



Spartanburg Water Industrial User Monthly Flow Report

Industry Name: _____

Permit #: _____ Permitted Flow: _____

Month and Year: _____ Multiplier X: _____

Date	Totalizer Reading	Daily Discharge (gpd)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		
Total		
Average		

I, _____ (print name), 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 upon my inquiry of the person or person who manage the system, or those persons directly responsible for gathering the information, the information 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 fines and/or imprisonment for knowing violations.

Signature and Title of Authorized Representative

Date Signed

Please note: Form to be submitted to your Industrial Pretreatment Representative by the 15th of each month by fax or email.