

Industrial Pretreatment Program Questionnaire for Brewery/Winery/Cidery/Distilled Spirits

Facility Name:			Facility Address:		
Point of Contact:		Phone:	Email:		
• •	Alcohol Produced? Beer Hard Cider	□ Sake □ Wine	e 🗆 Distilled Spirits –	Specify Type(s) and base used	
2. Do you c	currently have or an	ticipate having F	ood Service at your fac	cility?	
□ On-Sit	e Kitchen □ Food	Truck Other			
•	•	_	-	streaming high-strength pollutant waste se describe or provide BMP's:	
this proc	ess or activity disch	narged to the sani	tary sewer system?	If so, is wastewater generated as a result of	
_	Distilling	☐ Yes ☐ No	□ N/A	□ Other	
Bottling		☐ Yes ☐ No	□ N/A	□ Other	
Canning		□ Yes □ No	□ N/A	□ Other	
Kegging		□ Yes □ No	□ N/A	☐ Other	
Equipme	nt sanitizing	□ Yes □ No	\square N/A	□ Other	
Production	on area sanitizing	□ Yes □ No	□ N/A	☐ Other	
Other (sp	pecify):		Specify other disposal:		
5. Barrel Si	ze □ 31 gallons	□ 55 gallons	☐ Other (specify):		
6. Which be	est describes your o	peration?			
☐ Greate	r than 20,000 barre	ls/year □ Betwee	en 10,000-19,000 barre	ls/year □ Between 5,000-9,999 barrels/year	
		•	han 1.000 barrels/vear	•	

7. What is your curr	What is your current production to wastewater ratio?								
8. What is your pro	What is your production average monthly water usage?								
9. What is your pro	What is your production average monthly wastewater discharge to sewer?								
10. Does your facility	have a discharge flow meter? Yes	□ No - Which company calibrates it?							
11. Is alcohol produc	ed at this facility available for purchas	se & consumption off-site? Yes No							
12. Which treatment	process at your facility treats waste st	treams that are discharged to the sanitary sewer?							
	ids Filtration	g □ Acid/Base Neutralization							
□ No	Treatment Other:								
	ume of the following items used/dispo	•							
Yeast:		Hops:							
Grain:		Waste Beer:							
Diatomaceo	ous Earth:	Other:							
15. How do you disp	ose of the following waste streams?								
Spent Grain/Barle	ey) □ Compost (farm) □ Sanitary Sewer □ Other							
Spent Yeast	☐ Solid Waste (Landfill)) □ Compost (farm) □ Sanitary Sewer □ Other							
Kettle Hop/Trub	☐ Solid Waste (Landfill)) □ Compost (farm) □ Sanitary Sewer □ Other							
Fruit Solids	☐ Solid Waste (Landfill)) □ Compost (farm) □ Sanitary Sewer □ Other							
List farms which re	ceive compost:								
Farm Name:		Telephone Number:							
		Zip:							
Owner of Premises	(Lessor): □ same as above □ differen	nt from above:							
Type of Ownership	: □ Individual □ Partnership □ LLC	☐ Corporation ☐ Non-Profit Organization							
Name (Mr./Mrs./M	s.):								

Business Mailing Address: ☐ same as above ☐ dif	Iterent from above:							
Street/P.O. Box:	Suite:	City:						
State:Zip:								
Designated facility contact: □ same as above □ different from above:								
Name:	Title:							
Telephone Number:								
If more than one disposal site, attach additional sheets as necessary inclusive of above information.								
Describe any other waste disposal methods:								

Please include SAFETY DATA SHEETS for any product used that may be in the wastewater discharged from your facility. Please include any analytical data collected as a result of sampling the wastewater discharged from this facility. Please include manuals, procedures, or BMPs that are used in Pretreatment of the wastewater discharged from this facility.

This survey must be completed and returned within 30 days of receiving it. Please return the survey to the address or e-mail listed below:

Industrial Pretreatment Program
Emerald Coast Utilities Authority

P.O. Box 17089, Pensacola, FL 32522

Email: pretreatment@ecua.fl.gov

Office: (850) 969-3344