



City of Columbia Regulated Industrial Wastewater Discharge Monitoring Report Form
DMR

Flow:

Permitted Condition:

Reported From Sampling

Maximum GPD: _____

Maximum GPM: _____

(Attach record of all daily flows that exceed the daily permitted flow.)

Compliance: YES

NO

Sample Date(s): _____

Analysis Date(s): _____

Sample Time(s): _____

Analysis By: _____

Sample Type: _____

Receipt Date(s): _____

Sampled By: _____

Receipt By: _____

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 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, 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.

Date

Signature of Principal Executive Officer or
Authorized Agent