EB	B	Resource Recovery Program PO Box 24055, MS 702 Oakland, CA 94623-1055 (510) 287-1632 <u>RRWaste@EBMUD.com</u> www.ebmud.com/wastewater/commercial- waste/trucked-waste	SUPPLEMENTAL INFORMATION FORM MAP No:	
	SUPPLEMENTAL INFORMATION FORM			
Co	Generator Name/Facility:			
	Generator Contact Person:			
Phone Number:				
PII		•		
1.			facility? (e.g., converts corn into tortillas or facility processed molition of the tanks is required. Describe the tank contents.)	
2.	the wells i	nstalled to monitor? If tank rinse-ou	tream? (e.g., if purge water from monitoring wells, what are t, what type of tank is it and previous contents? If process processes that may end-up in the wastewater?)	
3.	added dur		ing the waste? What chemical solutions (if any) have been ? What % concentration of chemical solutions exists in the ate Safety Data Sheets.	
4.		he constituents of concern (e.g., pH, test results.	COD, metals, hydrocarbons, etc.)? Submit appropriate	
5.	What is th	e current and / or past method of dis	sposal for this waste stream?	
6.	What is the	e anticipated total volume and daily f	requency?	