

**INDUSTRIAL USER
PERIODIC COMPLIANCE REPORT
TEMPLE-BELTON REGIONAL SEWERAGE SYSTEM**

SECTION I: Industrial User Data

a) Company Name: _____

b) Mailing Address: _____

c) Street Address: _____

d) City: _____ State: _____ Zip: _____

e) Contact Person: _____ Title: _____

g) S.I.C. Number(s): _____

h) Permit No.: _____ Permit Expiration: _____

i) Industrial User Category:

Significant 40 CFR 403 Product/Industry Type: _____

Categorical 40 CFR _____

k) This report is submitted in accordance with requirements outlined in 40 CFR 403.12 for the reporting period beginning _____ and ending _____.
month/year month/year

l) "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 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."

Authorized Agent Signature

Date

SECTION II: Flow Measurement and Reporting (preceding 6 months)

	Total Discharge	Regulated Discharge (if applicable)
Method of Measure		
Maximum Daily Flow (gpd)		
Average Daily Flow (gpd)		

SECTION III: Self-monitoring summary (all analysis performed during the reporting period)

(a) Unit of measure: _____ mg/L _____ Other _____

(b) Analytical Summary (Attach copies of the "Collection Chain-of-Custody", results and other support data provided by the laboratory.)

Pollutant												
Units												
Daily Max.												
Mo. Avg.												
Sample Collection Date												
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Best Management Practices (BMP's) standards (are _____) (are not _____) being met on a consistent basis.
 Comments:

SECTION IV: Production Data - 40 CFR 403.12 (g)

Complete only if required by your control document, permit or contract.

Process Description (SIC Code)	Average	Maximum

SECTION V: Total Toxic Organic (T.T.O.)

(a) Are T.T.O. parameters included in your Control Document?

_____ Yes, go to (b)

_____ No, go to (d)

(b) Were analysis for T.T.O. performed during this reporting period?

_____ Yes, (include results with this report) go to (g)

_____ No, go to (c)

(c) Does your Company have an approved "Solvent Management Plan" or "Toxic Organic Management Plan (TOMP)"?

_____ Yes. Attach a copy if not previously submitted. Go to (f)

_____ No, go to (d)

(d) Does your company use any chemicals or solvents in your processes or store any on-site?

_____ Yes, attach copies of all "Material Safety Data Sheets (MSDS)" for all chemicals used (if not previously submitted). Go to (g).

_____ No, go to (e)

(e) I certify that no Toxic Organics are used in our process operations or stored on these premises.

Signature

(f) I further certify that this facility is implementing the TOMP submitted to and approved by the Control Authority. Go to (g).

Signature

(g) "Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation [or Pretreatment Standards] for Total Toxic Organic (T.T.O.), I certify that, to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewater has occurred since filing of the last discharge monitoring report."

Signature