General Permit for the Discharge of Stormwater Associated with Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
Sector I-Ship & Boat Building & Repair

Facility Information

Permittee Name: _____ Site Name: _____

Mailing Address: _____

Contact Person: _____ Title: _____

Business Phone: _____ ext.: _____ Email: _____

Site Address: _____

Receiving Water (name/basin): _____

Permit #: GSI _____ Primary SIC: _____

Discharges into an Impaired Waterbody: Yes ☐ No ☐ (If yes, complete the table on page 3 of this form)

Sample Information

Sample Location: _____ Person Collecting Sample: _____

Date/Time Collected: _____ Date of Previous Storm Event: _____

This report is for samples required: Semi-annually ☐ Annually ☐ Other ☐

Check here if the sample contains **snow or ice melt**: ☐

Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual		5.0 mg/L	☐		
Rainfall pH	Semi-annual		n/a			
Sample pH	Semi-annual		5-9 SU	☐		
COD	Semi-annual		75 mg/L	☐		
TSS	Semi-annual		90 mg/L	☐		
TP	Semi-annual		0.40 mg/L	☐		
TKN	Semi-annual		2.30 mg/L	☐		
NO_3-N	Semi-annual		1.10 mg/L	☐		
Total Copper	Semi-annual for the entire permit term		n/a			
Total Zinc	Semi-annual		0.160 mg/L	☐		
Total Lead	Semi-annual		0.076 mg/L	☐		
24 Hr. LC_{50}	Annual-Year 1&2		n/a			
48 Hr. LC_{50}	Annual-Year 1&2		n/a			

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

_____

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name:	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: *Daphnia pulex* < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (^{o}C)			pH (su)		
Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1												
CONTROL 2												
CONTROL 3												
CONTROL 4												
6.25% A												
6.25% B												
6.25% C												
6.25% D												
12.5% A												
12.5% B												
12.5% C												
12.5% D												
25% A												
25% B												
25% C												
25% D												
50% A												
50% B												
50% C												
50% D												
100% A												
100% B												
100% C												
100% D												

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC_{50}
Daphnia pulex				

Additional Monitoring for Discharges to Impaired Waters (if applicable)

Parameter	Required	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

Signature of Permittee	Date
Name of Permittee (print or type)	Title (if applicable)
Signature of Preparer (if different than above)	Date
Name of Preparer (print or type)	Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

General Permit for the Discharge of Stormwater Associated with Industrial Activity, effective 10/1/2011

Data Tracking Sheet

Sector I- Ship & Boat Building & Repair

Permittee Name: _____ Permit #: GSI _____

Site Name: _____

Site Address: _____

Sample Location: _____

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location in the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4. ***Only monitoring collected under the current permit (effective 10/1/11,) can be used to earn the monitoring exemption.***

Average =(Sample 1+ Sample 2 + Sample 3 + Sample 4)
4

	Sample Result						
Parameter	1	2	3	4	Average	Benchmark*	Qualify for exemption?
Sample Date							
O&G						5.0 mg/L	
Sample pH						5-9 S.U.	
COD						75 mg/L	
TSS						90 mg/L	
TP						0.40 mg/L	
TKN						2.30 mg/L	
NO_3-N						1.10 mg/L	
Total Zinc						0.160 mg/L	
Total Lead						0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit. There is no monitoring exemption for copper for this sector. Facilities in this sector must monitor for copper semi-annually for the entire permit.

If the average of the four (4) most resent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1.If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample results reported by the testing laboratory are below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) for a more detailed explanation.