



Significant Industrial User
Semi-Annual compliance report
July 20____ - December 20 ____

Facility Name _____

Facility Address _____

Authorized Contact Person _____

Title _____

Phone _____

	Daily Average Flow	Totalized Monthly Flow
July		
August		
September		
October		
November		
December		

Nature of wastewater discharged: Included with this form should be laboratory results from this compliance period if you have not already submitted them to our office.

Compliance Statement: Present discharges from this facility **ARE / ARE NOT (circle answer)** in compliance with applicable regulations as stated in your current ordinance and permit.

Certification Statement: I have personally examined and am familiar with the information submitted in this document and the laboratory results for this compliance period. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

Authorized Signature _____

Date _____

Print Name _____