



CITY OF
Crystal Lake
ILLINOIS

City of Crystal Lake Wastewater Discharge Regulations and Questionnaire

To All Sewer Users:

Pursuant to the Clean Water Act (P. L. 95-217) as amended, and the requirements in 40 CFR 403 (General Pretreatment Regulations for Existing and New Sources of Pollution), the City of Crystal Lake has a federally-approved pretreatment program. The objectives of this program are to:

- Prevent the introduction of pollutants into Publicly-Owned Treatment Works (POTW) that will interfere with treatment operations and the use or disposal of municipal sludge.
- Prevent the introduction of pollutants to the POTW that will pass through the treatment works or be incompatible.
- Improve the feasibility of recycling and reclaiming municipal and industrial wastewater and sludges.
- Enforce applicable federal, state and local categorical pretreatment standards.

The pretreatment and local sewer discharge regulations can be found in the City of Crystal Lake's Sewer Use Ordinance (No. 7586). This Ordinance may be viewed or obtained through the City of Crystal Lake website, www.crystallake.org. All current and future dischargers are regulated by the Sewer Use Ordinance. A Wastewater Discharge Questionnaire has been enclosed with this notice. Additional Questionnaires may be downloaded from the City's website. After reviewing the completed Questionnaire, the City will determine if a Wastewater Discharge Permit is required. The City of Crystal Lake Wastewater Department will notify you in writing if a permit will be required. Unless this Questionnaire is a part of your **Building Permit Application** package, please complete and return the questionnaire to:

City of Crystal Lake
100 W. Woodstock Street
Crystal Lake, IL 60014
Attn: Michael Wisinski
Public Works Analyst
Environmental & Safety Program Coordinator
Email: mwisinski@crystallake.org

If this Questionnaire is part of your Building Permit Application package, please return this form with your application to the City of Crystal Lake Building Department.

Should you have any questions or require any assistance, please contact the Public Works Analyst – Environmental & Safety Coordinator at (815) 459-2020, extension 4033.

Sincerely,

Michael Wisinski
Public Works Analyst
Environmental & Safety Program Coordinator

City of Crystal Lake
Wastewater Discharge Questionnaire
Form A

This questionnaire is to be completed for all **non-domestic** sources proposed for discharge into the City of Crystal Lake's wastewater treatment system. The results of this questionnaire will determine the suitability of the proposed discharge, applicable regulations and pretreatment requirements necessary to meet the city's "Use of Public Sewers Ordinance". Please respond to each question to the best of your ability. If you have any questions, please contact the Public Works Analyst –Environmental & Safety Program Coordinator at (815) 459-2020, ext. 4033.

1. Address of proposed discharge: _____

2. Name of Property Owner: _____

3. Address (if different from above) and phone number of property owner: _____

4. Name of Business owner, if different from above:

5. Name of Business being (to be) operated at this address:

6. Phone number of business at this address, (if available): _____

7. Name of responsible Official for Business at this address:

8. Address and phone number of Responsible Official (if different from above):

9. What is the primary SIC code for this business? _____

10. Is this a new or existing facility? _____

11. Describe the nature of the business (office, manufacture, etc.): _____

12. If this is a dry facility (no discharge other than sanitary wastewater) please complete the following certification:

"I hereby certify that the above referenced discharge is of a "dry" nature, that there are no process wastes discharged or the potential for the discharge of wastes other than sanitary wastes does not exist."

Signed: _____ Date: _____

Print Name: _____ Title: _____

**Note: If this certification can be completed skip items #13 through #24.
If discharge is not strictly sanitary wastewater complete items #13 through #24.**

To be completed for discharge other than sanitary wastewater.

13. Describe, in detail, any source of non-sanitary wastewater discharges (cooling tower blowdown, food preparation wastes, manufacturing process wastes, etc.):

14. List any environmental permits presently held (air emissions, RCRA hazardous waste permits, etc.): _____

15. Describe any Federal Categorical Pretreatment Standards that this business is required to meet, if known: _____

16. List any pollutants known or expected to be in discharge: _____

17. List raw materials: _____

18. List flow volumes anticipated to be generated from the following categories:

Process wastewater flow volume: _____

Sanitary wastewater flow volume: _____

Non-contact cooling water discharge volume: _____

Other discharge volume: _____

19. Describe proposed (or present) pretreatment equipment or techniques, if any:

20. Provide process wastes discharge analysis, if available: _____

21. Provide expected waste characterization: _____

22. Please provide the Name and Address of your Environmental Consultant Engineers, if applicable: _____

23. List any special or unusual items associated with this discharge: _____

“I certify that to the best of my knowledge, the above information is complete, accurate and true.”

Signed: _____ Date: _____

Printed Name: _____ Title: _____