

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard • Baltimore MD 21230
410-537-3000 • 1-800-633-6101 • <http://www.mde.state.md.us>

WATER MANAGEMENT ADMINISTRATION REMOVED SUBSTANCES REPORTING FORM

INSTRUCTIONS: Use this form to report the disposal of substances resulting from (1) treatment of wastewater and (2) related manufacturing processes as required by the State of Maryland "Water Quality and Water Pollution Control Regulations", COMAR 26.08.01. Use a separate form for each waste that is disposed of in a different manner. If several wastes are mixed before disposal, each waste must be separately described regardless of the quantity. NOTE: Submission of this form in no way relieves the sender of any requirement to file periodic reports regarding the disposition of Controlled Hazardous Substances as required State of Maryland Regulation "Disposal of Controlled Hazardous Substances". COMAR 26.13.01.

1. Discharge Permit Number: _____
2. Name of Facility: _____
3. Facility Mailing Address: _____

(Zip) _____
4. Facility Location (if different from Item 3) _____

(Zip) _____
5. Facility Contact (Name and Phone Number) _____
6. DESCRIBE the nature of the removed substance.

7. DESCRIBE the treatment process or the manufacturing process that generates the removed substance (precipitation, settling, etc.)

8. DESCRIBE the physical character of the removed substance (liquid, solid, sludge, etc.).

_____ If sludge, what percent solids? _____

Is a chemical analysis attached? _____ Yes _____ No



MARYLAND DEPARTMENT OF THE ENVIRONMENT

9. QUANTITY of removed substance _____ Measured _____ Estimated _____
Liquids: Average gallons/week _____ Maximum gallons/week _____
Solids or Sludges: Average tons/week _____ Maximum tons/week _____
10. MEANS OF DISPOSAL: _____ On-Site (at facility location) _____ Off-site
11. WASTE HAULER (Name): _____
(Address) _____

12. DISPOSAL SITE (If not On-Site) _____

13. OTHER (If wastes are stored on-site, describe method of storage, type of container, storage area, pretreatment, etc.).

14. MAP - Attach a copy of a suitable map showing the location of the disposal or storage site. The map must show all waterways within 1/2 mile of the disposal site.
15. CERTIFICATION - I hereby certify that the information on this form and the attachments hereto are true and accurate to the best of my knowledge and belief.
- _____
Signature of Permittee or Agent
- _____
Date
- _____
Printed Name & Title of Permittee or Agent

SEND TO: Maryland Department of the Environment, Water Management Administration,
Wastewater Permits Program, 1800 Washington Boulevard, Baltimore, MD 21230.