## INDUSTRIAL WASTEWATER DISCHARGE SELF-MONITORING REPORT

 $ATTACH\ ALL\ FIELD\ DATA,\ CHAIN\ OF\ CUSTODY\ DOCUMENTS,\ ANALYTICAL\ REPORTS,\ AND\ QUALITY\ ASSURANCE/CONTROL\ REPORTS$ 

Company name:			
Mailing Address:			
Facility Premise Address:			
Contact Person:		Phone No:	
Name of Signing Authorized Representative:		Phone No:	
Sample Frequency:	u representative.	Thone No.	
Sample Type:			
Sample Location:			
Name of Person Collecting	Samples:		
Name of Laboratory Perform			
	<u>-</u>		
SAMPLE DATE	SAMPLING PARAMETER	RESULT	UNITS
/ are not being	Pretreatment standards for this facility inc met on a consistent basis. Sampling has		
permit.			
Additional operation and ma	aintenance required to comply is as follows:		
Additional pretreatment requ	uired to meet standards is as follows:		
accordance with a sy submitted. Based on for gathering the infor	of law that this document and all attachmer stem designed to assure that qualified permy inquiry of the person or persons who matmation, the information submitted is, to the that there are significant penalties for submitted violations.	sonnel properly gather and ev nage the system, or those perso best of my knowledge and beli	raluate the information ons directly responsible ief, true, accurate, and

Signature of Authorized Representative