

## FORM 7B: Industry Mercury Checklist

### Best Management Practices for Mercury are Defined as Listed Below

Compliance with these BMPs may be considered as compliance with the local sewer use ordinance limit for mercury; wastewater sampling and analysis may also be waived by the municipality. It is the intention of the Mercury Pollutant Minimization Program to encourage implementation of mercury BMPs. Report date BMP implemented, or if not implemented, date anticipated.

	Yes	No	Date	Best Management Practice
<b>Policy</b>				1. Has your facility established a mercury policy statement that includes the reduction or virtual elimination of mercury?
				2. Has your facility developed a plan to phase-out mercury-containing devices?
				3. Has your facility implemented a chemical management program that includes pre-purchase review and approval?
				4. Has your facility established mercury management protocols for safe handling, mercury spill clean up procedures, disposal procedures, and education and training of employees about these protocols?
<b>Devices</b>				5. Has your facility inventoried all mercury-containing devices (such as switches, thermostats, etc)? **
				6. Has your facility labeled mercury-containing devices to recycle at the end of life? **
				7. Has your facility implemented a program to recycle fluorescent lamps? **
				8. Does your facility properly recover and recycle elemental mercury and mercury-containing products? **
<b>Chemicals</b>				9. Has your facility requested certificates of analysis for bulk chemicals known to have potential mercury contamination?
				10. Has your facility reduced the use of mercury-containing chemicals as much as feasible?
				11. If applicable, has your facility inventoried mercury-containing lab chemicals, thermometers and other devices with a plan for non-mercury product substitution?

\*\* May not effect wastewater

### Wastewater Sampling and Analysis (Not required for facilities implementing or scheduled to implement all BMPs.)

Sampling Location \_\_\_\_\_ Mercury Effluent Concentration \_\_\_\_\_ Date \_\_\_\_\_

(Attach summary if multiple wastewater outfalls)

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of the individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete.

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Name of Facility	Address	Phone
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Printed Name of Official	Signature	Title	Date
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