



New York State Pollution Prevention Institute (NYSP2I)

**Comprehensive Pollution Prevention (P2)
Assessment Tool: General**

Introduction

The purpose of this tool is to develop a comprehensive and detailed understanding of a company's operations or particular process and further investigate pollution prevention (P2) opportunities. This tool can be used after a preliminary P2 assessment has been performed (See *Basic Pollution Prevention (P2) Assessment Tool: General*) or as a standalone tool since it incorporates the questions asked in the aforementioned basic tool.

This tool can also be used at any type of manufacturing facility and facilitates widespread information gathering by listing questions that target the important areas that need to be analyzed while zeroing in on specific P2 opportunities/projects.

Company Information

Company Name:	
Street Address:	
City:	
State/Zip Code	
Telephone:	() - -
Website:	http://www.
E-mail:	
SIC Code(s):	
NAICS Code(s):	



Department:

Facility Square Footage:		Number of Employees:	
Number of Shifts:			

Major Products:

Main Customers:

What specific process/area/topic would you like to focus on today?

Any Other Information:



		Observation	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments
POLLUTION PREVENTION	Basic	Implemented P2 measures. If so, what?		
		Performed P2 assessments		
		Performed cost and or financial analyses of environmental/energy factors		

		Observation	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments
MANAGEMENT	Basic	An Environmental Management System (EMS)?		
		A Chemical Inventory Management system?		
		Any regulatory compliance challenges? What specifically?		
		Waste-streams that would like to reduce or eliminate?		

		Question	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments
ENVIRONMENTAL MANAGEMENT	Comprehensive	Do you have a written environmental policy? When was it last updated?		
		Have you set specific goals for environmental improvements? Give examples		
		Do you have an environmental management team? List titles and roles		
		Are periodic waste reduction assessments conducted at the facility? When was it done the last time?		



	Is waste reduction an integral part of your production planning process? How often is this goal reviewed?		
	Do you have written procedures for managing materials or waste? When was it last updated?		
	Is it driven by the objective of minimizing their release to the environment?		
MATERIAL AND EQUIPMENT MANAGEMENT	Does the facility have a functional centralized purchasing system? Which system/software?		
	Do you have a Material Inventory Control System that tracks materials from receipt to use? (Ex: to monitor quantities, expiration dates, etc). Which system/software?		
	Are materials inspected prior to accepting a shipment? Why not?		
	Are material containers dated when received? Why not?		
	Do you employ a first-in-first-out (FIFO) use policy for materials purchased? Why not?		
	Do you use a just-in-time (JIT) ordering system to prevent overstocking of materials that might become obsolete or outdated? Why not?		
	Do you attempt minimize packaging waste? By how much have you reduced it or Why not?		
	Do you utilize reusable containers? For which materials or Why not?		
	Have you asked your suppliers to take back used shipping containers, totes and pallets for reuse? Which suppliers or Why not?		
	Do you have a written protocol for the cleaning and maintenance of production equipment?		



	Do you have a written protocol for routinely inspecting equipment and storage containers/areas for leaks?		
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		Observation	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments
PRODUCT STEWARDSHIP	Basic	Performed assessments of products environmental attributes		
		Life Cycle Assessment of Product		
		Control over product design and formulation		

		Observation	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments
ENERGY	Basic	Significant energy costs compared to total operating costs		
		Energy audit		

		Observation	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments	
ENERGY	Comprehensive	Total Annual Electricity Use and Cost		kWh/year \$	
		Total Annual Natural Gas Use and Cost		MMCF/year \$	
		Oil Usage		gal/year \$	
		Propane Usage		gal/year \$	
		Energy use and costs by process (or facility)			
		_____		_____/year \$	
		_____		_____/year \$	
		_____		_____/year \$	
		_____		_____/year \$	
		_____		_____/year \$	
		_____		_____/year \$	
		_____		_____/year \$	
Any Additional Info:					

		Observation	Yes No NA	Additional Information / Comments		
AIR	Basic	Air emissions (Ex: Smoke stacks, process exhaust)				
		Air permit(s)				
		Air emissions assessment				
	Comprehensive	Total Actual Annual Air Emissions			tons/year	
		Types of Pollutants				List associated Process(es) and / or Equipment (if applicable)
		Sulfur Oxides (SOx)			% of total	
		Nitrogen Oxides (NOx)			% of total	
		Carbon Monoxide (CO)			% of total	
		Carbon Dioxide (CO2)			% of total	
		Volatile Organic Compounds (VOCs)			% of total	
		Particulate Matter (PM)			% of total	
		Hazardous Air Pollutants (HAPs)			% of total	
		Other: (Please specify)			% of total	
		Other: (Please specify)			% of total	
		Other: (Please specify)			% of total	
Other: (Please specify)			% of total			
Air Permits/Registration Fees			\$			
Any compliance challenges with regard to: (Enter Yes, No or NA)				Registration		
				State Facility Permit		
				Title V		



		Observation	Yes No NA	Additional Information / Comments
Basic		Wastewater pre-treatment or treatment plant		
		List of the types of chemicals that are being treated		
		Significant water costs compared to total operating costs		
		Wastewater discharge permit(s)		
		Water use assessment		
WATER	Comprehensive	Total Actual Annual Water Usage and Cost	gal/year	\$
		Total Actual Annual Waste Water Treatment and Cost	gal/year	\$
		Total Actual Annual Sewer Usage and Cost (if applicable)	gal/year	\$
		Types of Pollutants		<i>List associated Process(es) and /or Equipment (if applicable)</i>
		Acids	gal/year	
		Alkalis	gal/year	
		VOCs (because of improper storage)	gal/year	
		Heavy Metals	lbs/year	
		Food Processing waste	lbs/year	
		Detergents	gal/year	
		Insecticides	gal/year	
		Fertilizers	gal/year	
		Oils	gal/year	
		Other Chemical Waste:		
		_____ (Please Specify)	_____/year	
	_____ (Please Specify)	_____/year		
	_____ (Please Specify)	_____/year		
	_____ (Please Specify)	_____/year		



	Nurdles (Plastic pellets)	lbs/year	
	Other: (Please specify)	____/year	
	Other: (Please specify)	____/year	
	Other: (Please specify)	____/year	
	Other: (Please specify)	____/year	
	Any compliance challenges with regard to: (Enter Yes, No or NA)	Wastewater Discharge	
		Storm water Discharge	

		Observation	<u>Yes</u> <u>No</u> <u>NA</u>	Additional Information / Comments
Basic		Solid wastes – What types		
		Wastes that could be of value to another company – which ones?		
		Significant solid waste disposal costs		
		Waste audit		
SOLID WASTE	Comprehensive	Total Annual Solid Waste Generated		tons/year
		Types		List associated Process(es) and /or Equipment (if applicable)
		Metal		% of total
		Paper (All, including cardboards)		% of total
		Plastic Packaging		% of total
		Electronic Waste		% of total
		Electrical Waste		% of total
		Non-hazardous chemical waste		% of total
		Pallets		
		Process Waste		
		_____ (Please Specify)		% of total
		_____ (Please Specify)		% of total
_____ (Please Specify)		% of total		
_____ (Please Specify)		% of total		
Other: (Please specify)		% of total		
Other: (Please specify)		% of total		



Other:	(Please specify)	% of total	
Other:	(Please specify)	% of total	
Does your facility reuse and recycle wastes or scrap materials?			Approx. _____ lbs/yr

	Observation	Yes No NA	Additional Information / Comments
Basic	Generate Hazardous waste?		
	Has your hazardous waste generation rate changed over the past 5 years? If yes, why?		
	Have you made efforts to reduce your hazardous waste generation?		

HAZARDOUS

Comprehensive	Total Actual Annual Hazardous Waste generated and Disposal Cost		_____/year	\$	
	Types			List associated Process(es) and /or Equipment (if applicable)	
	_____	(Please Specify)	% of total		
	_____	(Please Specify)	% of total		
	_____	(Please Specify)	% of total		
	_____	(Please Specify)	% of total		
	_____	(Please Specify)	% of total		
	Hazardous Waste Generator Status (Circle):		CEG SQG LQG	Comments:	
	Hazardous Waste Annual Reports (Enter Yes, No or NA):			Comments:	
	SARA 313, TRI Reports (Enter Yes, No or NA):			Comments:	
Any Additional Info:					



Comments

