PAD SITE EVALUATION FORM

DATE:________________ DISTRIBUTOR:_________________________________________________

CUSTOMER:________________ CONTACT:_________________________ POSITION:_______

ADDRESS:__________________________________________ STATE:______________ ZIP:_____

TYPE OF BUSINESS:_____________________________________________________________________

WASTE STREAM GENERATED BY:__________________________________________________________

WASTE VOLUME: (Answer all rates to determine maximum and averages for discharge)

GPM
Weekly Ave ___________________ Daily Ave. ___________________ Monthly Ave. ________________

Present Method of Disposal: (check one)
WASTE HAULED ☐ STORM DRAIN ☐ SEWER DISCHARGE ☐ SEPTIC ☐ OTHER ☐

Present Costs associated with disposing waste water: (This is optional but can help in cost analysis)

Cost per gallon hauled ___________________ Sewer rate/1000 ___________________
Pick-up fee ___________________ Surcharge/1000 ___________________
Liability insurance ___________________ Annual permit fees ___________________
Sample analysis fees ___________________ Required monitoring ___________________

Discharging to sewer (POTW)?_____ (Yes/No) Get name and phone# of district. ________________________________
(We will then get current discharge requirements)

Have lab test ever been taken on discharge water?_______ (Attach a copy if yes)

Waste stream Make-up: (Attach MSDS sheets of all cleaners and additives.)
___________________________________________________________________________________
_________________________________________________________________________________

What detergents are being used presently?_____________________________________________________

Are they Oil emulsifying?_________Amount used per month?_________________________________
What residues are removed during the cleaning process?

Can the cleaning practice be changed to reduce waste residues prior to washing?
If yes, how?

**Solids load:**  Heavy □   Moderate □   Light □   (check one)
**Oil load:**  Heavy □   Moderate □   Light □   (check one)

Is rainwater prevented from mixing with waste stream? If no, what are the local regulations pertaining to excess rainwater deposited into the sewer system? Attach regulations concerning storm water runoff for the site.

**SITE SPECIFICS**

**Electrical:**  (Have your electrician provide following information)

Voltage available on site now

<table>
<thead>
<tr>
<th>Voltage Type</th>
<th>Max Amps</th>
</tr>
</thead>
<tbody>
<tr>
<td>460-480, 3 phase</td>
<td></td>
</tr>
<tr>
<td>208-230, 3 phase</td>
<td></td>
</tr>
<tr>
<td>208-220, 1 phase</td>
<td></td>
</tr>
<tr>
<td>110-120, 1 phase</td>
<td></td>
</tr>
</tbody>
</table>

Desired voltage and phase for equipment:

**Existing Sump**

Capacity ________ gals  Actual Sump Size ________ X ________ Storage Tank Capacity (if available) ________

**Filtration Equipment to be Located:**  Outdoors □ Indoors □
(Is freeze protection of components needed?)

Distance to drain or sewer from equipment location:

Distance from pad to equipment location:

Any Special Considerations:

**DISTRIBUTORS RECOMMENDATION:**

__________________________

__________________________

__________________________

__________________________
**DRAW A BASIC LAYOUT OF SITE**  
(Dimensions are Important)  
Include and Label the following

<table>
<thead>
<tr>
<th>A. Wash Pad</th>
<th>E. Sumps</th>
<th>I. Storage Tanks</th>
<th>M. Covered Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. Pressure Washers/Cleaners</td>
<td>F. Sewer</td>
<td>J. Walls</td>
<td>N. Exposed Areas</td>
</tr>
<tr>
<td>C. Equipment Pad</td>
<td>G. Electrical panels</td>
<td>K. Hose Bibs</td>
<td></td>
</tr>
<tr>
<td>D. Solids Collection Trench</td>
<td>H. Water supply</td>
<td>L. Access Doors</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Attach pictures of site if possible