

**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF ENVIRONMENTAL QUALITY
PETROLEUM DISCHARGE PERMIT
DISCHARGE MONITORING REPORT(DMR)**

DEPT. OF ENVIRONMENTAL QUALITY
(REGIONAL OFFICE)

PERMITTEE NAME/ADDRESS(INCLUDE
FACILITY NAME/LOCATION IF DIFFERENT)

NAME
ADDRESS

FACILITY
LOCATION

VAG83	
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS
BEFORE COMPLETING THIS FORM

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
001 FLOW	REPORTED	*****			*****	*****	*****				
	REQUIREMENT	*****	NL	GPD	*****	*****	*****			1/M	EST
002 PH	REPORTED	*****	*****			*****					
	REQUIREMENT	*****	*****		6.0	*****	9.0	SU		1/M	GRAB
137 HARDNESS, TOTAL (AS CaCO3)	REPORTED	*****	*****			*****	*****				
	REQUIREMENT	*****	*****		NL	*****	*****	mg/L		1/M	GRAB
146 ETHANOL	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	4100.0	ug/L		1/M	GRAB
172 ETHYLBENZENE	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	4.3	ug/L		1/M	GRAB
216 BENZENE (AS C6H6)	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	12.0	ug/L		1/M	GRAB
222 TOLUENE (AS C7H8)	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	43.0	ug/L		1/M	GRAB
233 LEAD, TOTAL RECOVERABLE	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****		ug/L		1/M	GRAB

Additional DMR Comments:

BYPASSES AND OVERFLOWS	TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)	OPERATOR IN RESPONSIBLE CHARGE			DATE			
				TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY	
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.				PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE				
				TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY	
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
260 1,2-DICHLOROETHANE	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	3.8	ug/L		1/M	GRAB
331 METHYL-TERT-BUTYL ETHER	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	440.0	ug/L		1/M	GRAB
537 ETHYLENE DIBROMIDE	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	1.9	ug/L		1/M	GRAB
745 TOTAL XYLENES	REPORTED	*****	*****		*****	*****					
	REQUIREMENT	*****	*****		*****	*****	33.0	ug/L		1/M	GRAB
	REPORTED										
	REQUIREMENT										
	REPORTED										
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