

NPDES # AL???????

???COMPANY NAME???

???FACILITY NAME???

???ADDRESS???

OUTFALL NUMBER 0??

??county?? County

Ptype 41

(???) ???-????

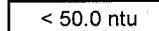
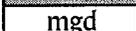
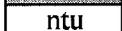
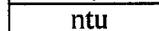
 = Data Not Required

Year 1st Qtr
Jan-Feb-Mar

2nd Qtr
Apr-May-Jun

3rd Qtr
Jul-Aug-Sep

4th Qtr
Oct-Nov-Dec

| | STANDARD LIMITS | | EFFLUENT FLOW * | Up-Stream Turbidity ** | Down-Stream Turbidity ** |
|---|-----------------|---|---|---|--|
| | PARAM | | | | |
| | MIN | 6.0 |  |  |  |
| | AVG | 35.0 |  |  |  |
| | MAX | 70.0 |  |  |  |
| | UNITS | s.u. mg/l | mgd | ntu | ntu |
| | FREQ | 2/mth 2/mth | 2/mth | 1/mth | 1/mth |
| D | | | | | |
| A | | | | | |
| T | | | | | |
| E | | | | | |
| S | | | | | |
| | Mth Avg |  |  |  |  |
| D | | | | | |
| A | | | | | |
| T | | | | | |
| E | | | | | |
| S | | | | | |
| | Mth Avg |  |  |  |  |
| D | | | | | |
| A | | | | | |
| T | | | | | |
| E | | | | | |
| S | | | | | |
| | Mth Avg |  |  |  |  |

Pump Discharge Point (Y/N)

Name of Permittee and/or Company(s) Collecting Samples And Performing Analyses.

I certify under penalty of law that this document and all attachments were prepared under my direction/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 fine and imprisonment for knowing violations.

Name & Title of Responsible Official _____

Signature _____

Date _____

* Instantaneous measure. Effluent flow must be monitored in mgd each time sample is obtained.
 ** See Permit. Upstream & downstream turbidity must be measured at the same time at least once per month during instream disturbance for each month within-bank operations are conducted.
 Refer to Part I,A. of the permit. At least one sample must be obtained and analyzed for pumped or mechanical discharges if a discharge occurred at any time during the quarterly (three month) monitoring period. If applicable, list minimum of two required inspection dates for each month and report "No Discharge During Entire Quarter".