

Illicit Discharge Self Inspection of Commercial Business

Inspection Date _____ Location Address _____

Name of Business _____ Type of Business _____

Owner/Manager's Name _____

Mailing Address _____

Phone _____

Interior Premise Checklist: (check applicable categories)

Wastewater Service: ___Unknown ___Sanitary Sewer ___On-Site Sewage System.

If on-site system, where is it located? _____

Floor Drain/Laundry Area: ___Yes ___No

If yes, give details _____

Where do floor drains/laundry drain to? ___Sanitary Sewer ___On-site sewage system
___Storm Sewer ___Unknown

Utility/Mop Sink(s): ___Yes ___No

If yes, state number of sinks ____. Location _____

Sinks drain to: ___Sanitary ___Floor Drains ___Storm Sewer ___Unknown

Explain in detail what they are used for: _____

Chemical Storage/Waste Oil: ___Yes ___No

If yes, what chemicals are stored? _____

How are chemicals stored? _____

Chemical/Hazardous Waste generation: ___Yes ___No

If yes, explain storage and disposal practices in detail _____

Grease Trap/Oil Separator: ___Yes ___No ___Unknown

If yes, give details _____

How often is it pumped? _____

Pumped by whom? _____

Equipment Wash/Rinse Area: ___Yes ___No

If yes, explain practices in detail _____

Where does wastewater from this area drain to? _____

Description of operations, products and by-products at the facility: _____

Dishwasher/Garbage Grinder: ____Yes ____No
If yes, where do they drain to? _____

Exterior Premise Inspection:

Parking lot drains: ____Yes ____No
If yes, where do they drain to? _____

What other purposes are they used for? _____

Dumpsters on Premises: ____Yes ____No
If yes, what are they used for? _____

Name of disposal company providing dumpster? _____

Fueling Areas: ____Yes ____No
If yes, are there drains in area? ____Yes ____No
If yes, where do they drain to? _____

Pipes found in ditch? ____Yes ____No
If yes, where are they located? _____

Pipes found in storm sewer? ____Yes ____No
If yes, describe type, size, flow and observations _____

Name and title of person conducting self-inspection _____