



Guidance for Completing Oregon DEQ Pretreatment Annual Report Forms

July 22, 2025



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Table of contents

Instructions.....	4
Form 1: Cover Sheet.....	4
Form 2: Program Status and Updates.....	4
Form 3: Treatment Plant Monitoring.....	5
Form 4: Headworks Loading Comparison	6
Form 5: Treatment Plant Upsets/Problems	6
Form 6: List of Regulated Users.....	7
Form 6A: Industrial Survey Update	7
Form 7: Compliance/Oversight Summary (SIUs Only)	7
Form 8: Noncompliance/Enforcement Summary (SIUs only).....	8
Form 9: Resource Summary	8
Form 10: Pretreatment Program Evaluation	9
Form 11: Sewage Treatment Plant Profile(s)	9
Form 12: Pretreatment Program Profile(s)	10
Form 13: Pretreatment Data Summary Sheet	10
Form 14: Hauled Waste Annual Report.....	10
Form 1 – Cover Sheet.....	11
Form 2: Program Status and Updates.....	12
Form 3: Treatment Plant Monitoring.....	15
Form 4: Headworks Loading Comparison	16
Form 5: Treatment Plant Upsets/Problem.....	22
Form 6: List of Regulated Users.....	24
Form 6A: Industrial Survey Update	28
Form 7: Compliance/Oversight Summary (SIUs)	30
Form 8: Noncompliance/Enforcement Summary (SIUs).....	32
Form 9: Resource Summary	35
Form 10: Pretreatment Program Evaluation.....	36
Form 11: Sewage Treatment Plant Profiles.....	47
Form 12: Pretreatment Program Profiles.....	49
Form 13: Pretreatment Summary	54
Form 14: Hauled Waste Annual Report.....	56

Instructions

This guidance is for Control Authorities with Approved Pretreatment Programs regulated under the Oregon Department of Environmental Quality per 40 CFR Part 403

All pretreatment delegated municipalities in Oregon must submit a completed Pretreatment Annual Report via Your DEQ Online, pursuant to NPDES/WPCF permit Schedule E and 40 CFR 403.12(i).

Pages 12 through 54 contain fillable forms.

Form 1: Cover sheet

- Submit a separate Form 1 for each Wastewater Treatment Plant under your Approved Pretreatment Program.
- For “NPDES/WPCF/WPCF Permit Number(s)” include DEQ’s NPDES/WPCF Permit Number(s) and the U.S. Environmental Protection Agency’s “OR” Reference Number(s) found on the cover page of the NPDES/WPCF Permit(s); include Population Served by each wastewater treatment plant.
- Pretreatment program contact information.
- Certification statement and Publicly Owned Treatment Works’ Authorized Signatory.

Form 2: Program status and updates

List all pretreatment program materials (i.e., sewer use ordinances, local limits, implementation procedures, forms, etc.) that fall into the following categories:

- Approval date of original pretreatment program and date incorporated into NPDES/WPCF permit.
- Materials that are currently being revised or developed by the POTW. Include status of the revisions and the general reason for the proposed changes. In particular, any materials that have been returned by DEQ with comments, and any responses required in Pretreatment Compliance Inspections or audits, must be addressed in this section. Also, include an approximate date that the materials will be submitted to DEQ for review and approval.
- Materials that have been submitted to DEQ for review and approval. Please indicate the date that these materials were sent to DEQ. Item 4. Materials that were approved by DEQ.
- Materials DEQ approved:
 - Identify the most recent program modifications made since original pretreatment program approval for each program element (Municipal Code/SUO, IGA, Local Limits, ERP, Pretreatment Implementation Procedures, Industrial User Survey, and Funding and Resources).
 - Approval date.
 - If incorporated into the permit, Dates the modifications were incorporated into your NPDES/WPCF permit.
- Insert the date that program was last audited by DEQ.
- Provide in table form the list of pollutants for which local limits are currently established, as well as the dates of most recent technical evaluation for local limits, and the date of most recent adoption of technically based local limits.
- List any other noteworthy pretreatment activities or accomplishments for the calendar year.

Form 3: Treatment plant monitoring

The POTW must include all treatment plant influent, effluent and sludge toxics and non-conventional pollutants monitoring data collected during the calendar year (please do not include Discharge Monitoring Report, or DMR, data for conventional pollutants). This will include, at a minimum, the six days of monitoring required by most NPDES/WPCF permits that contain pretreatment conditions. There will be two submissions for Form 3 – the Electronic Data Delivery report spreadsheet, note the addition new required sheet below, and combined lab reports.

Electronic data delivery instructions (DEQ-approved Excel spreadsheet)

- All data must be provided in [Electronic Data Delivery format](#). Averages or selected representative results are not sufficient.
- A separate EDD must be submitted per wastewater treatment plant, aggregate data in one EDD is not acceptable.
- Do not add, remove, split, merge, or otherwise change the columns in the DEQ approved EDD Spreadsheet.
- Where the POTW has monitored more frequently than required by its permit, the additional data must also be provided.
- The POTW must ensure that its laboratory or its contract laboratory uses detection levels or minimum recovery levels that are adequate to evaluate for pass through.
- The POTW must ensure that it meets minimum toxic pollutant monitoring requirements of its NPDES/WPCF permit.
- DEQ recommends the POTW schedule toxic pollutant monitoring events to ensure enough time to resample in the event any required samples are invalidated for any reason.
- Include any additional sampling results pertaining to treatment plant removal efficiencies, domestic/background loadings, or in-stream pollutant levels.

Additional required information (new sheet in DEQ-approved Excel spreadsheet)

- Add a new sheet to **end** of EDD workbook, ensure “Results” remains the sixth sheet.
- Include treatment plant flow (influent and effluent) at the time of sampling.
- Include treatment plant removal rates for either each day of sampling, or for each consecutive-day sampling event. (Average removal efficiencies for the year are not acceptable.)
- Explain if there are any changes in the method of disposal of wastewater or sludge (e.g., change from land application to landfill).
- Provide a statement that all data were gathered and analyzed using approved test methods (40 CFR Part 136 for wastewater and 40 CFR Part 503 for biosolids).
- Include a discussion of all data anomalies including cause and actions taken to prevent recurrence.

Lab reports

Please include all lab reports as one combined PDF.

Form 4: Headworks loading comparison

- Compare the POTW's maximum allowable headworks loading (MAHL, lb/day), as determined by the approved local limits submission, to the highest single day treatment plant influent loading determined for the calendar year.
- Comparison should be performed for each pollutant for which local limits have been developed.
- The results can be presented in a table (preferable) or as part of the narrative described below.
- If this comparison reveals that the actual loading is 90% or more of the allowable loading, a detailed narrative discussing the reasons for this must be included.
- In addition to the numerical comparison, a brief narrative must be provided to describe any problems encountered in the application of the approved local limits, any additional pollutants of concern that may have been observed in either industrial effluent or POTW influent, and any plans to revise or augment existing limits.

All MAHL exceedances must be evaluated for pass through, and results documented in Form 4. Use the following format:

- Compare the exceedance with the water quality MAHL. If the water quality MAHL was not exceeded, pass through did not occur.
- If the water quality MAHL was exceeded, compare the corresponding effluent concentration with the appropriate water quality standard. If the water quality standard was not exceeded at the "end of pipe," pass through did not occur.
 - If the water quality standard was exceeded at the "end of pipe," use a mass balance calculation, effluent concentration, and flow, receiving stream ambient concentration, receiving stream flow at edge of mixing zone, and appropriate dilution, to evaluate for pass through.

Form 5: Treatment plant upsets/problems

Identify whether there have been any incidences of interference, pass through, fire or explosions (including flash point violations), corrosive structural damage (including pH<5.0), flow obstructions, excessive flow or pollutant concentrations, excess heat, interference due to oil or grease, toxic fumes, or illicit dumping of hauled waste during the reporting period.

Additionally, identify all treatment plant upsets that occurred as the direct or indirect result of a non-domestic discharge. In particular, the POTW must identify discharges that resulted in "pass through" or "interference," as defined in the POTW's ordinance. If the cause of the upset is unknown, the incident should still be listed. For each incident the POTW must identify the following:

- Date and time (where possible) of the incident.
- Description of the effect(s) on the POTW's operation.
- Effects on the POTW's effluent and sludge quality (including permit violations).

- Steps taken to identify the source of the discharge.
 - Identity of each discharger responsible for the incident.

Form 6: List of regulated users

The list of regulated users must include the following information:

- At a minimum, the list must include all Significant Industrial Users (SIUs) that discharge process wastewater to the POTW and all users subject to categorical pretreatment standards (discharging or non-discharging) that are in any way connected to the POTW.
- Any new users appearing on this list should be marked as “New” in the status column.
- Any user deleted from this list should be marked as “Deleted” in the status column.
- Whether the user is an SIU (as defined by the POTW, per 40 CFR Part 403.3 (v))
- Zero discharge categorical industrial users are considered SIUs.
- Whether the user is subject to categorical standards, (if yes include the CFR part number applicable to the user). Only industries that have specific numerical categorical pretreatment standards and discharge process wastewater should be identified as CIUs.
- NDCIUs NOT subject to zero discharge standards should also be clearly identified as such in a separate column.
- Note Non-Significant CIU status, if applicable.
- Note Middle Tier CIU status, if applicable.
- Include the Standard Industrial Classification (SIC) code or the North American Industry Classification System code.
- Whether a permit has been issued to the user.

Form 6A: Industrial survey update

List new non-domestic users, identified during the calendar year associated with this reporting period, which **may potentially have a discharge to the POTW**. If there are no such new users, indicate so on this form. This form is self-explanatory.

Form 7: Compliance/oversight summary (SIUs only)

This form is intended to summarize the compliance activities of the POTW and the industrial user for all SIUs.

- The first two items, SIU name and permit expiration date, are self-explanatory.
- “Number of Inspections” should reflect only complete facility inspections that are documented in the POTW’s files.
 - If the number of inspections is less than one, add an asterisk and add a corresponding asterisk under the table explaining why no inspections were completed in the calendar year. (e.g. *new industry, discharge began December 31, 2025, no inspection completed in the 2025 calendar year)
- “POTW Sampling” shall reflect the number of times the POTW monitored the industry for all regulated pollutants.

- If the number of sample events is less than one, add an asterisk and add a corresponding asterisk under the table explaining why no inspections were completed in the calendar year. (e.g. *new industry, discharge began December 31, 2025, no sampling completed in the 2025 calendar year).
- “SIU Self-Monitoring” shall reflect the number of times the user monitored for all regulated pollutants. Where continuous monitoring is performed by a user (e.g., for pH), the information should not be included in the total but may be footnoted if appropriate.
- “Significant Noncompliance” (SNC) should be reported, for each calendar quarter, using the “A, B, C, or D” coding format noted on the bottom of this form. Please refer to the EPA memo “Application and Use of the Regulatory Definition of SNC for Industrial Users” (EPA 1991) for further information regarding the application of SNC. If the POTW tracks SNC on a more frequent basis (e.g., monthly) it may report this in a similar format.

Form 8: Noncompliance/enforcement summary (SIUs only)

This form is intended to summarize the violations of pretreatment standards and requirements for all Significant Industrial Users and the POTW’s response to each violation. If there were no violations identified for a user during the calendar year, the user need not be listed here. The format shown on the DEQ form is simply a suggestion. If the following information is provided, the format is left up to the POTW:

- Name of industrial user, SIUs only.
- Nature of violation. This must include procedural violations (e.g., late reports, failure to notify, etc.) as well as limits violations.
- Analyte (if applicable).
- Date of violation.
- POTW response (enforcement action).
- Date of POTW response.
 - Date of return to compliance. Include the POTW's definition of "return to compliance."

Form 9: Resource summary

This form is intended to summarize the resources dedicated to the pretreatment program for the reporting year and planned for the upcoming year. Use estimates where necessary

Form 10: Pretreatment program evaluation

This form is intended to provide an overview of the POTW's performance during the past year. Do not break this form up by wastewater treatment plant, this is an overall program summary form.

- Items 1-3 are self-explanatory.
- Item 4: Include as SIUs only (a) categorical, (b) non-categorical SIUs, (c) non-discharging categorical users that are subject to zero discharge categorical limits (a.k.a. Zero Discharge Categorical Industrial Users)– and that have not been designated as NSCIUs under your local ordinance, and (d) “Middle Tier” CIUs.

Note regarding Zero Discharge Categorical Industrial Users: Zero Discharge Categorical Industrial Users remain both CIUs and SIUs unless they have been designated as NSCIUs. Until or unless you adopt and apply the NSCIU provisions for these categorical IUs they are to be counted as SIUs. (Please do not include them in total number CIUs to avoid over-counting.)

The total number of SIUs should be equal to the total of the combined subcategories of SIU, noted above.

If the Control Authority has not adopted streamlining provisions for NSCIU or MDCIU, please indicate “N/A” in the space provided.

Other Industrial Users should be included as separate items as indicated on the form. A pretreatment-delegated Municipality is billed by the Department for the pretreatment program portion of its annual NPDES/WPCF permit compliance determination fee based on the number of SIUs that were permitted or identified during any portion of the calendar year covered by the Pretreatment Annual Report. For billing purposes, the Department uses the summary information in Form 10, Item 4, to determine the number of SIUs for each Municipality.

- Items 5-19 are self-explanatory.
- Item 20: Describe QA/QC employed. For example: splits, blanks, duplicates, etc.
- Items 21-28 are self-explanatory.
- Item 29: List only those actions that were taken for purposes of enforcement. Do not include phone calls and letters that were for informational purposes.
- Items 30-34 are self-explanatory.
- Item 35: This question is intended to determine which IUs have been given a compliance schedule to meet new or revised pretreatment standards. For example, under certain circumstances, a user may be given up to 3 years to meet a newly developed categorical pretreatment standard.
- Items 36-41 are self-explanatory.

Form 11: Sewage treatment plant profile(s)

This form provides sewage treatment plant profile and technical information for each sewage treatment plant that is operated under an NPDES/WPCF permit. The items are self-explanatory.

Form 12: Pretreatment program profile(s)

This form provides pretreatment program profile information for each Department approved program. The items are self-explanatory

Form 13: Pretreatment data summary sheet

Please complete a separate Form 13 for each wastewater treatment plant under your Approved Pretreatment Program. This may require breaking up items from Form 10 into their respective wastewater treatment plants if you have more than one wastewater treatment plant.

This form summarizes the data elements required by EPA from the questions within the previous annual report forms. The form identifies the relevant form number and question number and provides an electronic link to the relevant question for ease in completing each data element. For each question, please provide the appropriate answer in the space provided (yes, no, number, date). This form is required, intended to enhance efficiency for DEQ and state pretreatment programs in uploading and reporting the required EPA data elements.

Form 14: Hauled waste annual report

Only complete this form if you accept Hauled Waste at the publicly owned wastewater treatment plant. Submit separate forms for each wastewater treatment plant which accepts Hauled Waste, if applicable.

Form 1 – Cover Sheet

Control Authority

Treatment Plant Name:	
Address	
City	
Zip Code	

	Numbers	Expiration Date
EPA ID		
DEQ Permit ID		
Your DEQ Online RID		
Population Served		

Pretreatment Contact	
Title	
Address	
City, State, Zip	
Email	
Phone	
Fax	

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 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.

Print Name	Title
POTW Authorized Signatory	Date

Form 2: Program Status and Updates

		Date
1.	Approval date of original pretreatment program	
1a.	Incorporation date into a NPDES/WPFC permit	
Comments:		

		Planned Submission Date
2.	Program materials under development	
Comments:		

		Date Submitted
3.	Program materials submitted for review/approval	
Comments:		

4.	Program materials approved since original pretreatment program approval		
	Description of Modification	Date Approved	Incorporation Date

		Date
5.	Date of last pretreatment compliance audit?	

6.	Local Limits	Date
6a.	Date of most recent local limits technical evaluation	
6b.	Most recent adopted technically based local limits	

[illegible]

7.	Additional noteworthy pretreatment activities/accomplishments.

Form 3: Treatment Plant Monitoring

Provide all treatment plant influent, effluent and biosolids (sludge) data for toxic pollutants and non-conventional pollutants collected during the calendar year. Discuss all data anomalies including cause and actions taken to prevent recurrence. Include all re-sampling results for samples taken to meet NPDES/WPCF permit monitoring requirements because of monitoring that was invalidated for any reason.

(See [Instructions for completing form](#)).

All effluent data collected and analyzed must be in accordance with 40 CFR 136; and 40 CFR Part 503 for Biosolids

Form 4: Headworks Loading Comparison

[illegible]

1a.	For each MAHL exceedance provide a narrative discussion and show associated calculations to demonstrate whether a pass through occurred.	
Exceeded Pollutant		
Calculations		
Exceeded Pollutant		
Calculations		
Exceeded Pollutant		
Calculations		
Exceeded Pollutant		
Calculations		

***Please upload a picture of hand written calculations or a screenshot of from an application used for constructing complex mathematical equations.**

Exceeded Pollutant	
Calculations	
Exceeded Pollutant	
Calculations	
Exceeded Pollutant	
Calculations	
Exceeded Pollutant	
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Exceeded Pollutant	
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Calculations	
Exceeded Pollutant	
Calculations	

Exceeded Pollutant	
Calculations	

2.	Provide a narrative discussion of the POTW's local limits: any problems encountered in the application of the approved limits, any additional pollutants of concern that may have been observed in either industrial effluent or POTW influent, and any plans to revise or augment existing limits.

Form 5: Treatment Plant Upsets/Problem

1.	Has the control authority experienced any of the following?		
	Yes	No	Unk
Interference			
Pass Through			
Fire or explosions (including flash point violations)			
Corrosive structural damage (including pH<5.0)			
Flow obstructions			
Excessive flow or pollutant concentrations			
Heat problems			
Interference due to oil or grease			
Toxic fumes			
Illicit dumping of hauled waste			

1a.	If yes to any of the above, please provide a brief narrative.

2.	Provide a description of each instance of treatment plant upset (pass through or interference) due in whole or in part to a non-domestic discharge (See Instructions for completing FORM 5).
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Form 6: List of Regulated Users

Industrial User	Status	Permit Issued	40 CFR Part No.	SIU	CIU	NDCIU	NSCIU	MTCIU	SIC/NAICS Code

Check all that apply.
MTCIU = Middle Tier CIU

Industrial User	Status	Permit Issued	40 CFR Part No.	SIU	CIU	NDCIU	NSCIU	MTCIU	SIC/NAICS Code

Check all that apply.
 MTCIU = Middle Tier CIU

Industrial User	Status	Permit Issued	40 CFR Part No.	SIU	CIU	NDCIU	NSCIU	MTCIU	SIC/NAICS Code

Check all that apply.
MTCIU = Middle Tier CIU

Industrial User	Status	Permit Issued	40 CFR Part No.	SIU	CIU	NDCIU	NSCIU	MTCIU	SIC/NAICS Code

Check all that apply.
MTCIU = Middle Tier CIU

Form 6A: Industrial Survey Update

***Check box to answer “Yes”, If “No” leave box blank**

[illegible]

Industrial User	Survey Returned	Permit App Req	Permit App Returned	Permit Issued	Comments

***Check box to answer “Yes”, If “No” leave box blank**

Form 7: Compliance/Oversight Summary (SIUs)

[illegible]

			All Regulated Pollutants		SNC by Quarter			
SIU Name	Permit Exp. Date	Number of Documented Inspections	POTW Sampling	SIU Self-Monitoring	1	2	3	4

Use the following codes for SNC:

A – SNC with Applicable Pretreatment Standards

B – SNC with Self-Monitoring

C – SNC with Reporting

D – SNC with Compliance Schedule

Form 8: Noncompliance/Enforcement Summary (SIUs)

SIU Name	Violation Type	Violation Date	Analyte	POTW Enforcement	POTW Response Date	Compliance Return Date

Place comments on page 31 in the space provided. Please include SIU Name and Violation Date.

Comment Space

Form 9: Resource Summary

Full Time Employees	Reporting Year	Planned	Comments
Enforcement Officers			
Management			
Administration			
Inspection Personnel			
Laboratory Staff			
Sampling Technicians			
Total			

Resources	Reporting Year	Planned	Comments
Vehicle Totals			
Analytical Equipment			
Safety Equipment (Number/Type)			
Sample collection, handling, and storage equipment (e.g. number of samplers)			

Operating costs may include laboratory costs, sampling and inspection costs, permit writing costs, and enforcement costs. Income sources may include sewer use fees, extra strength surcharges, impervious area fees, enforcement penalties, and other revenue streams.

Keeping these in mind, do you feel like your program is adequately funded with sufficient resources? If not, please explain what area(s) need(s) greater funding/attention.

Form 10: Pretreatment Program Evaluation

		Yes	No
1.	Has a change in contributing jurisdictions occurred since the last annual report		
If yes, identify the jurisdiction that have been added or removed			

		Yes	No
2.	Has the Control Authority updated its Industrial User Survey to identify new Industrial Users (IUs) or changes in wastewater discharges at existing IUs? [(403.8(f)(2)(i))] If yes:		
2a	Are any of these IUs located in new service areas (describe)?		
2b	Have any IUs located in contributing jurisdictions where the POTW has no inter-jurisdictional agreements or IU Contracts?		
Describe:			

For any NEW Categorical Industrial User identified during reporting period

		Yes	No
3a	Baseline Monitoring Report (BMR) Submitted?		
3b	Final (90 – Day) Compliance Report (FCR) Submitted?		

4.	During the reporting period, how many IUs are currently permitted or identified by the Control Authority in each of the following categories.	
	NDCIUs not subject to zero discharge limits	
	Categorical Industrial Users (CIUs)	
	Significant Non-Categorical IUs	
	Zero Discharge Categorical Industrial Users	
	“Middle Tier” CIUs	

4.	Continued from previous page	
Total SIUs		
NDCIUs not subject to zero discharge limits		
Non-Significant CIUs		
Other regulated non-categorical IUs (describe)		

For both NSCIUs and MTCIUs please indicate N/A if the POTW has NOT adopted these provisions. "0" if you have adopted the provisions but do not currently permit any IUs as such)

		Yes	No
5.	Is the Control Authority's definition of "Significant Industrial User" the same as EPA's? [403.3(v)(1)(i-ii)]		
If not, the Control Authority has defined "Significant Industrial User" to mean:			

6.	How many SIUs are required to be covered by an individual control mechanism?	
6a.	How many SIUs are not covered by an existing, unexpired permit or other control mechanism?	
Explain:		

		Yes	No
7.	Were individual control mechanisms issued/reissued for 90% of the SIUs within 180 days of the expiration date?		
7a	How many control mechanisms were not issued within 180 days of the expiration date?		

7b.	Explain answer for 7a.

		#	%
8a.	How many Zero Discharge Categorical Industrial Users have been issued a control mechanism? (Number/percent)		
8b.	How many NDCIUs NOT subject to a zero discharge and have been issued a control mechanism?		
8c.	Does the POTW require annual certification of NDCIUs in lieu of issuing a control mechanism?		
Comments:			

		Yes	No
9.	Does the POTW accept hauled domestic waste?		
10.	Does the POTW accept hauled non-hazardous industrial waste?		
11.	Does the Control Authority have a control mechanism for regulating IUs whose waste are trucked to the treatment plant?		
11a.	If yes, does control mechanism designate a discharge point?		
Describe:			

		Yes	No	NA
12.	Are all applicable categorical standards and local limits applied to IUs whose wastes are trucked into the POTW?			
If no, why?				

		Yes	No
13.	Has the Control Authority evaluated the need for SIUs to develop slug discharge control plans? [403.8(f)(2)(vi)]		
If yes, when was the evaluation last conducted and what criteria were used to identify the IUs for slug plans?			
Slug Control Plans	Actions	During Report Period	Program Total
How many were...	Required		
How many were...	Received		
How many were...	Approved		

		Yes	No	N/A
14.	Are TTO standards or alternatives (solvent management plans or oil & grease monitoring) being implemented for IUs subject to TTO limitations? If no, explain why in the comment space below.			
14a	Are TTO standards being applied to other IUs?			
Comment Space				

15.	How many times were the following monitored during the past year?				
Type		Influent	Effluent	Sludge	Ambient (Receiving Water)
Metals					
Priority Poll.					
Biomonitoring					
TCLP					
EP Tox					
Other					

16.	Has the Control Authority had any problems performing compliance monitoring?	Yes	No
	Scheduled		
	Unscheduled		
	Demand		
If yes, explain:			

How many, and what percentage of SIUs were (a) not sampled at least once, or (b) no inspected at least once during the reporting period [403.8(f)(2)(vi)]		#	%
17a.	Number and Percent not sampled		
17b.	Number and Percent not inspected		

Does the control authority routinely spilt samples with industrial personnel?		Yes	No
18a.	If requested		
18b.	To verify IU self-monitoring		

19.	Provide the following information regarding pollutant analyses.		
	Criteria	Analytical Method	Name of Laboratory
	Mercury		
	Other Metals		
	Cyanide		
	Organics		
	Others		

		Yes	No
20.	Do control authority use QA/QC for sampling analysis?		
If yes, describe:			

21.	How much time normally elapses between sample collection and obtaining analytical results?	
-----	--	--

		Yes	No
22.	Is there an established protocol clearly detailing sampling location and procedures?		

23.	How frequently does the control authority use closed cup flashpoint test specified in 40 CFR Part 261.21 to monitor SIUs? [403.5(b)(1)]		
	Once per year		
	Prior to each sampling		
	Other		

		Yes	No
23a.	Did the control authority find any problems?		
If yes, explain			

		Yes	No
24.	Does the Control Authority compare all monitoring data to applicable pretreatment standards and requirements contained in the control mechanism within 15 days of its receipt?		

		Yes	No
25.	Does the Control Authority use EPA's definition of Significant Noncompliance (SNC)? [403.8(f)(2)(viii)]		

		Yes	No	NA
26.	Are SIUs required to notify the Control Authority within 24 hours of becoming aware of a violation and to submit additional monitoring within 30 days after the violation is identified? [403.12(g)(2)]			
27.	If the Control Authority conducts monitoring in lieu of the user, does the Control Authority resample and obtain results within 30 days of identifying and violation?			
28.	Date that administrative penalties were last updated:			

29.	Indicate the compliance/enforcement options that are available in the event of IU noncompliance:		
	Notice of Violation or Letter of Violation		
	Compliance Schedule		
	Injunctive Relief		
	Imprisonment		
	Termination of Service		
	Administrative Order		
	Revocation of Permit		

29a.	Fines (Maximum Amount) per day per violation	
	Civil	
	Criminal	
	Administrative	

30.	List the amount of enforcement actions issued by the control authority for the reporting period.		
	Actions	Total Actions Taken	Total Industries Affected
	Written notice or letter of violation		
	Administrative Orders		
	Administrative Fines		
	Show Cause Hearings		
	Compliance Orders		
	Permit Revocation		
	Civil Action		
	Termination of Service		
	Other (Specify Below)		
	Comment Space		

31.	For each of the listed enforcement actions, identify the following for the ones the Control Authority has used during the reporting period:		
	Actions	Total Actions Taken	Amount in Dollars
	Civil		
	Administrative		
	Total		

32.	Indicate the number and percent of SIUs that were identified as being in SNC (as defined by EPA) with the following during the reporting period:		
	Actions	# SNC SIUs	% SNC SIUs
	Applicable pretreatment standards		
	Self-monitoring requirements		
	Reporting requirements		
	Pretreatment compliance schedule		
	Other		

		Yes	No
33.	Did the Control Authority publish all SIUs in SNC in newspapers, or general arbitration that provides meaningful public notice within the instructions served by the POTW? [403.8(f)(2)(vii)]		
	If yes, attach a copy, or attach a copy of the affidavit of publication.		

34	Indicate the number of SIUs that are currently in SNC with self-monitoring and were not inspected or sampled:	
35	How many SIUs are currently on compliance schedules in order to meet new or revised national pretreatment standards or requirements?	

		Yes	No
36.	Have any CIUs been allowed more than 3 years from the effective date of a categorical standard to achieve compliance? [403.6(b)]		
37	Have any IUs requested that data be held confidential?		
38	Have any requests been made by the public to review files?		
39	Are all records maintained for at least 3 years?		
40	Does the Control Authority have the technical documents necessary for implementing its pretreatment program?		

		Yes	No
41.	Are there significant public or community issues impacting the POTW's pretreatment program?		

If yes, explain:

Form 11: Sewage Treatment Plant Profiles

Complete this section for each sewage treatment plant operated under an NPDES/WPCF Permit.

DEQ NPDES/WPCF Permit Number:			
1.	Treatment Plant Design Dry Weather Flow		MGD
2.	Treatment Plant Actual Dry Weather Flow (Avg)		MGD
3.	Treatment Plant Design Wet Weather Flow		MGD
4.	Treatment Plant Actual Peak Wet Weather Flow		MGD

5.	Sewerage System Percentages and Totals		
	Separate		
	Combined		
	Total Number of CSOs		

6.	Industrial Contributions		
	Flow (MGD)		
	Percent of Influent		
	Number of contributing SIUs (non-CIUs)		
	Number of contributing CIUs		

7.	Levels of Treatment		Description
	Preliminary		
	Primary		
	Secondary		
	Tertiary		
	Type of disinfection		

8.	Receiving Water	
	Name	
	Classification (Hydro Code)	
	Designated Beneficial Uses (OAR 340-41)	

		Yes	No
9.	Effluent Discharged to Any Location Other than Receiving Water?		
If yes, Indicate Where, When, and Describe:			

10.	Indicated methods of biosolids (sludge) disposal (Mg/Kg (dry weight) / year)	
	Land Application	
	Municipal Solid Waste Landfill	
	Sale or Donation to Public	
	Other (Specify)	

Form 12: Pretreatment Program Profiles

Information pertaining to contributing jurisdictions (Complete for each jurisdiction)

1.	Name of contributing jurisdiction:	
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		Yes	No
1a	DEQ approved IJA, IGS, or MJA		
	Date approved by DEQ		
	Date incorporated into NPDES/WPCF Permit		
	Number of other SIUs in contributing jurisdiction		

1.	Name of contributing jurisdiction:	
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		Yes	No
1b	DEQ approved IJA, IGS, or MJA		
	Date approved by DEQ		
	Date incorporated into NPDES/WPCF Permit		
	Number of other SIUs in contributing jurisdiction		

1c.	If relying on contributing jurisdictions, indicate, for each, which activities they are required to perform		
Name			
Industrial User Survey			Specify here:
Permit Issuance			
Notification of Industrial Users (IUs) of Pretreatment Requirements			
Receipt and Review of IU Reports			
Analysis of Samples Other (Specify)			

1c.	If relying on contributing jurisdictions, indicate, for each, which activities they are required to perform	
Name		
Industrial User Survey (IUS)		Specify here:
Permit Issuance		
Notification of Industrial Users (IUs) of Pretreatment Requirements		
Receipt and Review of IU Reports		
Analysis of Samples Other (Specify)		

1c.	If relying on contributing jurisdictions, indicate, for each, which activities they are required to perform	
Name		
Industrial User Survey (IUS)		Specify here:
Permit Issuance		
Notification of Industrial Users (IUs) of Pretreatment Requirements		
Receipt and Review of IU Reports		
Analysis of Samples Other (Specify)		

1c.	If relying on contributing jurisdictions, indicate, for each, which activities they are required to perform	
Name		
Industrial User Survey (IUS)		Specify here:
Permit Issuance		
Notification of Industrial Users (IUs) of Pretreatment Requirements		
Receipt and Review of IU Reports		
Analysis of Samples Other (Specify)		

2.	Indicate approved pretreatment program compliance and inspection frequency requirements:	
a.	Inspection	
	CIUs	
	Other SIUs	

b.	Sampling by Control Authority (i.e.) the municipality or POTW	
	CIUs	
	Other SIUs	
c.	Industrial user (IU) self-monitoring	
	CIUs	
	Other SIUs	
d.	Reporting by IUs	
	Other CIUs	
	Other SIUs	

Removal Credits:

		Yes	No
3a	Is the Control Authority currently authorized to issue removal credits?		

		Yes	No
3b	Has the Control Authority applied for authorization to issue removal credits?		
	Date applied		

		Yes	No
3c	Has the Control Authority issued any removal credits?		
	Date issued		

		Date
3d	Date of most recent removal credits approval (if applicable)	

		Yes	No
4.	Is any part of the pretreatment program being operated under any pretreatment- related consent decree, administrative order, compliance schedule, or other enforcement action?		

If yes, explain:

5. List NPDES/WPCF Permit effluent and biosolids limits violated and suspected causes:

Parameters Violated	Date	Causes

		Yes	No
6.	Have treatment plant biosolids violated any TCLP tests?		
If yes, explain:			

Form 13: Pretreatment Summary

Form/Section	Question	Answer
2.6	Date of Most Recent Technical Evaluation for Local Limits?	
	Date of Most Recent Adoption of Technically Based Local Limits?	
	Local Limit Pollutants?	
10.4*	Has City adopted NSCIU/MTCIU?	
	Number of SIUs	
	Number of CIUs	
	Number of non-categorical SIUs	
	Number of zero discharge categorical industrial users	
	Number of NDCIU NOT subject to zero discharge	
	Number of NSCIU	
	Other Permitted IUs (not SIUs or CIUs)	
10.6*	SIUs Without Control Mechanism?	
10.9	Acceptance of Hauled Domestic Wastes (Yes or No)	
10.10	Acceptance of Non-Hazardous Industrial Wastes? (Yes or No)	
10.17*	SIUs not sampled?	
	SIUs not inspected	
10.30*	Violation Notices Issued to SIUs	
	Administrative Orders Issued to SIUs	
	Civil suits filed against SIUs	
	Criminal suites filed against SIUs	
10.31*	Industrial Users (IUs) from which Penalties have been collected?	
	Dollar Amount of Penalties Collected?	

<u>10.32*</u>	SIUs in SNC with pretreatment standards	
	SIUs in SNC with self-monitoring standards	
	SIU in SNC with reporting requirements	
	SIUs in SNC with pretreatment compliance schedule	
<u>10.33*</u>	SIU in SNC published in newspaper	
	Removal credits application status	
<u>12.3*</u>	Date of most recent removal credits approval	
	Removal credits	

* If your Approved Program has multiple wastewater treatment plants, please submit multiple Form 13; data from Forms such as Form 10 may need to be split up by wastewater treatment plant.

Form 14: Hauled Waste Annual Report

1.	Year:	
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2.	Facility Name:	
3.	Facility Location	

4.	YDO RID:	
5.	Permit #:	
6.	EPA ID #:	

7.	Number of Permitted or Approved Liquid Waste Haulers?	
8.	Number of Receiving Stations	
9.	Number of upsets caused/contributed by or suspected to be caused/contributed by (a) liquid waste load(s) during reporting period (N/A if not applicable):	
10.	All Liquid Waste Loads Monitored during Reporting Period? Yes / No	
11.	If no, approximately what % not monitored?	

12.	Waste Type	Number of Loads	Total Gallons*
	Wastewater Solids **		
	Septage		
	Grease Trap Waste		
	Portable and Chemical Toilet Waste		
	Landfill Leachate (Hauled In)		
	Groundwater Remediation Wastewaters		
	Other Commercial/Industrial Wastewaters		
	Total Gallons All Hauled Waste:		

*Sum of loads in gallons, **Wastewater solids from other wastewater treatment facilities

13.	pH Range of all tested loads	
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***** do not use published value, must be minimum to maximum pH value from tested loads within the reporting period.**

ATTACHMENTS:

Please attach additional information regarding upsets known or suspected to be caused/contributed by liquid waste loads.

Please attach ALL SAMPLE RESULTS from sampled loads, not including ph.