



INDUSTRIAL USER SURVEY
 BREWERY – WINERY – MEAD – KOMBUCHA – JUICING

Mail to: Attn: Jason Wong • Ventura Water, PO Box 99, Ventura, CA 93002
 (805) 677-4112 or email to jwong@cityofventura.ca.gov

GENERAL INFORMATION

A	Facility Name			
B	Facility Address (Street)	City	State	Zip Code
C	Mailing Address (Street)	City	State	Zip Code
D	Business Owner	Phone No.	Ext.	
E	Facility Contact Person	Phone No.	Ext.	

SECTION 2 | BUSINESS AND EMPLOYEE INFORMATION

A	<input type="checkbox"/> Winery (Complete Sec. 5A) <input type="checkbox"/> Brewery (Complete Sec. 5B) <input type="checkbox"/> Other (Complete Sec. 5C) <input type="checkbox"/> Juicing (Complete Sec. 5D)			
B	City Business License #			
C	Alcohol Beverage Control License Type(s)		<input type="checkbox"/> N.A. (Non-alcoholic Mixes)	
D	Standard Industrial Classification Code(s) (SIC) for your facility	2082	or NAICS Number	
E	Number of Employees	Number of Shifts		
F	Hours of Operation	AM	to	PM
G	If operation hours are different, describe schedule			

SECTION 3 | WATER USE

A	What is the facility's water use?	Ventura Water	gals/day	<input type="checkbox"/> Estimated	<input type="checkbox"/> Metered
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SECTION 4 | WATER CONDITIONING

A	Water conditioning unit(s) demineralizer used on site?	Conditioning unit regenerated on site: <input type="checkbox"/> Yes <input type="checkbox"/> No			
		gals/month			
*Note- The use of salt regeneration water softening units is prohibited in commercial/industrial establishments.					
B	Reverse Osmosis (R.O.) used on site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, # of units	
	Amount of reject water generated?	gals/month	How is the reject water disposed?		

SECTION 5 | PROCESS TYPE

A Winery

Indicate the activities that are performed at this location:

- | | |
|--|--|
| <input type="checkbox"/> Crushing | <input type="checkbox"/> Laboratory |
| <input type="checkbox"/> Pressing | <input type="checkbox"/> Tasting |
| <input type="checkbox"/> Fermentation | <input type="checkbox"/> Tasting room only (No wine production on site.) |
| <input type="checkbox"/> Clarification | <input type="checkbox"/> Food preparation |
| <input type="checkbox"/> Racking | <input type="checkbox"/> Brandy made on site |
| <input type="checkbox"/> Bottling: Is a mobile bottling trailer used? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Other: _____ |

Annually: Tons of grapes processed _____ Cases Produced _____ Cumulative Gallons of Wine produced _____

How are lees managed?

Where are lees disposed of?

Hours of Operation during Crush? _____ AM to _____ PM Days Per Week Su M Tu W Th F Sa

B Brewery

Barrels per year _____

Gallons of wastewater generated monthly _____

(Gallons of City water delivered - amount water goes out with finished product + domestic waste [bathrooms, hand sinks] = wastewater generated)

How are waste solids (spent grains, trub, yeast, DE), disposed?

If disposed offsite, where are waste solids disposed ?

Bottling Kegging Canning Any onsite food preparation? Yes No Food Trucks? Yes No

C Other Distilling or Fermenting

Products generated _____

Types of Processes Distilling Mixing Bottling Canning

Provide a brief description of the type of products and processes performed at this site (Including ingredients)

Tasting? Yes No Onsite food preparation? Yes No

D Juices, Mixes, Other (Non-Alcoholic)

Products generated _____

Amount of product made? (gals) _____ Types of Processes: Mixing Pasteurization Bottling

Provide a brief description of the type of products and processes performed at this site (Including ingredients)

SECTION 6 | CLEANING PROCESSES

A	Is bottle/keg washing done on site? <input type="checkbox"/> YES <input type="checkbox"/> NO
B	Procedure for cleaning tanks (include any products used)?
C	Location of floor drains?
Are floor drains connected to the sewer? <input type="checkbox"/> YES <input type="checkbox"/> NO or the storm drain system? <input type="checkbox"/> YES <input type="checkbox"/> NO	

SECTION 7 | WASTEWATER

A	Type of waste streams Generated
B	Is wastewater discharged to <input type="checkbox"/> City sewer (See 7.C.) <input type="checkbox"/> Septic system <input type="checkbox"/> Hauled Off-site (See 7.D.)
C	Average volume of non-domestic (process) wastewater discharged to the City sewer
	<input type="text"/> gals/day <input type="text"/> gals/month
D	If Hauled, is it land applied* <input type="checkbox"/> or other (describe) <input type="checkbox"/>
Location where it is disposed at:	
*A copy of the enrollment letter from the State Regional Water Quality Control Board for land application must be attached.	

SECTION 8 | PRETREATMENT

A	Are there any on-site wastewater treatment facilities (clarifiers, filters, screens, etc.)? <input type="checkbox"/> YES <input type="checkbox"/> NO
B	If yes, describe pretreatment methodology

SECTION 9 | STORMWATER

A	Describe any processes performed outside? 	
B	Are outdoor process areas covered? <input type="checkbox"/> YES <input type="checkbox"/> NO	
C	Is the facility enrolled in the Industrial Statewide Storm Water Industrial General Permit (IGP) through the Los Angeles Regional Water Quality Control Board? <input type="checkbox"/> YES <input type="checkbox"/> NO	WDID# <input type="text"/>
D	Describe any outdoor areas washed down? 	
How and where is the wash-down water disposed?		

E Describe in detail all Best Management Practices in place to prevent any type of nonstormwater runoff?

F Describe the location of any storm drain inlets on site:

SECTION 10 | SITE PLAN

Attach a site plan which include building layout, any inside or outside processing areas, process schematic, wastewater pretreatment systems, and discharge location.

SECTION 9 | CERTIFICATION

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 upon 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 fine and/or imprisonment for knowing violations.

Name (Printed)

Title

Signature

Date