NCDEQ Division of Energy, Mineral and Land Resources

Stormwater Discharge Monitoring Report (DMR) Form for NCG080000

Transit and Transportation

Click here for instructions

Complete, sign, scan and submit the DMR via the <u>Stormwater NPDES Permit Data Monitoring Report (DMR) Upload form</u> within 30 days of receiving sampling results. Mail the original, signed hard copy of the DMR to the <u>appropriate DEMLR Regional Office</u>.

This DMR form is only applicable to stormwater discharges from the following areas that have been specifically designated by the Division as subject to the requirements of Part F-1 and brought under NCG080000: (1) oil water separators (2) containment structures at petroleum bulk stations and terminals with a total petroleum storage capacity of less than 1 million gallons (3) other stormwater discharges specifically designated. For stormwater discharges associated with vehicle maintenance areas at categorically captured facilities under NCG080000, please use the standard NCG080000 DMR form.

| Certificate of Coverage No. NCG08 | Person Collecting Samples: | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--|--|--|--|
| Facility Name: | Laboratory Name: | | | | |
| Facility County: | Laboratory Cert. No.: | | | | |
| Discharge during this period: Yes No (if no, skip to signature and date) | | | | | |
| Has your facility implemented mandatory Tier response actions this sample period for any benchmark exceedances? 🗌 Yes 🔲 No | | | | | |
| If so, which Tier (I, II, or III)? | | | | | |
| A copy of this DMR has been uploaded electronically via https://edocs.deq.nc.gov/Forms/SW-DMR | | | | | |
| Date Uploaded: | | | | | |

Analytical Monitoring Requirements for Oil/Water Separators and Secondary Containments Areas at Bulk Stations & Terminals (Those Designated and Brought Under NCG080000) – Effluent Limits in (Red)

| Parameter | Parameter | Outfall | Outfall | Outfall | Outfall | Outfall |
|-----------|-----------------------------------------------------------------|---------|---------|---------|---------|---------|
| Code | Parameter | Outian | Outrail | Outrail | Outian | Outian |
| N/A | Receiving Stream Class | | | | | |
| N/A | Date Sample Collected MM/DD/YYYY | | | | | |
| 46529 | 24-Hour Rainfall in inches | | | | | |
| CO530 | TSS in mg/L (100 or 50*) | | | | | |
| 00552 | Non-Polar Oil & Grease in mg/L (15) | | | | | |
| 00400 | pH in standard units (6.0 – 9.0 FW, 6.8 – 8.5) | | | | | |

* Outfalls to Outstanding Resource Waters (ORW), High Quality Waters (HQW), Trout Waters (Tr) and Primary Nursery Areas (PNA) have a benchmark TSS limit of 50 mg/L. All other water classifications have a benchmark of 100 mg/L

FW (Freshwater) SW (Saltwater)

| Notes (optional): | |
|-------------------|--|
| | |

"I certify by my signature below, 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 fines and imprisonment for knowing violations."

| Signature of | Permittee | or Delegated | Authorized | Individual |
|--------------|-----------|--------------|------------|------------|
|--------------|-----------|--------------|------------|------------|

Date

Email Address

Phone Number