



Limited Discharge Monthly Self-Monitoring Report

Submit to: City of Lynnwood
Public Works / Pretreatment Program
20816 44th Ave W Suite 230, Lynnwood, WA 98036
Phone: (425) 670-5221
Email: bemry@lynnwoodwa.gov

Industrial User		Facility Address			
Limited Discharge Permit #					
Date	Discharge Flow (gpd)	Turbidity (NTU)	Settleable Solids (mL/L)	Initials	

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 known violations. I further certify that all data requiring a laboratory analysis were analyzed by a Washington State Department of Ecology accredited laboratory for each parameter tested.

Signature of Principal Executive or Authorized Agent		Date	
---	--	-------------	--