

RUBIDOUX COMMUNITY SERVICES DISTRICT

Pretreatment Program
3590 Rubidoux Blvd.
P.O. Box 3098
Rubidoux, CA 92519
Tel: (951) 684 - 7580
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WASTEWATER DISCHARGE SURVEY - RESTAURANTS

SECTION A:

1. Company Name: _____ Date: _____
2. Site Address: _____ Telephone: _____
City, State: _____ Zip: _____
3. Mailing Address: _____
City, State: _____ Zip: _____
4. Responsible Party: _____ Telephone: _____
5. Contact: _____ Telephone: _____
6. Emergency Contact: _____ Telephone: _____

SECTION B:

1. Work days per week: (circle days) M T W Th F Sat Sun
Operating Hours (i.e. 8am - 5pm): _____ Number of Days of Operation per year: _____ Employees: _____
2. Attach a menu or indicate foods prepared on site and method of preparation.

SECTION C:

1. Maximum Seating Capacity: _____ Maximum Meals Served @ Peak Hour: _____
2. Percent of Single Service (i.e. disposable plates, utensils, etc.): _____%

3. a. **Number of sinks, and floor drains excluding restroom sinks and drains:**
 Floor drains ____ Floor sinks ____ Mop Sinks ____ Hand sinks ____
 Three-compartment sinks ____ Two-compartment sinks ____ One-compartment sinks ____

All floor sinks and floor drains must have a mesh screen or other suitable insert with a maximum opening of 3/8".

- b. Garbage Grinders [] NO [] YES QTY ____
 c. Hot Grills [] NO [] YES QTY ____
 d. Automatic Dishwasher [] NO [] YES QTY ____
 e. Deep Fryers [] NO [] YES QTY ____
 f. Broilers [] NO [] YES QTY ____
 g. Rotisseries [] NO [] YES QTY ____
 h. Grease Recycling Bin [] NO [] YES QTY ____
 i. Oil/Grease Interceptor [] NO [] YES QTY ____

If yes, provide size (gal): _____

and location: _____

- j. Grease Disposal Method: _____
 k. Grease Recycling Company: _____
 l. Grease Disposal Company: _____

- | | | |
|--|-----|-----|
| 4. Chemical usage: | YES | NO |
| Are any chemicals or enzymes (other than soap) used in the washing of dishes? | [] | [] |
| Are any chemicals poured down the drains to keep them clean? | [] | [] |
| Are any chemicals, enzymes, bacteria, or emulsifiers added to the interceptor? | [] | [] |

If yes to any of the questions in 4 above, please attach a copy of the MSDS sheets for the specific product. MSDS sheets can be obtained from the chemical supplier.

5. Soft Water System:
- a. Do you have an ion exchange resin tank service: YES [] No []

If yes, provide vendor's name and address: _____

The installation of water softeners that discharge to the District's collection system is illegal for use in commercial businesses in Rubidoux Community Service District's service area unless the apparatus is a self-generating water softener, and the brine solution is segregated from the fresh water rinses for disposal to a legal brine disposal site.

6. Meat Cutting Facilities:
- a. Pounds of meat cut per day: _____
- b. Equipment cleaning procedure: _____
- _____
- c. Method of (meat scrap) disposal: _____
- _____

SECTION D:

Certification Statement:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name

Signature

Title

Date