

Pre-Site Visit Questionnaire

Instructions: Print-out, complete, and FAX to the

Office of Pollution Prevention (OPP) at (614) 644-2807.

This questionnaire is used to register your company for the site visit and to provide the Office of Pollution Prevention (OPP) general background information for technical assistance. No confidential business information or proprietary information is requested. If you have any questions or need assistance, please feel free to contact OPP at (614) 644-3469.

COMPANY OVERVIEW:

Company name: _____

Company address: _____

Company contact for the P2 site visit: _____

Phone #: _____ FAX#: _____

Primary SIC Code: _____ Other SIC Codes: _____

Number of shifts: _____ Start / Stop times: _____

Approx. number of plant floor employees per shift: 1st _____ 2nd _____ 3rd _____

Number of total employees: _____ Square footage of facility: _____

Visitor safety equipment requirements:

AVAILABLE INFORMATION:

Please indicate (X) which information is available:

- _____ Facility / equipment layouts
- _____ Process flow diagrams
- _____ Material balances
- _____ Raw material costs
- _____ Statistical Process Control data
- _____ Waste treatment costs
- _____ Waste disposal volumes and costs
- _____ Hazardous waste manifests
- _____ Annual Hazardous Waste Report
- _____ Air permits

- _____ Wastewater permits
- _____ Annual TRI Report
- _____ Material Safety Data Sheets (MSDSs)
- _____ Organizational charts



PRODUCTS AND PROCESS INFORMATION:

Briefly list your company's products and/or services:

Please indicate (X) manufacturing processes conducted at this facility:

- | | | | |
|-----------------|-------------------|-----------------|-----------------------|
| _____ Anodizing | _____ Coating | _____ Etching | _____ Electroplating |
| _____ Brazing | _____ Machining | _____ Welding | _____ Heat treating |
| _____ Milling | _____ Grinding | _____ Stamping | _____ Polishing |
| _____ Cleaning | _____ Degreasing | _____ Extruding | _____ Painting |
| _____ Molding | _____ Blending | _____ Printing | _____ Paint stripping |
| _____ Reacting | _____ Formulating | | |

Other (specify)

Does the facility generate any of the following waste streams:

- Wastewater effluent? yes_____ no_____
- Air emissions including stack and fugitive? yes_____ no_____
- Non-hazardous solid wastes? yes_____ no_____
- Hazardous wastes? yes_____ no_____
- RCRA generator status: LQG _____ SQG _____ CESQG _____

Please provide a brief description of your main waste streams

Please list major raw materials used: _____

Do you have a waste segregation policy? yes_____ no_____ not sure _____

Are off-specification materials generated due to materials exceeding its shelf life? yes___ no___
Do you use a first-in first-out raw material usage policy? yes_____ no_____

Do you accept samples from chemical suppliers? yes_____ no_____
If yes, do you have a policy to control and dispose of unused samples? yes___ no___

Are raw materials in containers completely used before opening a new container? yes_____ no_____
Are empty containers returned to the supplier? yes_____ no_____
Do you use bulk containers to reduce the number of empty containers? yes_____ no_____

MAINTENANCE

Do you have an effective preventative maintenance program? yes_____ no_____

Does your facility generate waste due to leaks and spills? yes_____ no_____

How soon are leaks repaired after they are discovered? _____

Are spill and leak prevention methods established in a formal program? yes_____ no_____

WASTE COSTS

Is each department of the facility responsible for the cost of the waste they generate? yes_____ no_____

