



Commercial and Industrial Sewer Utility User Survey

The City of Middleton is required by the Idaho Department of Environmental Quality to periodically survey non-residential utility customers connected to our sanitary sewer system. Your cooperation in completing this survey is vital to our efforts at protecting our environment and providing cost effective sewer services to our community. (IDAPA 58.01.25)

Please complete and return this form to the City of Middleton at the address below:

[City of Middleton](#)
[P.O. Box 487 Middleton, ID 83644](#)
Utilities@MiddletonCity.com

The form must be signed by an individual authorized to act on behalf of the business. Please attach additional pages if necessary to provide a complete response.

Business Name: _____

Type of Business: _____

Physical Address: _____ **Mailing Address:** _____

Number of Individuals Employed at this location: _____

Telephone Number: _____ **Email:** _____

Utility Account Number (If known): _____

Owner Name: _____ **Owner Telephone:** _____

Manager / Operator Name: _____

Manager / Operator Telephone: _____

Manager / Operator email: _____



1. Does your business discharge any water other than domestic wastewater to the sanitary sewer? (Domestic waste would be toilets, sinks for handwashing, and non-commercial food preparation.)

Yes No

2. Will your facility have a commercial kitchen or other business activity that could discharges any Fats, Oils and Greases into the sanitary sewer? If YES, a grease interceptor will be required.

Yes No

3. Does your business produce or manufacture any products?

Yes No If Yes, please list products: _____

4. Will the discharge from your facility be more than 25,000 gallons per day?

No. Discharge will be less than 25,000 gallons per day

Yes. Discharges may exceed 25,000 gallons per day

5. Does your business provide any treatment of wastewater prior to discharging to the sanitary sewer?

Yes No If Yes, please list treatment Processes: _____

6. Describe any raw materials used and how they are processed:

7. List all connection points to the sanitary or storm sewers other than toilets and hand washing sinks:

8. Identify any other materials that could be discharged into the sewer or storm sewer system:

"I have personally examined and am familiar with the information submitted in this document. 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, including the possibility of fine and/or imprisonment."

Print Name: _____

Signature: _____ **Date:** _____

In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information provided in this questionnaire will be available to the public without restriction. Requests for confidential treatment of other information shall be made according to the procedures specified in 40 CFR 2. (See IDAPA 58.01.25.002)