

SHORT FORM SURVEY – AUTO DEALERSHIPS

Company Name: _____ Telephone Number: (____) _____

Mailing Address: _____ Facility Address: _____

Does this business have a connection to the sewer system? Yes No

(If "No", Get Authorized Signature on the back, Stop Here, and Return Form in Envelope Provided)

Name of environmental contact person: _____

(Person empowered by authorized representative to represent the Company, or responsible for the proper completion of this survey form.)

Section A: Operation Description

Does this facility have floor drains in the work area? Yes No

Average number of vehicles serviced per day: _____ Days/Hours of Operation: _____

Type of vehicle services at this facility: (check all that apply)

Oil Changes Engine Repair Car Washing Brake Repair Auto Detailing Body Work/Painting
 Tire Repair Large Vehicles Transmission Repair Radiator Service Other _____

Major equipment used at this facility: (check all that apply)

Vehicle Lifts Solvent Cabinet Mobile Drain Rigs Parts Washers Paint Cabinet
 Paint Booth Oil Drum Rack Used Oil Rag Bins Refrigerant Equipment
 Other _____

Fixtures in automotive work areas: (check all that apply) **Circle any that drain to the oil/water separator.**

Floor Drain Mop Sink Hand Sink Trench Drain Other _____

Section B: Water Use

Do you wash vehicles? Yes No If yes, where? Inside Outside Covered Uncovered

Is wash or rinse water recycled? Yes No If yes, how is it treated before reuse? _____

Waste water from this facility goes to the following: (check all that apply)

Sanitary Sewer Storm Sewer Ground (drain fields, dry well) Open Waters Waste Hauler
 Evaporation Other means of disposal: _____

Does water from this facility undergo any treatment prior to discharge into sanitary sewer?

Oil/water separator: Yes No Type _____

If yes, who pumps it? _____ How often is it pumped? _____

Sand trap/settling tank Yes No Type _____

Filtration: Yes No Type _____

pH adjustment: Yes No Type _____

Other: Yes No Type _____

Section C: Sanding Dust Control (Heavy Metals in sanding dust can contaminate storm and wastewater.)

Sanding is done: Inside Outside With vacuum dust control Without vacuum

Is a settling unit used to separate wet sanding dust from water prior to disposal? Yes No

Do personnel wear protective clothing that does not leave the shop? Yes No

Where is it laundered? _____ How often is floor swept in sanding area? _____

Is mop water treated to remove sanding dust prior to disposal? Yes No

Section D: Used Material Storage and Disposal

	Spent Antifreeze	Used Motor Oil	Used Transmission Fluid	Used Brake Fluid	Used Brake Cleaner	Parts Washer
How much is generated in an average month?						
What type/size containers is it stored in?						
What other fluids are mixed in the same containers?						
Is it stored with secondary containment for leaks or spills?						
If the material leaves your shop, where does it go?						
How often is it pumped/picked up/hailed away?						

How does your facility dispose of used/removed parts? _____
 Does the facility generate dangerous waste as defined in WAC 173-303-090? Yes, WAD# _____ No
 What type of Brake Cleaner do you use? chlorinated non-chlorinated

Section D: Certification

I have personally examined and am familiar with the information submitted in this document and attachments. Based on 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 understand the responsibility to immediately contact City of Spokane Wastewater Management if any significant changes in any processes are anticipated and that failure to immediately contact the City of Spokane Wastewater Management could result in fines and/or imprisonment. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

_____ Printed name of Authorized Representative*

_____ Signature

_____ Date

_____ Job Title*

_____ Telephone Number

*Surveys must be signed as follows: Corporations - By a principle executive officer of at least the level of Vice-President. Partnership - By a general partner. Sole Proprietorship - By the Proprietor. (Ref: CFR part 403.12(1)). Branch or franchise – Manager with decision making functions.

Disclosure: Title 40 of the Code of Federal Regulations Part 403 Section 403.14 requires information provided in this questionnaire identifying the nature and frequency of discharge to 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 and applicable State Law. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.

Do you have any questions or comments?

For further information, contact the Riverside Park Water Reclamation Facility at (509) 625-4683.

City of Spokane Wastewater Management-Pretreatment 4401 N. A.L. White Parkway, 99205-3939