



Industrial Waste Monthly Self-Monitoring Report

Page ____ of ____
(use multiple sheets if needed)

Send to: DeKalb County
Industrial Pretreatment Program
180 Sams Street Suite B1200
Decatur, Georgia 30030 Phone: (404) 294.2192
Email: IPP@DeKalbcountyga.gov

Company Name: _____ Permit No.: _____ Discharge: _____
Please Specify Reporting Month & Year: Month _____ Year _____ No.: _____

All units are mg/L unless otherwise noted (units reported are to be the same as listed in the permit). This form is available at www.dekalbcountyga.gov/watershed-management/IPP
Complete laboratory reports must be attached. Report must be hand signed by duly authorized official. Electronic signatures will not be accepted and will result in the rejection of the self-monitoring-report.

Sample Date	Sample Type	pH													Daily Flow (GPD*) Industrial	Notes	
	C (Composite) G (Grab) BC (Batch)	Min	Max													(Indicate Batch Discharges)	
1																	
2																	
3																	
4																	
5																	
6																	
7																	
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27																	
28																	
29																	
30																	
31																	
Monthly Min pH																Total Monthly Flow (gallons)	
Monthly Max pH																Average Daily Flow	

Please circle all permit violations