of fine and/or imprisonment.

12-6-22
Date

Lisa J. Braddom
Signature of Official
(Seal is applicable)

A.6 Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

Warehouse clothing
decorate clothing
Sewing garments
packing Shipping garments

A.7 Standard Industrial Classification Number(S) (SIC CODE) for your industry:

A.8 This facility generates the following types of wastes. Please provide gallons per day for all that apply.

			Average gallons per day		
a.	[✓]	Domestic Waste (restrooms, employee showers, etc.)	740	estimated	measured
b.	[ ]	Cooling water, non contact		estimated	measured
c.	[ ]	Boiler/tower blowdown		estimated	measured
d.	[ ]	Cooling water, contact		estimated	measured
e.	[ ]	Process		estimated	measured
f.	[ ]	Equipment/Facility washdown		estimated	measured
g.	[ ]	Air pollution control unit		estimated	measured
h.	[ ]	Storm water runoff to sanitary sewer		estimated	measured
i.	[ ]	Other, describe		estimated	measured
		Total A.8.a - A.8.i			

A.9 Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

			Average gallons per day		
a.	[✓]	Sanitary	740	estimated	measured
b.	[ ]	Storm Sewer		estimated	measured
c.	[ ]	Surface		estimated	measured
d.	[ ]	Ground water		estimated	measured
e.	[ ]	Waste haulers		estimated	measured
f.	[ ]	Evaporation		estimated	measured
g.	[ ]	Other, describe		estimated	measured
		Total A.9.a - A.9.g			

Provide name and address of waste hauler(s), if used,

A.10 Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?
yes [ ] no [✓]

Note: **If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete this Form. Sign and date the Form and return it to the POTW.**

SPARTA TN
INDUSTRIAL WASTEWATER SURVEY

APPENDIX D

RETURNED DENTAL SURVEYS

IN ALPHABETICAL ORDER

ONE-TIME COMPLIANCE REPORT FOR DENTAL DISCHARGERS
to Comply with 40 CFR 441.50
Effluent Limitations Guidelines and Standards for the Dental Office Category

Instructions:
The following form that contains the minimum information dental facilities must submit in a one-time compliance report as required by the Effluent Limitations Guidelines and Standards for the Dental Office Category ("Dental Amalgam Rule").

Your facility is required to submit a one-time compliance report unless (40 CFR 441.10 Applicability):

The facility exclusively practices:
Oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics, or prosthodontics.
The facility is a mobile unit operated by a dental discharger.
The facility does not discharge any amalgam process wastewater to the municipal sewer system.
The facility does not place dental amalgam, and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances.

Return this form to the local sewer or wastewater department by ~~October 12, 2020~~, or 90 days after transferring ownership, or within 90 days for dental offices that are new after ~~June 14, 2017~~

General Information

Name of Facility					
Boston, Smith and Driver General Dentistry					
Physical Address of Dental Facility					
124 S. Main St.					
City:	Sparta	State:	TN	Zip:	38583
Mailing Address					
124 S. Main St.					
City:	Sparta	State:	TN	Zip:	38583
Facility Contact					
Kevin Smith					
Phone:	931-836-2717	Email:	boston.smith@benlomand.net		
Names of Owner(s):	Kevin C. Smith				
Names of Operator(s) if different from Owner(s):					

Applicability: Please Select One of the Following

☑	This facility is a dental discharger subject to this rule (40 CFR Part 441) and it places or removes dental amalgam. *Complete sections A, B, C, D, and E*

☐	This facility is a dental discharger subject to this rule and (1) it does not place dental amalgam, and (2) it does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances. *Complete section E only*
(*Also, select if applicable*) Transfer of Ownership (§ 441.50(a)(4))	
☐	This facility is a dental discharger subject to this rule (40 CFR Part 441), and it has previously submitted a one-time compliance report. This facility is submitting a new One Time Compliance Report because of a transfer of ownership as required by § 441.50(a)(4).

Section A
Description of Facility

Total number of chairs:	7
Total number of chairs at which amalgam may be present in the resulting wastewater (i.e., chairs where amalgam may be placed or removed):	4
Description of any amalgam separator(s) or equivalent device(s) currently operated:	

YES	NO	
☑	☐	The facility discharged amalgam process wastewater prior to July 14th, 2017 under any ownership.

Section B
Description of Amalgam Separator or Equivalent Device

☑	The dental facility has installed one or more ISO 11143 (or ANSI/ADA 108-2009) compliant amalgam separators (or equivalent devices) that captures all amalgam containing waste at the following number of chairs at which amalgam placement or removal may occur:	*Chairs:* 7
☐	The dental facility installed prior to June 14, 2017 one or more existing amalgam separators that do not meet the requirements of § 441.30(a)(1)(i) and (ii) at the following number of chairs at which amalgam placement or removal may occur: I understand that such separators must be replaced with one or more amalgam separators (or equivalent devices) that meet the requirements of § 441.30(a)(1) or § 441.30(a)(2), after their useful life has ended, and no later than June 14, 2027, whichever is sooner.	*Chairs:*

Make	Model	Year of installation
Solmetex	NXT Hg 5-001 NXT 68421	2022
Solmetex	NXT Hg 5-001 NXT 67933	2022

☐	My facility operates an equivalent device.

Make	Model	Year of installation	Average removal efficiency of equivalent device, as determined per § 441.30(a)(2)i- iii.

Section C
Design, Operation and Maintenance of Amalgam Separator/Equivalent Device

☑	YES	I certify that the amalgam separator (or equivalent device) is designed and will be operated and maintained to meet the requirements in § 441.30 or § 441.40.	
A third-party service provider is under contract with this facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.			
☐	YES	Name of third-party service provider (e.g. Company Name) that maintains the amalgam separator or equivalent device (if applicable):	
☐	NO	If none, provide a description of the practices employed by the facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.	
Describe practices:			

Section D
Best Management Practices (BMP) Certifications

☑	The above named dental discharger is implementing the following BMPs as specified in § 441.30(b) or § 441.40 and will continue to do so.

	• Waste amalgam including, but not limited to, dental amalgam from chair-side traps, screens, vacuum pump filters, dental tools, cuspidors, or collection devices, must not be discharged to a publicly owned treatment works (e.g., municipal sewage system). • Dental unit water lines, chair-side traps, and vacuum lines that discharge amalgam process wastewater to a publicly owned treatment works (e.g., municipal sewage system) must not be cleaned with oxidizing or acidic cleaners, including but not limited to bleach, chlorine, iodine and peroxide that have a pH lower than 6 or greater than 8 (i.e. cleaners that may increase the dissolution of mercury).

Section E
Certification Statement

Per § 441.50(a)(2), the One-Time Compliance Report must be signed and certified by a responsible corporate officer, a general partner or proprietor if the dental facility is a partnership or sole proprietorship, or a duly authorized representative in accordance with the requirements of § 403.12(l).

"I am a responsible corporate officer, a general partner or proprietor (if the facility is a partnership or sole proprietorship), or a duly authorized representative in accordance with the requirements of § 403.12(l) of the above named dental facility, and 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 violations."

Authorized Representative Name *(print name)*:		Kevin C. Smith	
Phone:	931-836-2717	Email:	boston.smith@benlomand.net
Kevin C Smith		10-27-22	
Authorized Representative Signature		*Date*	

***Retention Period*; per § 441.50(a)(5)**

As long as a Dental facility subject to this part is in operation, or until ownership is transferred, the Dental facility or an agent or representative of the dental facility must maintain this One Time Compliance Report and make it available for inspection in either physical or electronic form.

ONE-TIME COMPLIANCE REPORT FOR DENTAL DISCHARGERS
to Comply with 40 CFR 441.50
Effluent Limitations Guidelines and Standards for the Dental Office Category

Instructions:
The following form that contains the minimum information dental facilities must submit in a one-time compliance report as required by the Effluent Limitations Guidelines and Standards for the Dental Office Category ("Dental Amalgam Rule").

Your facility is required to submit a one-time compliance report unless (40 CFR 441.10 Applicability):

The facility exclusively practices:

Oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics, or prosthodontics.

The facility is a mobile unit operated by a dental discharger.

The facility does not discharge any amalgam process wastewater to the municipal sewer system.

The facility does not place dental amalgam, and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances.

Return this form to the local sewer or wastewater department by ~~October 12, 2020~~, or 90 days after transferring ownership, or within 90 days for dental offices that are new after ~~June 14, 2017.~~

General Information

Name of Facility	Highlands Dental, LLC				
Physical Address of Dental Facility	114 Mayberry St				
City:	Sparta TN	State:	TN	Zip:	38583
Mailing Address	Same as above				
City:		State:		Zip:	
Facility Contact	Harlen D. Hobbs II DDS				
Phone:	931-836-2416	Email:	docholliday67@gmail.com		
Names of Owner(s):	Harlen D. Hobbs II DDS				
Names of Operator(s) if different from Owner(s):					

Applicability: Please Select One of the Following

X	This facility is a dental discharger subject to this rule (40 CFR Part 441) and it places or removes dental amalgam. *Complete sections A, B, C, D, and E*

☐	This facility is a dental discharger subject to this rule and (1) it does not place dental amalgam, and (2) it does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances. *Complete section E only*

(*Also, select if applicable*) Transfer of Ownership (§ 441.50(a)(4))

☐	This facility is a dental discharger subject to this rule (40 CFR Part 441), and it has previously submitted a one-time compliance report. This facility is submitting a new One Time Compliance Report because of a transfer of ownership as required by § 441.50(a)(4).

Section A
Description of Facility

Total number of chairs:	3
Total number of chairs at which amalgam may be present in the resulting wastewater (i.e., chairs where amalgam may be placed or removed):	1
Description of any amalgam separator(s) or equivalent device(s) currently operated:	
DD2009 was used in 2019 until Solmetex Hg5 was installed in April (approx) 2020 and this is the system that has been used since	

YES	NO	
☐	☒	The facility discharged amalgam process wastewater prior to July 14th, 2017 under any ownership.

Section B
Description of Amalgam Separator or Equivalent Device

☒	The dental facility has installed one or more ISO 11143 (or ANSI/ADA 108-2009) compliant amalgam separators (or equivalent devices) that captures all amalgam containing waste at the following number of chairs at which amalgam placement or removal may occur:	*Chairs:* 1
☐	The dental facility installed prior to June 14, 2017 one or more existing amalgam separators that do not meet the requirements of § 441.30(a)(1)(i) and (ii) at the following number of chairs at which amalgam placement or removal may occur: I understand that such separators must be replaced with one or more amalgam separators (or equivalent devices) that meet the requirements of § 441.30(a)(1) or § 441.30(a)(2), after their useful life has ended, and no later than June 14, 2027, whichever is sooner.	*Chairs:*

Make	Model	Year of installation
	DD2009	2019
Solmetex	Hg5	2020

☐	My facility operates an equivalent device.

Make	Model	Year of installation	Average removal efficiency of equivalent device, as determined per § 441.30(a)(2)i- iii.

Section C
Design, Operation and Maintenance of Amalgam Separator/Equivalent Device

☒	YES	I certify that the amalgam separator (or equivalent device) is designed and will be operated and maintained to meet the requirements in § 441.30 or § 441.40.	
A third-party service provider is under contract with this facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.			
☐	YES	Name of third-party service provider (e.g. Company Name) that maintains the amalgam separator or equivalent device (if applicable):	
☐	NO	If none, provide a description of the practices employed by the facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.	
Describe practices:			

Section D
Best Management Practices (BMP) Certifications

☒	The above named dental discharger is implementing the following BMPs as specified in § 441.30(b) or § 441.40 and will continue to do so.

	• Waste amalgam including, but not limited to, dental amalgam from chair-side traps, screens, vacuum pump filters, dental tools, cuspidors, or collection devices, must not be discharged to a publicly owned treatment works (e.g., municipal sewage system). • Dental unit water lines, chair-side traps, and vacuum lines that discharge amalgam process wastewater to a publicly owned treatment works (e.g., municipal sewage system) must not be cleaned with oxidizing or acidic cleaners, including but not limited to bleach, chlorine, iodine and peroxide that have a pH lower than 6 or greater than 8 (i.e. cleaners that may increase the dissolution of mercury).

Section E
Certification Statement

Per § 441.50(a)(2), the One-Time Compliance Report must be signed and certified by a responsible corporate officer, a general partner or proprietor if the dental facility is a partnership or sole proprietorship, or a duly authorized representative in accordance with the requirements of § 403.12(l).			
"I am a responsible corporate officer, a general partner or proprietor (if the facility is a partnership or sole proprietorship), or a duly authorized representative in accordance with the requirements of § 403.12(l) of the above named dental facility, and 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 violations."			
Authorized Representative Name *(print name)*:		Harlen D. Hobbs II	
Phone:	931-836-2416	Email:	dochilliday67@gmail.com
Harlen D. Hobbs II		6-17-2020 (originally signed) 11-9-2022 revd and resigned	
Authorized Representative Signature		*Date*	

***Retention Period*; per § 441.50(a)(5)**

As long as a Dental facility subject to this part is in operation, or until ownership is transferred, the Dental facility or an agent or representative of the dental facility must maintain this One Time Compliance Report and make it available for inspection in either physical or electronic form.

ONE-TIME COMPLIANCE REPORT FOR DENTAL DISCHARGERS
to Comply with 40 CFR 441.50
Effluent Limitations Guidelines and Standards for the Dental Office Category

Instructions:
The following form that contains the minimum information dental facilities must submit in a one-time compliance report as required by the Effluent Limitations Guidelines and Standards for the Dental Office Category ("Dental Amalgam Rule").

Your facility is required to submit a one-time compliance report unless (40 CFR 441.10 Applicability):

The facility exclusively practices:

Oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics, or prosthodontics.

The facility is a mobile unit operated by a dental discharger.

The facility does not discharge any amalgam process wastewater to the municipal sewer system.

The facility does not place dental amalgam, and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances.

Return this form to the local sewer or wastewater department by ~~October 12, 2020~~ July 15, 2022, or 90 days after transferring ownership, or within 90 days for dental offices that are new after June 14, 2017.

General Information

Name of Facility	Rockin Smiles Dental, PLLC				
Physical Address of Dental Facility	154 E. Bockman Way				
City:	Sparta	State:	TN	Zip:	38583
Mailing Address	Same as above				
City:		State:		Zip:	
Facility Contact	Michelle Graves				
Phone:	931-488-8544	Email:	rockinsmilesdental@gmail.com		
Names of Owner(s):	Morris Graves				
Names of Operator(s) if different from Owner(s):					

Applicability: Please Select One of the Following

☐	This facility is a dental discharger subject to this rule (40 CFR Part 441) and it places or removes dental amalgam. *Complete sections A, B, C, D, and E*

☐	This facility is a dental discharger subject to this rule and (1) it does not place dental amalgam, and (2) it does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances. *Complete section E only*
(*Also, select if applicable*) Transfer of Ownership (§ 441.50(a)(4))	
☐	This facility is a dental discharger subject to this rule (40 CFR Part 441), and it has previously submitted a one-time compliance report. This facility is submitting a new One Time Compliance Report because of a transfer of ownership as required by § 441.50(a)(4).

Section A
Description of Facility

Total number of chairs:	6	
Total number of chairs at which amalgam may be present in the resulting wastewater (i.e., chairs where amalgam may be placed or removed):	~~0~~ 6	
Description of any amalgam separator(s) or equivalent device(s) currently operated:		
YES ☐	NO ☑	The facility discharged amalgam process wastewater prior to July 14th, 2017 under any ownership.

Section B
Description of Amalgam Separator or Equivalent Device

☑	The dental facility has installed one or more ISO 11143 (or ANSI/ADA 108-2009) compliant amalgam separators (or equivalent devices) that captures all amalgam containing waste at the following number of chairs at which amalgam placement or removal may occur:	*Chairs:* 6
☐	The dental facility installed prior to June 14, 2017 one or more existing amalgam separators that do not meet the requirements of § 441.30(a)(1)(i) and (ii) at the following number of chairs at which amalgam placement or removal may occur: I understand that such separators must be replaced with one or more amalgam separators (or equivalent devices) that meet the requirements of § 441.30(a)(1) or § 441.30(a)(2), after their useful life has ended, and no later than June 14, 2027, whichever is sooner.	*Chairs:*

Make	Model	Year of installation
Air techniques	Acadia Plus Amalgam Separator A1630	2022

☐ My facility operates an equivalent device.

Make	Model	Year of installation	Average removal efficiency of equivalent device, as determined per § 441.30(a)(2)i- iii.

Section C

Design, Operation and Maintenance of Amalgam Separator/Equivalent Device

☑	YES	I certify that the amalgam separator (or equivalent device) is designed and will be operated and maintained to meet the requirements in § 441.30 or § 441.40.	
A third-party service provider is under contract with this facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.			
☑	YES	Name of third-party service provider (e.g. Company Name) that maintains the amalgam separator or equivalent device (if applicable):	Benco dental
☐	NO	If none, provide a description of the practices employed by the facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.	
Describe practices:			

Section D

Best Management Practices (BMP) Certifications

☑	The above named dental discharger is implementing the following BMPs as specified in § 441.30(b) or § 441.40 and will continue to do so.

	• Waste amalgam including, but not limited to, dental amalgam from chair-side traps, screens, vacuum pump filters, dental tools, cuspidors, or collection devices, must not be discharged to a publicly owned treatment works (e.g., municipal sewage system). • Dental unit water lines, chair-side traps, and vacuum lines that discharge amalgam process wastewater to a publicly owned treatment works (e.g., municipal sewage system) must not be cleaned with oxidizing or acidic cleaners, including but not limited to bleach, chlorine, iodine and peroxide that have a pH lower than 6 or greater than 8 (i.e. cleaners that may increase the dissolution of mercury).

Section E

Certification Statement

Per § 441.50(a)(2), the One-Time Compliance Report must be signed and certified by a responsible corporate officer, a general partner or proprietor if the dental facility is a partnership or sole proprietorship, or a duly authorized representative in accordance with the requirements of § 403.12(l).

"I am a responsible corporate officer, a general partner or proprietor (if the facility is a partnership or sole proprietorship), or a duly authorized representative in accordance with the requirements of § 403.12(l) of the above named dental facility, and 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 violations."

Authorized Representative Name *(print name)*:		Michelle Graves Office Manager	
Phone:	931-488-8544	Email:	rockinsmilesdental@gmail.com
		July 18, 2021	
Authorized Representative Signature		*Date*	

 – Dr. Morris R Graves DMD

***Retention Period*; per § 441.50(a)(5)**

As long as a Dental facility subject to this part is in operation, or until ownership is transferred, the Dental facility or an agent or representative of the dental facility must maintain this One Time Compliance Report and make it available for inspection in either physical or electronic form.

738-3290 Fred Conner 739-2281
1099 McMinnville Hwy 545 E. Box
Cell Box

ONE-TIME COMPLIANCE REPORT FOR DENTAL DISCHARGERS
to Comply with 40 CFR 441.50
Effluent Limitations Guidelines and Standards for the Dental Office Category

Instructions:
The following form that contains the minimum information dental facilities must submit in a one-time compliance report as required by the Effluent Limitations Guidelines and Standards for the Dental Office Category ("Dental Amalgam Rule").

Your facility is required to submit a one-time compliance report unless (40 CFR 441.10 Applicability):

The facility exclusively practices:
Oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics, or prosthodontics.
The facility is a mobile unit operated by a dental discharger.
The facility does not discharge any amalgam process wastewater to the municipal sewer system.
The facility does not place dental amalgam, and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances.

Return this form to the local sewer or wastewater department by ~~October 12, 2020~~ Sept 26, 2022, or 90 days after transferring ownership, or within 90 days for dental offices that are new after June 14, 2017.

General Information

Name of Facility					
SPRING ST. DENTAL CARE					
Physical Address of Dental Facility					
223 N. SPRING ST					
City:	SPARTA	State:	TN	Zip:	38583
Mailing Address					
223 N. SPRING ST					
City:	SPARTA	State:	TN	Zip:	38583
Facility Contact					
JEREMY ROBINSON / ADAM GRIMM					
Phone:	(931) 260-2114 / (832) 474-8059	Email:	SPRING.STREETDENTALCARE@GMAIL.COM		
Names of Owner(s):	JEREMY ROBINSON / ADAM GRIMM				
Names of Operator(s) if different from Owner(s):					

Applicability: Please Select One of the Following

☑	This facility is a dental discharger subject to this rule (40 CFR Part 441) and it places or removes dental amalgam. *Complete sections A, B, C, D, and E*

☐	This facility is a dental discharger subject to this rule and (1) it does not place dental amalgam, and (2) it does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances. *Complete section E only*
(*Also, select if applicable*) Transfer of Ownership (§ 441.50(a)(4))	
☐	This facility is a dental discharger subject to this rule (40 CFR Part 441), and it has previously submitted a one-time compliance report. This facility is submitting a new One Time Compliance Report because of a transfer of ownership as required by § 441.50(a)(4).

Section A
Description of Facility

Total number of chairs:	4
Total number of chairs at which amalgam may be present in the resulting wastewater (i.e., chairs where amalgam may be placed or removed):	4
Description of any amalgam separator(s) or equivalent device(s) currently operated:	

YES	NO	
☑	☐	The facility discharged amalgam process wastewater prior to July 14th, 2017 under any ownership.

Section B
Description of Amalgam Separator or Equivalent Device

☑	The dental facility has installed one or more ISO 11143 (or ANSI/ADA 108-2009) compliant amalgam separators (or equivalent devices) that captures all amalgam containing waste at the following number of chairs at which amalgam placement or removal may occur:	*Chairs:* 4
☐	The dental facility installed prior to June 14, 2017 one or more existing amalgam separators that do not meet the requirements of § 441.30(a)(1)(i) and (ii) at the following number of chairs at which amalgam placement or removal may occur: I understand that such separators must be replaced with one or more amalgam separators (or equivalent devices) that meet the requirements of § 441.30(a)(1) or § 441.30(a)(2), after their useful life has ended, and no later than June 14, 2027, whichever is sooner.	*Chairs:* 4

Make	Model	Year of installation
SOLMETEX	NXT Hg 5	2021

☐	My facility operates an equivalent device.

Make	Model	Year of installation	Average removal efficiency of equivalent device, as determined per § 441.30(a)(2)i- iii.

Section C

Design, Operation and Maintenance of Amalgam Separator/Equivalent Device

☑	YES	I certify that the amalgam separator (or equivalent device) is designed and will be operated and maintained to meet the requirements in § 441.30 or § 441.40.	
A third-party service provider is under contract with this facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.			
☑	YES	Name of third-party service provider (e.g. Company Name) that maintains the amalgam separator or equivalent device (if applicable):	SOLMETEX
☐	NO	If none, provide a description of the practices employed by the facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.	
Describe practices:			

Section D

Best Management Practices (BMP) Certifications

☑	The above named dental discharger is implementing the following BMPs as specified in § 441.30(b) or § 441.40 and will continue to do so.

	• Waste amalgam including, but not limited to, dental amalgam from chair-side traps, screens, vacuum pump filters, dental tools, cuspidors, or collection devices, must not be discharged to a publicly owned treatment works (e.g., municipal sewage system). • Dental unit water lines, chair-side traps, and vacuum lines that discharge amalgam process wastewater to a publicly owned treatment works (e.g., municipal sewage system) must not be cleaned with oxidizing or acidic cleaners, including but not limited to bleach, chlorine, iodine and peroxide that have a pH lower than 6 or greater than 8 (i.e. cleaners that may increase the dissolution of mercury).

Section E
Certification Statement

Per § 441.50(a)(2), the One-Time Compliance Report must be signed and certified by a responsible corporate officer, a general partner or proprietor if the dental facility is a partnership or sole proprietorship, or a duly authorized representative in accordance with the requirements of § 403.12(l).

"I am a responsible corporate officer, a general partner or proprietor (if the facility is a partnership or sole proprietorship), or a duly authorized representative in accordance with the requirements of § 403.12(l) of the above named dental facility, and 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 violations."

Authorized Representative Name *(print name)*:		JEREMY ROBINSON / ADAM GRIMM	
Phone:	(931) 836-8182	Email:	SPRINGSTREETDENTALCARE@GMAIL.COM
Authorized Representative Signature		*Date*	9/22/22

***Retention Period*; per § 441.50(a)(5)**

As long as a Dental facility subject to this part is in operation, or until ownership is transferred, the Dental facility or an agent or representative of the dental facility must maintain this One Time Compliance Report and make it available for inspection in either physical or electronic form.

ONE-TIME COMPLIANCE REPORT FOR DENTAL DISCHARGERS
to Comply with 40 CFR 441.50
Effluent Limitations Guidelines and Standards for the Dental Office Category

Instructions:
The following form that contains the minimum information dental facilities must submit in a one-time compliance report as required by the Effluent Limitations Guidelines and Standards for the Dental Office Category ("Dental Amalgam Rule").

Your facility is required to submit a one-time compliance report unless (40 CFR 441.10 Applicability):

The facility exclusively practices:

Oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics, or prosthodontics.

The facility is a mobile unit operated by a dental discharger.

The facility does not discharge any amalgam process wastewater to the municipal sewer system.

The facility does not place dental amalgam, and does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances.

Return this form to the local sewer or wastewater department by ~~October 12, 2020~~, or 90 days after transferring ownership, or within 90 days for dental offices that are new after ~~June 14, 2017~~

General Information

Name of Facility					
Waymon T. Haston DDS					
Physical Address of Dental Facility					
9 Hampton Drive					
City:	Sparta	State:	TN	Zip:	38583
Mailing Address					
9 Hampton Drive					
City:	Sparta	State:	TN	Zip:	38583
Facility Contact					
Waymon Haston					
Phone:	931 836 2157	Email:	drhaston@benlomand.net		
Names of Owner(s):	Waymon T Haston				
Names of Operator(s) if different from Owner(s):					

Applicability: Please Select One of the Following

☒	This facility is a dental discharger subject to this rule (40 CFR Part 441) and it places or removes dental amalgam. *Complete sections A, B, C, D, and E*

☐	This facility is a dental discharger subject to this rule and (1) it does not place dental amalgam, and (2) it does not remove amalgam except in limited emergency or unplanned, unanticipated circumstances. *Complete section E only*

(*Also, select if applicable*) Transfer of Ownership (§ 441.50(a)(4))

☐	This facility is a dental discharger subject to this rule (40 CFR Part 441), and it has previously submitted a one-time compliance report. This facility is submitting a new One Time Compliance Report because of a transfer of ownership as required by § 441.50(a)(4).

Section A
Description of Facility

Total number of chairs:	6
Total number of chairs at which amalgam may be present in the resulting wastewater (i.e., chairs where amalgam may be placed or removed):	4
Description of any amalgam separator(s) or equivalent device(s) currently operated:	
Solmetex NXT Hg 5	

YES	NO	
☒	☐	The facility discharged amalgam process wastewater prior to July 14th, 2017 under any ownership.

Section B
Description of Amalgam Separator or Equivalent Device

☒	The dental facility has installed one or more ISO 11143 (or ANSI/ADA 108-2009) compliant amalgam separators (or equivalent devices) that captures all amalgam containing waste at the following number of chairs at which amalgam placement or removal may occur:	*Chairs:* 6
☐	The dental facility installed prior to June 14, 2017 one or more existing amalgam separators that do not meet the requirements of § 441.30(a)(1)(i) and (ii) at the following number of chairs at which amalgam placement or removal may occur: I understand that such separators must be replaced with one or more amalgam separators (or equivalent devices) that meet the requirements of § 441.30(a)(1) or § 441.30(a)(2), after their useful life has ended, and no later than June 14, 2027, whichever is sooner.	*Chairs:*

Make	Model	Year of installation

☐	My facility operates an equivalent device.

Make	Model	Year of installation	Average removal efficiency of equivalent device, as determined per § 441.30(a)(2)i- iii.

Section C

Design, Operation and Maintenance of Amalgam Separator/Equivalent Device

☐	YES	I certify that the amalgam separator (or equivalent device) is designed and will be operated and maintained to meet the requirements in § 441.30 or § 441.40.	
A third-party service provider is under contract with this facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.			
☒	YES	Name of third-party service provider (e.g. Company Name) that maintains the amalgam separator or equivalent device (if applicable):	PATTERSON DENTAL
☐	NO	If none, provide a description of the practices employed by the facility to ensure proper operation and maintenance in accordance with § 441.30 or § 441.40.	
Describe practices:			

Section D

Best Management Practices (BMP) Certifications

☒	The above named dental discharger is implementing the following BMPs as specified in § 441.30(b) or § 441.40 and will continue to do so.

	• Waste amalgam including, but not limited to, dental amalgam from chair-side traps, screens, vacuum pump filters, dental tools, cuspidors, or collection devices, must not be discharged to a publicly owned treatment works (e.g., municipal sewage system). • Dental unit water lines, chair-side traps, and vacuum lines that discharge amalgam process wastewater to a publicly owned treatment works (e.g., municipal sewage system) must not be cleaned with oxidizing or acidic cleaners, including but not limited to bleach, chlorine, iodine and peroxide that have a pH lower than 6 or greater than 8 (i.e. cleaners that may increase the dissolution of mercury).

Section E
Certification Statement

Per § 441.50(a)(2), the One-Time Compliance Report must be signed and certified by a responsible corporate officer, a general partner or proprietor if the dental facility is a partnership or sole proprietorship, or a duly authorized representative in accordance with the requirements of § 403.12(l).

"I am a responsible corporate officer, a general partner or proprietor (if the facility is a partnership or sole proprietorship), or a duly authorized representative in accordance with the requirements of § 403.12(l) of the above named dental facility, and 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 violations."

Authorized Representative Name *(print name)*:		Waymon Haston	
Phone:	931 836 2157	Email:	DRHASTON@BENLOMAND.NET
Authorized Representative Signature		*Date*	11-7-2022

***Retention Period*; per § 441.50(a)(5)**

As long as a Dental facility subject to this part is in operation, or until ownership is transferred, the Dental facility or an agent or representative of the dental facility must maintain this One Time Compliance Report and make it available for inspection in either physical or electronic form.