

Commonwealth of Massachusetts
Executive Office of Energy and Environmental Affairs
Office of Technical Assistance and Technology
100 Cambridge Street, Suite 900, Boston, MA 02114

Phone (617) 626-1060

Email: maota@state.ma.us

Fax (617) 626-1095

PRE-VISIT QUESTIONNAIRE

Date: _____

Company Name: _____ Web Site: _____

Facility Address: _____

Mailing Address (if different): _____

Company contact: _____ Title: _____

Email: _____ Phone: _____ Fax: _____

Alternate contact: _____ Title: _____

Email: _____ Phone: _____

Standard Industrial Code (SIC): _____ NAICS Code: _____

Number of Employees: _____

How did you learn of OTA? (What prompted this recent contact?)

According to the Massachusetts Toxics Use Reduction Act (Chapter 21I, Section 23, Part H, which is available at <http://www.mass.gov/legis/laws/seslaw06/sl060188.htm>:

Any information or record, in document or electronic format, received by the office in the course of providing technical assistance to a toxics user shall be kept confidential and not considered to be a public record pursuant to section 10 of chapter 66, unless:

- The toxics user agrees in writing that such information may be made available to the department;
- The office determines at its discretion, the information pertains to an imminent threat to public health or safety, or to the environment
- Disclosure to the department is required by law.

-
1. Briefly describe the products you manufacture or the service your company provides. Please enclose a company sales brochure and any product literature relevant to this visit.

 2. What types of manufacturing processes are performed at your facility?

 3. For what specific unit operation(s)/production process(es) would you like OTA's assistance?

4. Are process flow diagrams available to view on site?
5. Please list the hazardous/toxic chemicals involved in your facility's manufacturing processes and the approximate annual usage (if available).

| | |
|-----------------|---------------------|
| Chemical: _____ | Approximate _____ |
| _____ | Annual Usage: _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

6. Does your facility file a Form R (EPA), Form S (DEP), or Tier II (EPA)?
7. What materials does your facility recycle or reuse?
8. Would you like assistance with energy conservation (Please specify area)?
9. Please indicate what operation or production process is the primary source of air emissions and/ or hazardous waste generation and what chemicals are responsible.
10. Do you use any treatment processes to reduce emissions of toxics to the air, water, or as hazardous waste?

11. What is your total industrial water usage per day?

Would you like us to help you with water conservation?

12. Where is your facility's industrial wastewater discharged?

Publicly Owned Treatment Works (POTW): _____
(name)

Body of Water (ex. River or stream): _____
(name)

Other:

13. Name, title, phone number and email of person completing this questionnaire.

Please feel free to attach any other information you think may be helpful in our working together.