Industrial Pretreatment Division
Wastewater Survey for Multi-Tenant Property Managers

Return the completed questionnaire by:

Remit the completed and signed questionnaire via mail to:

South Platte Water Renewal Partners
Industrial Pretreatment Division
2900 South Platte River Drive
Englewood, Colorado 80110

For questions regarding this survey, please contact the Industrial Pretreatment Division at 303-762-2600.

1.0 Contact Information (Please Print or Type)

Business Name:

__________________________________________________________________

Mailing Address:

__________________________________________________________________

Office Use Only:

_____Follow-up

_____NFA
City: ____________________________________________________ Zip: ____________________

____________________

Telephone: ________________________________

Address of facility discharging wastewater (if different from mailing address):

Address: ________________________________________________________________

City: __________________________ Zip: __________

Telephone: ________________________________

Person(s) to be contacted regarding this survey:

Name: ________________________________ Name: ________________________________

Title: ________________________________ Title: ________________________________

Telephone: ________________________________ Telephone: ________________________________

Email: ________________________________ Email: ________________________________

2.0 Facility Operations and Wastewater Information

Check all activities that may be present at the discharging facility address:

- Assembly
- Auto Services
- Food Processing/Service
- Manufacturing
- Material Transfer/Distribution
- Office (not medical)
- Medical Services
- Retail
- Vehicle/Equipment Wash
- Warehousing
- Other (specify): ________________________________

3.0 Tenant Information

Provide a comprehensive list of tenants located at the discharging facility address in the table below, you may attach a separate sheet. Be sure to include each tenant’s unit number and business name. If a unit is vacant, list “vacant” as the business name.

<table>
<thead>
<tr>
<th>Unit Number</th>
<th>Business Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Wastewater Survey for Multi-Tenant Property Managers Revised October 22, 2013
NOTE TO SIGNING OFFICIAL: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, effluent data provided in this questionnaire shall be available to the public without restriction. Any other information provided may be claimed as confidential by the submitter. Such claim must be asserted at the time of submission by stamping the words "Confidential Business Information" on, or similarly identifying the information claimed as confidential. Requests for confidential treatment of information shall be governed by procedures specified in 40 CFR Part 2.

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon 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 am aware that there are significant penalties for submitting false information:

Name: __________________________________________ Title: _________________________
(Please Print)
Signature: _______________________________ Date: _______________________________