



City of Mebane Industrial Waste Survey Short Form

This form has been sent to your business to determine types and sources of wastewater that are entering the City of Mebane WWTP. This form must be completed in accordance with Section 5.7 of Mebane's Sewer Use Ordinance. If you have any question or concerns while completing the form please contact Amy Varinoski, Compliance Manager, 919-304-9217.

Name of Business _____

Address _____

City/State/Zip Code _____

Telephone: _____ Fax: _____

Number of Employees _____

What Standard Industrial Classification (SIC) Code(s) do you report under:

_____ , _____ , _____ , _____ .

Briefly describe your business include any products manufactured or services performed

Please list all water uses and **approximate** volume used in gallons per day for each use, including facility washdown water. If you are NOT connected to City of Mebane sewer please state that below.

Water Use	Volume Used (gallons per day)
Process:	
Facility Washdown	
Domestic(bathrooms, cafeteria)	
Total:	

Our Sewer Use Ordinance requires that an Authorized Representative of the User sign all reports to the Sewer Authority. Authorized Representative is defined as a Person responsible for Principle Business decisions or other policy decisions for the facility.

To the Best of my knowledge the information on this form is true and accurate,

Name _____ Title _____

Signature _____ Date _____

Return this form within two (2) weeks to:

avarinoski@cityofmebane.com (via email) OR Amy Varinoski

City of Mebane Wastewater Treatment Plant
106 E. Washington Street
Mebane, NC 27302

Failure to return this form is enforceable in accordance with the Sewer Use Ordinance.