



Town of Holly Springs 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 Holly Springs' Wastewater Treatment Facility. This form must be completed in accordance with the Town's Sewer Use Ordinance. The Sewer Use Ordinance can be examined on the Town's website at www.hollyspringsnc.us

Facility Name: _____

Facility Address: _____

Facility Telephone Number: _____ Facility Fax: _____

Type of Industry, Manufacture, Trade, or Business: _____

Products Produced: _____

Number of Employees: _____

General Description of the industrial activities and/or plant processes at this site: _____

Current Federal Standard Industrial Classification Code (S.I.C): _____ (if applicable)

Does the facility discharge any water from parts washing operations, contact cooling, oil/water separators, or any other type of wastewater other than from restrooms? If so, describe: _____

"Industrial Waste" means liquid or other wastes resulting from any processes of industry, manufacturing, trade, or business, or from the development of any natural resources. "Other Waste" means decayed wood, sawdust, shavings, bark, limes, garbage, refuse, ashes, offal's, tar, oil, chemicals, and all other substances, except industrial waste and sewage, which may cause pollution in any waters.

1. Does this facility discharge industrial waste or other waste to the sanitary sewer? YES NO
2. Is the discharge from industrial waste or other waste continuous or batch? _____
3. Does this facility use any type of chemical mixed with water that is discharged to the sanitary sewer?
YES NO If yes, please list: _____
4. What is the total discharge (domestic, industrial and other) to the sanitary sewer (gallons per day)? _____
5. What is the total industrial or other waste discharge to the sanitary sewer (gallons per day)? _____
6. What is the average daily water usage (gallons per day)? _____
7. Are any chemicals stored in quantities of 55 gallons or more? YES NO
8. Does this facility use any well water or other water source other than the Town's potable water supply? YES NO
9. Are any outside drains connected to the sanitary sewer? YES NO
10. Does your facility discharge storm water to the sanitary water? YES NO

Our Sewer Use Ordinance requires that an Authorized Representative of the User sign all reports to the Town. Authorized Representative is defined as "a person responsible for the 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.

Signature _____ Date _____ Print name _____ Job Title _____

For more information or any questions, please contact the Public Utilities Department at (919)577-2273

Return this form to: Public Utilities Department
P.O. Box 8 Holly Springs, NC 27540
Phone: (919) 577-2273 Fax: (919) 577-2280
Elizabeth.wilcox@hollyspringsnc.us