

Waste Water Questionnaire

Name: Phone: Date:
Address: Postal / Zip: Company:
State / Province: City: E-mail:

1. Waste Water Flow

Average Flow: lph gph
Peak Flow: lph gph
Hours/Days of Operation:
Total Daily Waste Water:

2. Waste Water Description

a. Industry:
b. Origin of Flow: i.e., source of waste water such as plant effluent
(Total Suspended Solids) Normal

c. TSS: Maximum: % ppm
Size Range: mm Microns
Specific Gravity:

Temperature, Normal

d. Temperature: Maximum: Deg. F Deg. C
e. Ph, Normal:

f. BOD, Normal: Maximum: ppm

g. COD, Normal: Maximum: ppm

h. Hydrocarbon Type: Volume:

i. Fat, Grease, Oil Content: Maximum: ppm

3. Discharge Objectives

Hydrocarbons: ppm

TSS: ppm

COD: ppm

4: Project Schedule

1 month 3 months 6 months 1 year Future Budget

Other Comments: