

# Hauled Waste Annual Report

## Pretreatment Program

Year:	
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Facility Name:	
Facility Location	

YDO RID:	
Permit #:	
EPA ID #:	

Number of Permitted or Approved Liquid Waste Haulers?	
Number of Receiving Stations	
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):	
All Liquid Waste Loads Monitored during Reporting Period? Yes / No	
If no, approximately what % not monitored?	

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

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.

Translation or other formats

Español | 한국어 | 繁體中文 | Русский | Tiếng Việt | العربية  
800-452-4011 | TTY: 711 | [deqinfo@deq.oregon.gov](mailto:deqinfo@deq.oregon.gov)

**ATTACHMENTS:**

- 1) Please attach additional information regarding upsets known or suspected to be caused/contributed by liquid waste loads.
- 2) Please attach ALL SAMPLE RESULTS from sampled loads, not including ph.

**Signature Requirements**

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 fines and imprisonment for knowing violations.

<b>Print Name</b>	<b>Title</b>
<b>Signature of Responsible Official</b>	<b>Date</b>
<b>Phone Number</b>	

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