NCDEQ Division of Energy, Mineral and Land Resources

Stormwater Discharge Monitoring Report (DMR) Form for NCG110000 Treatment Works (WWTP > 1 MGD)

Click here for instructions

Complete, sign, scan and submit the DMR via the <u>Stormwater NPDES Permit Data Monitoring Report (DMR) Upload form</u> within 30 days of receiving sampling results. Mail the original, signed hard copy of the DMR to the <u>appropriate DEMLR Regional Office</u>.

Certificate of Coverage No. NCG11 Facility Name: Facility County:			Person Collecting Samples: Laboratory Name: Laboratory Cert. No.:			
Discharge	during this period: Yes No (if n	o, skip to signat	ure and date)			
Analytical I	Monitoring Requirements for Outfalls	with Industrial	Activities			
Parameter Code	Parameter	Outfall	Outfall	Outfall	Outfall	Outfall
N/A	Receiving Stream Class					
N/A	Date Sample Collected MM/DD/YYYY					
46529	24-Hour Rainfall in inches					
00400	pH in standard units					
CO610	Ammonia-Nitrogen in mg/L					
00552	Non-Polar Oil & Grease in mg/L					
CO530	Total Suspended Solids in mg/L					
NCOIL	New Motor/Hydraulic Oil Usage in gal/month					
Notes (opt	rianal):					
"I certify by my signature below, 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 on 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 fines and imprisonment for knowing violations."						
Original Sign	nature of Permittee or Delegated Auth	ıal	Da	Date		
Email Addre	ess		Ph	Phone Number		