

De Minimis Discharge Monitoring Report Form

SUBMIT TO:

Surface Water Section / De Minimis NOT
Arizona Department of Environmental Quality
1110 W. Washington, 5415A-1, Phoenix, AZ 85007

Authorization No.: AZDGP-_____ Permittee Name:_____

For reporting monitoring for any discharges that last continuously for longer than 4 days or release more than 500,000 gallons in any one day, or as required by ADEQ.

Discharge ID* _____ or Type of discharge* _____ if discharge is unspecified Location of Discharge Latitude: [] [] ° [] [] ' [] [] . [] [] " Long.: [] [] [] ° [] [] ' [] [] . [] [] " Specify test method used (if applicable) for each parameter →				Parameters Monitored (Fill in results for any required monitoring parameters below. If the parameter is not required mark "N/A")							
				Total Residual Chlorine in ug/l	Oil and Grease in mg/l	pH in s.u.	Turbidity in NTU	E.Coli in cfu	Total Dissolved Solids mg/l	Specify any required Constituents of Concern as defined in the De Minimis General Permit:	
Units:	Units:	Units:									
Discharge Date	Flow Rate (Max/Avg) (gal/min)	Duration of Flow (Hrs:min)	Volume discharged (GPD)								
Total volume discharged:				(Include total only on final page, if more than one sheet is used.)							

* Discharge ID and Type of Discharge are required only for Areawide, Project-wide, or Facility-wide authorizations. Enter Discharge ID as given on the Discharge Information forms submitted with the Areawide NOI. If the discharge is unspecified, indicate the type of discharge as listed in Table 2 of the Areawide NOI.

CERTIFICATION

"I certify 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 this system, or those persons directly responsible for gathering the information, I believe the information submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. In addition I certify that the operator will comply with all terms and conditions stipulated in General Permit No. AZG2010-001 issued by the Director."

Printed Name: _____ Title: _____ Phone: _____

Signature: _____ Date: _____