

**TOWN OF CARY
UTILITIES DEPARTMENT**

INDUSTRIAL WASTEWATER SURVEY- SHORT FORM

This form has been sent to your business to determine types and sources of wastewater that are entering the Town of Cary's wastewater treatment facilities. This form must be completed in accordance with section 36-175 of the Town of Cary Sewer Use Ordinance. The Sewer Use Ordinance can be examined during normal business at the Town of Cary Utilities Department office or by visiting <http://www.townofcary.org> and searching "SUO". Chapter 36 pertains to Utilities. If you have any question or concerns while completing the form please contact the Town's Pretreatment Division at (919) 319-4564.

Business Name _____

Street Address _____

Mailing Address _____

City/State/Zip Code _____

Telephone: _____ E-mail: _____

Number of Employees: _____ The business above is the (circle one) Owner Tenant

If tenant, please provide contact information for landlord and provide a copy of this form to your landlord.

Property Owner/Manager _____

Contact Person _____

Address _____

City/State/Zip Code _____

Telephone: _____ E-mail: _____

What Standard Industrial Classification (SIC) Code(s) do you report under?

_____, _____, _____

What North American Industry Classification System number(s) do you report under?

_____, _____, _____

Briefly describe your on-site business operation(s) including products produced/manufactured or services performed. _____

List of raw materials and additives used. _____

List any per- and/or polyfluoroalkyl substances (PFAS) that may be present at your facility:

Write "None" if no PFAS are present. See <https://www.epa.gov/pfas> for additional information.

Survey continued on reverse side

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Does your building have a cooling tower? Yes No

Do you use any compounds on- site that may contain 1,4- Dioxane? Yes No

Do you operate any laboratory under Biosafety Level (BSL) 1, 2, 3, or 4 on-site? Yes No

If yes, please indicate the level and include a copy of inactivation step(s).

Please list all water uses and **approximate** volumes used in gallons per day for each use, including facility wash down water.

Water Use	Volume Used (gallons per day)	Measured (M) or Estimated (E) Volume	Indicate where discharged? (ex: Sanitary sewer, stormwater, contracted disposal, etc.)
Process: (ie. any operation that generates non-domestic wastewater or water that is placed into a product.) can include: <ul style="list-style-type: none"> • Water into product => • Facility/product wash down => • Equipment wash down => • Other: _____ => 			
Process Volume Total: =>			
Domestic: can include: <ul style="list-style-type: none"> • Bathrooms => • Kitchenettes/Cafeteria => (if no actual measurement available for domestic volume use, estimate 25 gallons per day per employee)			
Domestic Volume Total: =>			
Total Water Use:(add above columns) =>			

The Town of Cary Sewer Use Ordinance requires that an Authorized Representative of the User sign all reports to the Sewer Authority. Authorized Representative is defined as a Person responsible for Principle Business decisions or other policy decisions for the facility.

To the Best of my knowledge the information on this form is true and accurate,

Name (Print): _____

Signature: _____ Date: _____

Title _____

Return this form within 30 days to:

Town of Cary - Attn. Pretreatment Division, P.O. Box 8005, Cary, NC 27512-8005

Failure to return this form is enforceable in accordance with the Town of Cary Sewer Use Ordinance.