



Industrial Pre-Treatment Survey
For all Industrial and Commercial Businesses

This survey is a screening tool to determine if additional Town requirements are needed and to add local commercial and industrial businesses to the Town's Industrial Pre-Treatment database.

Facility Name: _____

Facility Location: _____

Mailing Address: _____

Facility Owner: _____

Name	Title	Phone Number
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Facility Contact: _____

Name	Title	Phone Number
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Email Address: _____

Contractor Contact: _____

Name	E-Mail	Phone Number
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1. Provide a brief description of new project (Example: New Building, Remodeling, ect).



2. Provide a brief description of operations at this facility including primary products and services (Example: Retail, garage, medical, ect).

3. Please answer the following questions to determine if other pre-treatment applications may be required to be completed for your project or facility. ****ALL QUESTIONS MUST BE ANSWERED****

Yes No

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Industrial Pretreatment Survey Form

Is this facility an office or retail store?

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Will this facility discharge only domestic¹ wastewater or sewage that is typically only found in a residential home?

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Will there be any changes to the existing plumbing? If yes, describe the change.

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Is this facility under new ownership or lease agreement?

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Has this facility stopped operation or been closed for a period of 12 months or longer?

¹ Domestic Wastewater is wastewater generated only from typical bathroom and breakroom facilities, such as toilets, breakroom sinks, hand sinks and showers.



Yes No

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Food Service

Is this a food service or food processing facility (EX: restaurant, coffee shop, fast food, ect) or has **ANY** of the following: Bar, bistro, bakery, butcher shop, cannery, ect?

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Does this facility have a commercial kitchen?

Yes No

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Vehicle/Equipment

Does this facility service or clean any vehicles or equipment (EX: engines, parts, vales)?

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Does this facility do any **materials** or **metal** fabrication (EX: grinding, polishing, cutting, welding, forging, tumbling, ect)?

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Are there any floor drains in the shop area?

Yes No

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Medical

Does this facility provide medical services?

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Does this facility provide dental services?

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Does this facility operate a laboratory?

Yes No

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Recreational Vehicle Dump Station

Does this facility provide a Recreational Vehicle Dumping Station?

Yes No

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Other Industrial Discharge

Does this facility discharge or produce any processed industrial or commercial wastewater other than the types listed above? If yes, explain what waste is being discharged.

Yes No

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Material Use

Will this facility use, store, or generate any flammable, toxic, corrosive, or hazardous material?



Town of Wareham Water Pollution Control Facility
6 Tony's Lane Wareham, MA 02571
PHONE: (508) 295-6144 FAX: (508) 291-0155

Certification Statement

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. *By submitting this survey, I certify I am the Owner/Officer/Manager of the property or that I have the authority so submit on behalf of the owner.*

Printed Name and Title:_____

Signature:_____ **Date:**_____