

Industry: _____

SADSBURY TOWNSHIP

Industrial Wastewater Discharge Questionnaire

SECTION A – GENERAL INFORMATION

1. Company Name: _____

2. Mailing Address: _____

_____ Zip Code: _____

3. Plant Location (if different from mailing address): _____

_____ Zip Code: _____

4. Name and Title of Plant Contact Person: _____

_____ Phone No: _____

5. Name and Title of Alternate Contact Person: _____

_____ Phone No: _____

6. Standard Industrial Classification (SIC) Code(s): _____

7. Do you have an NPDES Permit? yes No If yes, Permit No. _____
(Please provide a copy of your permit with this questionnaire)

8. Is discharge proposed or existing? Proposed Existing

If proposed, anticipated date of discharge commencement: _____

9. Number of Employees: _____ Number of Shifts: _____

Shift hours: 1st. _____ 2nd. _____ 3rd. _____

Employees/Shift 1st. _____ 2nd. _____ 3rd. _____

Number of Days/Week plant will be in operation: _____