

Filling out and submitting an NPDES  
**Discharge Monitoring Report (DMR)**  
for Construction Dewatering Discharges

A step-by-step guide

# Quick Facts About DMRs

Mail packages to:

DOH Clean Water Branch  
Hale Ola Room 225  
2827 Waimano Home Road  
Pearl City, HI 96782

## How Often?

- DMRs are required **monthly** for projects covered under an NPDES General Permit (Appendix G) or Individual Permit for Construction Dewatering Discharges.

## Due When?

- Monitoring results from one month must be postmarked or received by the Department of Health (DOH) by the 28<sup>th</sup> day of the following month.
- Example: monitoring performed in June must be submitted by July 28.

## No Discharge?

- Submit a DMR even if there are no discharges during the monitoring period.

## Multiple Discharges?

- If there is more than one discharge in a single month, report the monthly minimum, maximum and averages for each parameter. For pH, only report monthly minimum and maximum.
- For continuous discharge, the sample shall be taken at least once per week.

# Quick Facts About DMRs

Mail packages to:

DOH Clean Water Branch  
Hale Ola Room 225  
2827 Waimano Home Road  
Pearl City, HI 96782

## Original Signatures

- DMRs and the DOH certification letter require original signatures from either the Certifying Person or Authorized Rep.
- Be sure to give yourself time to get signatures!
- Submitting both forms together for signatures will reduce routing time and allow for faster submissions.

## The following submissions must be made for all reports:

1. Electronic Submission on DOH-CWB's E-Permitting Portal; AND
2. Hard copy package mailed to DOH including:
  - i. Signed DMR with wet signature
  - ii. Signed certification form from the E-Permitting Portal
  - iii. A CD/DVD or thumb drive with scanned copies of i and ii

# Part 1: Filling Out the DMR

Have the following documents ready:

- NPDES Permit or Notice of General Permit Coverage (NGPC)
- Notice of Intent (NOI) for the Project
- Lab Results

# Downloading a DMR

Download a blank DMR from the DOH website:

<https://health.hawaii.gov/cwb/files/2017/08/Blank-DMR-Form.pdf>

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME

ADDRESS

FACILITY  
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
---------------	------------------

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM			TO		

Check here if No Discharge


NOTE: Read Instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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 KNOWING VIOLATIONS.						TELEPHONE		DATE	
TYPED OR PRINTED								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

# Permittee & Facility Information (from the NGPC)

DAVID Y. IGE  
GOVERNOR OF HAWAII



BRUCE S. ANDERSON, Ph.D.  
DIRECTOR OF HEALTH

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P. O. BOX 3378  
HONOLULU, HI 96801-3378

In reply please refer to:  
EHC/CHS

73HP180.FNL.19

July 31, 2019

Professor Albus Dumbledore  
Headmaster

1 Hogwarts School of Witchcraft and Wizardry  
2 Platform 9 ¾  
Euston Rd., Kings Cross, London, UK

Dear Professor Dumbledore:

**Subject: NOTICE OF GENERAL PERMIT COVERAGE (NGPC)**  
**National Pollutant Discharge Elimination System (NPDES)**  
 3 **Quidditch Stadium Emergency Repairs**  
**Hogwarts Castle, Highlands, Scotland, Great Britain**  
 5 **File No. HI 73HP180**

This letter is to notify you that the HOGWARTS SCHOOL OF WITCHCRAFT AND QUIDDITCH STADIUM (hereinafter PERMITTEE) is now covered under the NPDES Permit authorizing discharges associated with construction activity dewatering. This general permit authorizes you to discharge only associated with construction dewatering to the receiving State waters discharge point(s) identifies in the Notice of Intent (NOI), dated March 1, 2019 (received on March 10, 2019), provided that you comply with Hawaii Administrative Rules (HAR) 11-54; HAR 11-55, Appendix A; HAR 11-55 and the information submitted in the NOI. All other pollutant discharges to State waters not authorized by this NPDES General Permit, HAR 11-54 and 11-55 are prohibited.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved, OMB No. 2040-0004

PERMITTEE NAME: ADDRESS (Include Facility Name/Location if Different)

ADDRESS

FACILITY LOCATION

PERMIT NUMBER: DISCHARGE NUMBER:

MONITORING PERIOD FROM YEAR MO DAY TO YEAR MO DAY

Check here if No Discharge

NOTE: Read Instructions before completing this form

15 PARAMETER	QUANTITY OR LOADING	QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE			
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
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PERMIT REQUIREMENT								
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: 9

10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

11 TELEPHONE AREA CODE NUMBER

12 DATE YEAR MO DAY

13 COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

14

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# Facility Information (from the NOI)



Be sure to use the *physical*, not mailing address



**CWB NOI Form**  
version 1.6

(Submission #: HJP-MG7M-APWBD, version 1)

PRINTED ON 3/1/2019

**Summary**

Submission #: HJP-MG7M-APWBD      Date Submitted: 3/1/2019 12:04 PM

## Section 4. Facility/Project Information

**4. Facility/Project Information**  
Enter the Facility or Project Name

The Facility or Project Name will appear on all correspondence, official files, and permits.

**Facility or Project Name**  
Quidditch Stadium Emergency Repairs

**Provide the Mailing Address**  
The mailing address may be the mailing address of the facility's or project's contact person.

**Mailing Address**  
~~Plattin 9 ¼  
Euston Rd., Kings Cross, London, UK~~

**Provide the Street Address**  
The street address is the facility or project location with respect to identifiable street names or adjacent de northwest corner of 1st Street and X Avenue).

**Street Address (i.e. the location of the project or facility)**  
5298 Hogwarts Drive **4**

Not this! This is the mailing address!

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)      NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)      Form Approved, OMB No. 2040-0004

ADDRESS **2**      PERMIT NUMBER **5**      DISCHARGE NUMBER **6**

FACILITY LOCATION **3**      MONITORING PERIOD FROM YEAR **7** MO DAY TO YEAR MO DAY       Check here if No Discharge **8**

NOTE: Read Instructions before completing this form

15	PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER **9**      SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT **10**      TELEPHONE **11**      DATE **12**

TYPED OR PRINTED      COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) **13**      AREA CODE      NUMBER      YEAR      MO      DAY

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# Discharge Points (from the NOI)



In this case, only one Discharge Point is listed and authorized by the permit.

"BL 1" may be inputted into item 6

Note: If multiple Discharge Points were listed, prepare a DMR for each point.



Discharge Point label 6  
BL 1

**CWB NOI Form**  
version 1.6

(Submission #: HJP-MG7M-APWBD, version 1)

PRINTED ON 3/1/2019

**Summary**

Submission #: HJP-MG7M-APWBD      Date Submitted: 3/1/2019 12:04 PM

## Section 6. Receiving State Water(s) Information

**Receiving State Waters Name**  
The Black Lake

Select the receiving State water CLASSIFICATION:

Classifications are defined in HAR, Chapter 11-54 and on the Water Quality Standards Maps available on the Maps are provided for general information only and are to be used in conjunction with HAR, Chapter 11-54, Chapter 11-54.

HAR, Chapter 11-54

The Water Quality Standards Maps can be found by clicking on the link below.  
[Water Quality Standards Maps](#)

**Receiving State Water Classification**  
Class 2, Estuary

Coordinates of the Discharge Point into State waters

Provide the coordinates of the discharge point (in decimal degrees) where discharge from the facility or coast. If the discharge first enters a storm drainage system, provide the discharge point coordinates for the outfall waters. If the storm water discharge enters the receiving State water as a sheet flow, provide the coordinates Type: Discharge Point 1 (From) Latitude 21.274685 N, Longitude 158.012768 W (Click the "+" button in the Then type: Discharge Point 1 (To) Latitude 21.304811N, Longitude 158.022721 W

Properly label the discharge points with numbers (i.e., Discharge Point No. 1, Discharge Point No. 2, etc.) which chart(s) submitted.

**Discharge Point**  
21.276614954282376,-157.81690926397403

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)      PERMIT NUMBER 5      DISCHARGE NUMBER 6

ADDRESS 2

FACILITY LOCATION 3      MONITORING PERIOD FROM YEAR 7 MO DAY TO YEAR MO DAY       Check here if No Discharge 8

NOTE: Read Instructions before completing this form

15	PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 9      TELEPHONE 10      DATE 12

TYPED OR PRINTED      SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 11      AREA CODE      NUMBER      YEAR      MO      DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 13

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# Discharge Information

- 7 Monitoring Period: The month that your samples were taken, from the first day of the month to the last day.

Format: Year – Month – Day to Year – Month – Day

- 8 If you didn't discharge any dewatering effluent to a state water in the month, you still need to submit a DMR, but with this box checked off to show "No Discharge".

1 PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME

2 ADDRESS

3 FACILITY LOCATION

4 LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)

5 PERMIT NUMBER

6 DISCHARGE NUMBER

7 MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
19	09	01	19	09	30

FROM TO

Form Approved.  
 OMB No. 2040-0004

8  Check here if No Discharge

NOTE: Read Instructions before completing this form

15 PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 KNOWING VIOLATIONS.	TELEPHONE		DATE	
9 TYPED OR PRINTED		10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	11 AREA CODE NUMBER	12 YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

# Who Can Sign (from the NOI)

## 9 Name/Title of Principal Executive Officer

This is the printed name of the Certifying Person or Duly Authorized Representative. *Only they may sign to certify that the DMR is truthful.*

## 10 This is where the Certifying Person or the Duly Authorized Representative signs the DMR, to certify that the info on the DMR is truthful

## 12 Date that the Certifying Person or Authorized Representative signed the DMR

### Section 2. Owner Information

9 **Certifying Person First Name**  
Albus

**Certifying Person Last Name**  
Dumbledore

**Certifying Person Title**  
Headmaster

**Certifying Person Email Address**  
dumbledore@hog.edu

11 **Certifying Person Phone Number (e.g., 555-555-5555)**  
345-748-4950

### Section 8. Authorized Representative

9 **Authorized Representative First Name**  
Minerva

**Authorized Representative Salutation**  
Ms.

**Authorized Representative Last Name**  
McGonagall

**Authorized Representative Email Address**  
mcgonagall@hog.edu

11 **Authorized Representative Phone (e.g., 555-555-5555)**  
345-748-4951

Form Approved  
OMB No. 2040-0004

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME 1

ADDRESS 2

FACILITY LOCATION 3 4

PERMIT NUMBER 5

DISCHARGE NUMBER 6

MONITORING PERIOD 7

FROM YEAR MO DAY TO YEAR MO DAY

8  Check here if No Discharge

NOTE: Read instructions before completing this form

15 PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS				
SAMPLE MEASUREMENT	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
SAMPLE MEASUREMENT	PERMIT REQUIREMENT											
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	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 9

10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 11

DATE 12

13 COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

14

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# Other Information

13 If you have comments, you can input them here. Comments may also be discussed on a cover letter. Examples: exceedances, sampling or lab errors, lab notes, corrective actions, etc.

14 Page Number of your DMR (if reporting multiple discharge points).

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

1 PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME

2 ADDRESS

3 FACILITY LOCATION

4 LOCATION

5 PERMIT NUMBER

6 DISCHARGE NUMBER

7 MONITORING PERIOD  
FROM YEAR MO DAY TO YEAR MO DAY

8  Check here if No Discharge

NOTE: Read Instructions before completing this form

15 PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
	SAMPLE MEASUREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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 KNOWING VIOLATIONS.						TELEPHONE		DATE	
9 TYPED OR PRINTED								10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

13 Example Comment: "Lab had an error. See cover letter."

14 1 of 3

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# Information from the NGPC and Lab Results

Use the following to fill out the Parameter table on the DMR:

15 Table 1 and its notes from the NGPC to fill out the *Permit Requirement Sections*

And

Lab results to fill out the *Sample Measurement Sections*

discharge to state waters.  
4. The discharge of construction activity dewatering shall be monitored by the Permittee as specified below:

15

Dewatering Effluent Limitations and Monitoring Requirements				
Effluent Parameter	Discharge Limitations {1}	Units	Measurement Frequency	Sample Type
Quantity of Discharge	{2}	GPD	{3}	Calculated or Estimated
Total Suspended Solids	80.0*	mg/l	{4}	Grab
	55.0**			
Turbidity	25.0*	NTU	{4}	Grab
	10.0**			
pH	5.5-8.0	Standard Units	{4}	Grab {6}
Oil and Grease	15.0	mg/l	{4}	Grab {5}

### NOTES:

- {1} - Pollutant levels exceeding discharge limitations shall be reported to the Director 24 hours after the Permittee becomes aware of the results. The Permittee shall report to the Director with an explanation of the pollutant origin. Monitoring results shall be reported on the Discharge Monitoring Report (DMR) form.
- {2} - Report. Monitoring and reporting is required only.
- {3} - For intermittent discharges, flow measurement shall be taken once for each duration of the discharge. For continuous discharge, continuous flow measurement is required.
- {4} - For intermittent discharges, the sample shall be taken once for each discharge. For continuous discharge, the sample shall be taken at least once per week.
- {5} - Oil and Grease shall be measured by the EPA Method 1664, Revision A.
- {6} - The Permittee shall measure pH within 15 minutes of obtaining the grab sample.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) Form Approved, OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) ADDRESS FACILITY LOCATION

PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD FROM TO

Check here if No Discharge

NOTE: Read instructions before completing this form

PARAMETER	QUANTITY OR LOADING	QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE			
15								
	SAMPLE MEASUREMENT							
	PERMIT REQUIREMENT							
	SAMPLE MEASUREMENT							
	PERMIT REQUIREMENT							
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	PERMIT REQUIREMENT							
	SAMPLE MEASUREMENT							
	PERMIT REQUIREMENT							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE

TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

See the next page for an example DMR.

# Set up a template

Tip: You can fill in this information once and use it as a template for future DMRs!

Form Approved.  
OMB No. 2040-0004

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

1 PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME Hogwarts School of Witchcraft and

2 ADDRESS Wizardry  
Platform 9 3/4  
Euston Rd., Kings Cross, London, UK

3 FACILITY LOCATION  
Quidditch Stadium Emergency Repairs  
5298 Hogwarts Drive

5 HI 73HP180 PERMIT NUMBER

6 BL 1 DISCHARGE NUMBER

7 MONITORING PERIOD  
FROM YEAR MO DAY TO YEAR MO DAY

8  Check here if No Discharge

NOTE: Read Instructions before completing this form

15 PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Quantity of Discharge	SAMPLE MEASUREMENT			GPD							
	PERMIT REQUIREMENT									1/Dis	Est
Total Suspended Solids	SAMPLE MEASUREMENT							mg/l			
	PERMIT REQUIREMENT					55.0				1/Dis	Grab
Turbidity	SAMPLE MEASUREMENT							NTU			
	PERMIT REQUIREMENT					10.0				1/Dis	Grab
pH	SAMPLE MEASUREMENT							Standard Units			
	PERMIT REQUIREMENT					5.5 MIN	8.0 MAX			1/Dis	Grab
Oil and Grease	SAMPLE MEASUREMENT							mg/l			
	PERMIT REQUIREMENT					15.0				1/Dis	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Minerva McGonagall

9 TYPED OR PRINTED

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 KNOWING VIOLATIONS.

10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

11 TELEPHONE  
345 748-4951

12 DATE

AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

13

14

# Example DMR


Use your lab results to fill out the "Sample Measurement" sections.

If there is more than one discharge in a single month, report the monthly maximum, monthly minimum, and monthly average values for each parameter on the discharge monitoring report.

For pH, only report monthly minimum and maximum.

For intermittent discharges, samples should be collected for each discharge.

For a continuous discharge, samples should be taken weekly.

 12 Mungos St., London, UK  
Telephone: 345-748-4952  
Fax: 345-748-4953  
Email: contact@aguamenti.com

CLIENT: Borgin & Burkes  
13 Knocktum Alley  
Knocktum Alley, UK

ATTENTION: Mr. Borgin 345-748-1313

**AGUAMENTIREPORT OF ANALYTICAL RESULTS**


SAMPLE TYPE: Stream water      AG No. \_\_\_\_\_

DATE SAMPLED: 09/04/19      DA \_\_\_\_\_

PROJECT: Quidditch Stadium Emergency Repairs, Hogwarts

SAMPLE ID ⇒	Water Quality Sample	Reporting Limit
ANALYTE #	0948-0950	
Temperature (°C)	23.0	0.1
pH	7.81	0.1
Dissolved Oxygen (mg/L)	7.70	0.01
Dissolved Oxygen (% saturation)	90	1
Conductivity (µmhos/cm)	871	10
Turbidity (NTU)	0.73	0.01
Total Suspended Solids (mg/L)	1.0	0.1
Oil & Grease (mg/L)	2.0	1.0 / 0.80
Ammonia (µg N/L)	77	50 / 8.6
Nitrate + Nitrite (µg N/L)	581	100 / 29
Total Nitrogen (µg N/L)	900	100
Total Phosphorus (µg P/L)	120	50 / 20
Chlordane (µg/L)	<-0.38	1.1 / 0.38
Dieldrin (µg/L)	<-0.032	0.11 / 0.032

*Gabrielle Delacour*  
G. Delacour, Laboratory Director

 12 Mungos St., London, UK  
Telephone: 345-748-4952  
Fax: 345-748-4953  
Email: contact@aguamenti.com

CLIENT: Borgin & Burkes  
13 Knocktum Alley  
Knocktum Alley, UK

ATTENTION: Mr. Borgin 345-748-1313

**AGUAMENTIREPORT OF ANALYTICAL RESULTS**


SAMPLE TYPE: Stream water      AG No. \_\_\_\_\_

DATE SAMPLED: 09/06/19      DA \_\_\_\_\_

PROJECT: Quidditch Stadium Emergency Repairs, Hogwarts

SAMPLE ID ⇒	Water Quality Sample	Reporting Limit
ANALYTE #	0948-0950	
Temperature (°C)	23.0	0.1
pH	7.78	0.1
Dissolved Oxygen (mg/L)	7.70	0.01
Dissolved Oxygen (% saturation)	90	1
Conductivity (µmhos/cm)	871	10
Turbidity (NTU)	0.71	0.01
Total Suspended Solids (mg/L)	0.5	0.1
Oil & Grease (mg/L)	1.1	1.0 / 0.80
Ammonia (µg N/L)	77	50 / 8.6
Nitrate + Nitrite (µg N/L)	580	100 / 29
Total Nitrogen (µg N/L)	900	100
Total Phosphorus (µg P/L)	120	50 / 20
Chlordane (µg/L)	<-0.38	1.1 / 0.38
Dieldrin (µg/L)	<-0.032	0.11 / 0.032

*Gabrielle Delacour*  
G. Delacour, Laboratory Director

 12 Mungos St., London, UK  
Telephone: 345-748-4952  
Fax: 345-748-4953  
Email: contact@aguamenti.com

File No: 1212  
REPORT DATE: 09/19/19  
PAGE: 1 of 2

CLIENT: Borgin & Burkes  
13 Knocktum Alley  
Knocktum Alley, UK

ATTENTION: Mr. Borgin 345-748-1313

**AGUAMENTIREPORT OF ANALYTICAL RESULTS**

SAMPLE TYPE: Stream water      AGUAMENTI LOG No.: 70023

DATE SAMPLED: 09/16/19      DATE RECEIVED: 09/16/19

PROJECT: Quidditch Stadium Emergency Repairs, Hogwarts Castle, Highlands, Scotland, Great Britain

SAMPLE ID ⇒	Water Quality Sample	Reporting Limit	Method Number	Analysis Date
ANALYTE #	0948-0950			Analyst ID
Temperature (°C)	23.5	0.1	YSI ProPlus / SM2350B (1998)	Field (cl, bl)
pH	7.63	0.1	SM4500 H+ (1998)	Field
Dissolved Oxygen (mg/L)	7.69	0.01	YSI ProPlus / SM4500-O G (1998)	Field
Dissolved Oxygen (% saturation)	90	1	---	Field
Conductivity (µmhos/cm)	871	10	YSI ProPlus / SM 2510B (1998)	Field
Turbidity (NTU)	0.70	0.01	EPA 180.1 Rev. 2.0 (1993)	12/07/18 ml
Total Suspended Solids (mg/L)	0.7	0.1	SM 2540D (1998)	12/10/18 ml
Oil & Grease (mg/L)	1.2	1.0 / 0.80	EPA 1664A	12/14/18 EC
Ammonia (µg N/L)	77	50 / 8.6	EPA 350.1	12/12/18 EC
Nitrate + Nitrite (µg N/L)	582	100 / 29	SM4500 NO3E	12/10/18 EC
Total Nitrogen (µg N/L)	900	100	Calc. EPA 351.2 + SM4500 NO3E	12/17/18 EC
Total Phosphorus (µg P/L)	120	50 / 20	EPA 365.1	12/12/18 EC
Chlordane (µg/L)	<-0.38	1.1 / 0.38	EPA 608	12/10-12/18 EC
Dieldrin (µg/L)	<-0.032	0.11 / 0.032	EPA 608	12/10-12/18 EC

*Gabrielle Delacour*  
G. Delacour, Laboratory Director

Eurofins Calcience Work Order Number(s): 18-12-0786

# Example DMR

Use your lab results to fill out the "Sample Measurement" sections.

If there is more than one discharge in a single month, report the monthly maximum, monthly minimum, and monthly average values for each parameter on the discharge monitoring report.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Hogwarts School of Witchcraft and  
ADDRESS Wizardry  
Platform 9 3/4  
Euston Rd., Kings Cross, London, UK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

HI 73HP180 BL 1  
PERMIT NUMBER DISCHARGE NUMBER

FACILITY LOCATION  
Quidditch Stadium Emergency  
Repairs  
5298 Hogwarts Drive

MONITORING PERIOD  
FROM 19 09 01 TO 19 09 30

Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS				
Quantity of Discharge	SAMPLE MEASUREMENT	300		GPD								
	PERMIT REQUIREMENT									1/Dis	Est	
Total Suspended Solids	SAMPLE MEASUREMENT				0.5 (MIN)	0.73 (AVG)	1.0 (MAX)	mg/l				
	PERMIT REQUIREMENT						55.0			1/Dis	Grab	
Turbidity	SAMPLE MEASUREMENT				0.70 (MIN)	0.71 (AVG)	0.73 (MAX)	NTU				
	PERMIT REQUIREMENT						10.0			1/Dis	Grab	
pH	SAMPLE MEASUREMENT				7.63 (MIN)		7.81 (MAX)	Standard Units				
	PERMIT REQUIREMENT				5.5 MIN		8.0 MAX			1/Dis	Grab	
Oil and Grease	SAMPLE MEASUREMENT				1.1 (MIN)	1.4 (AVG)	2.0 (MAX)	mg/l				
	PERMIT REQUIREMENT						15.0			1/Dis	Grab	
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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 KNOWING VIOLATIONS.						TELEPHONE		DATE		
Minerva McGonagall								345 748-4951		19	09	20
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Total Suspended Solids and Turbidity Limitations are based on dry season.

# Part 2: Submitting the DMR on the E-Permitting Portal

Have the following documents ready:

- NPDES Permit or NGPC
- Completed DMR from Part 1 of this guide

# Step 1

<http://eha-cloud.doh.hawaii.gov/epermit>

1. At the home page, click on **Select Organization**
2. Move your mouse down and hover over **Environmental Management Division**
3. Move your mouse over and hover over **Clean Water Branch**
4. Then, **National Pollutant Discharge Elimination System**
5. And finally, choose **NPDES Individual and General Permit Compliance Data Forms**

The screenshot shows the HI DOH e-Permitting System website. The browser address bar displays <https://eha-cloud.doh.hawaii.gov/epermit/>. The page header includes the Department of Health logo and the tagline "Healthy People • Healthy Communities • Healthy Islands". The navigation menu contains links for Home, Finder, Help, Sign In, and Register.

The main content area is titled "Organizations" and "Welcome to the e-Permitting Portal". The "Organizations" section prompts the user to "Select the organization from which you would like to submit a form." A dropdown menu is open, showing the following structure:

- Environmental Health Administration
  - Compliance Assistance Office
  - Environmental Health Services Division
  - Environmental Management Division**
    - Clean Air Branch
    - Clean Water Branch**
      - Safe Drinking Water Branch
      - Solid & Hazardous Waste Branch
      - Wastewater Branch
    - Hazard Evaluation & Emergency Response
    - Renewable Energy
    - State Laboratories Division

The "Clean Water Branch" dropdown is further expanded to show:

- Forms to Request to Access a Gov. Record
- National Pollutant Discharge Elimination System**
  - Section 401 Water Quality Certification

The "National Pollutant Discharge Elimination System" dropdown is further expanded to show:

- CWB "No Exposure" Certification Form
- General Permits
- Individual Permit
- NPDES Individual and General Permit Compliance Data Forms**

The "Welcome to the e-Permitting Portal" section provides a welcome message and explains the portal's purpose. It states: "Welcome to the e-Permitting Portal, home for Hawaii Department of Health (DOH) Environmental Health Administration (EHA) permit applications. The DOH EHA e-Permitting Portal provides access to environmental permit applications, related instructions and information. It allows for online application compilation and submission, online application fee payment and online submission tracking. The e-Permitting Portal is provided as a service for the public by the DOH EHA. The EHA oversees the overall administration of the Environmental Management Division (EMD), Environmental Health Services Division (EHSD), and State Laboratories Division (SLD); including branches within each of these divisions. The EHA also provides overall administration of the Offices of Compliance Planning, Environmental Resources, and Hazard Evaluation and Emergency Response." It also lists a "directory of downloadable (manual) permit applications" and provides instructions on how to search for a specific permit application using the Application Finder or Organization Browser.

The "Contact Information" section provides the following details:


**Address:** 2827 Waimano Home Road, Pearl City, HI 96782

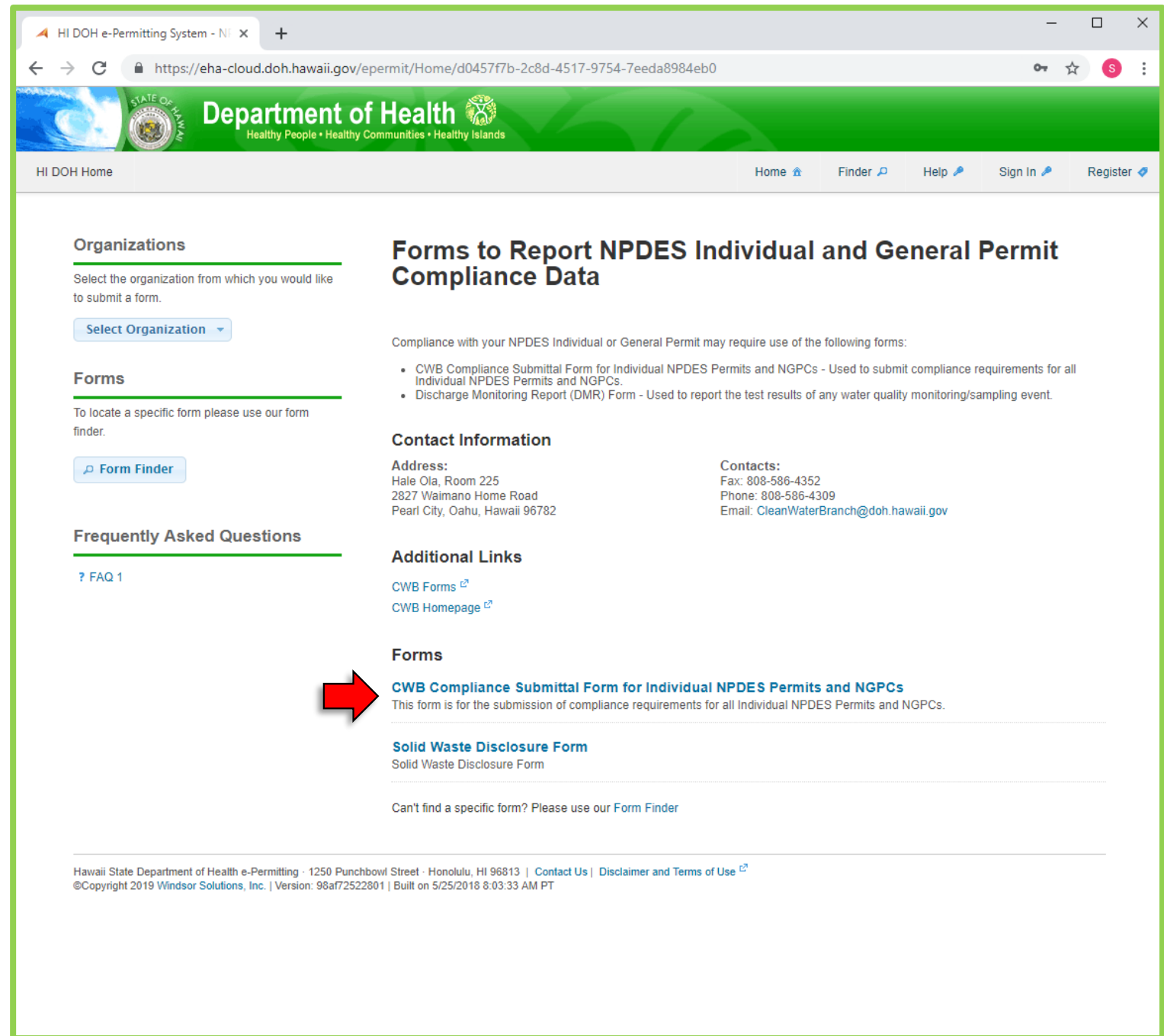
**Contacts:** Web Admin: 808-586-4350

The "Forms" section includes a link to the "Form Finder" for users who cannot find a specific form.

At the bottom of the page, there is a footer with the following text: "Hawaii State Department of Health e-Permitting - 1250 Punchbowl Street - Honolulu, HI 96813 | [Contact Us](#) | [Disclaimer and Terms of Use](#) | ©Copyright 2019 Windsor Solutions, Inc. | Version: 98a772522801 | Built on 5/25/2018 8:03:33 AM PT".

# Step 2

 Click on *CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs*



HI DOH e-Permitting System - NI x +

https://eha-cloud.doh.hawaii.gov/epermit/Home/d0457f7b-2c8d-4517-9754-7eeda8984eb0

Department of Health  
Healthy People • Healthy Communities • Healthy Islands

HI DOH Home Home Finder Help Sign In Register

### Organizations

Select the organization from which you would like to submit a form.

Select Organization

### Forms

To locate a specific form please use our form finder.

Form Finder

### Frequently Asked Questions

FAQ 1

## Forms to Report NPDES Individual and General Permit Compliance Data

Compliance with your NPDES Individual or General Permit may require use of the following forms:

- CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs - Used to submit compliance requirements for all Individual NPDES Permits and NGPCs.
- Discharge Monitoring Report (DMR) Form - Used to report the test results of any water quality monitoring/sampling event.

### Contact Information

**Address:**  
Hale Ola, Room 225  
2827 Waimano Home Road  
Pearl City, Oahu, Hawaii 96782

**Contacts:**  
Fax: 808-586-4352  
Phone: 808-586-4309  
Email: [CleanWaterBranch@doh.hawaii.gov](mailto:CleanWaterBranch@doh.hawaii.gov)

### Additional Links

[CWB Forms](#)  
[CWB Homepage](#)

### Forms

**[CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs](#)**  
This form is for the submission of compliance requirements for all Individual NPDES Permits and NGPCs.

**[Solid Waste Disclosure Form](#)**  
Solid Waste Disclosure Form

Can't find a specific form? Please use our [Form Finder](#)

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# Step 3

Read *Instructions* and scroll to bottom of page

The screenshot shows a web browser window with the URL <https://eha-cloud.doh.hawaii.gov/epermit/app/#/formversion/ec70ab99-0449-46a1-8290-48ec27e03786>. The page header features the Department of Health logo and the tagline "Healthy People • Healthy Communities • Healthy Islands". The navigation bar includes links for "Home", "Finder", "Help", "Sign In", and "Register".

## CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs

VERSION 9.13

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### INSTRUCTIONS

**INSTRUCTIONS:** Please read the following important instructions before filling out this on-line form.

1. You are required to submit all NPDES permit and NGPC compliance information with this form.
2. You will need a copy of the NPDES permit or NGPC to fill out this form. If you are filling out this form for the Permittee to sign, obtain a copy of the NPDES permit or NGPC from the Permittee. Do not contact the CWB. Not having a copy of the NPDES permit or NGPC is a violation which may result in a fine or termination of the NPDES permit or NGPC.
3. Complete all of the e-Permitting processing steps. After you complete all of the processing steps, you will be provided with an automatic acknowledgment email. DO NOT CONTACT THE DOH-CWB.
4. Complete and submit the Transmittal Requirements and Certification Statement for e-Permitting NPDES/NGPC Compliance Submissions. You are required to download this form as you are going through the e-Permitting Portal processing steps. Follow the instructions on this form.
5. The DOH-CWB will not begin processing your submittal until we receive the completed Transmittal Requirements and Certification Statement for e-Permitting NPDES/NGPC Compliance Submissions with the original wet signature and a CD/DVD with the downloaded submission.
6. Check the status of your submission on your e-Permitting dashboard.
  - a. A "Draft" status means you did not complete all of the e-Permitting processing steps. The DOH-CWB will not be able to see any of your drafts.
  - b. A "Submitted" status means you completed all of the e-Permitting processing steps.
  - c. An "Accepted" status means that the DOH-CWB has no comments on your submission at this time. DO NOT CONTACT THE DOH-CWB ABOUT THE STATUS OF YOUR SUBMISSION.
7. The DOH-CWB will contact the Permittee only if we have concerns on the submittal. The Permittee is required to immediately address all concerns to the satisfaction of the DOH-CWB. If the

### FREQUENTLY ASKED QUESTIONS

- ? *Who do I contact if I have NPDES/NGPC compliance questions?*
- ? *My NGPC has requirements that my organization can't comply with. What should I do?*
- ? *My organization is very large. Our Design Section fills out the NOI and/or NPDES applications to obtain the NGPC and/or NPDES permits. Our Construction Section does not get the NGPC and/or NPDES permit requirements. What should we do?*

### CONTACT INFORMATION

**Contact**

Department of Health, Clean Water Branch  
2827 Waimano Home Road, Room 225  
Pearl City, Oahu, Hawaii 96782.

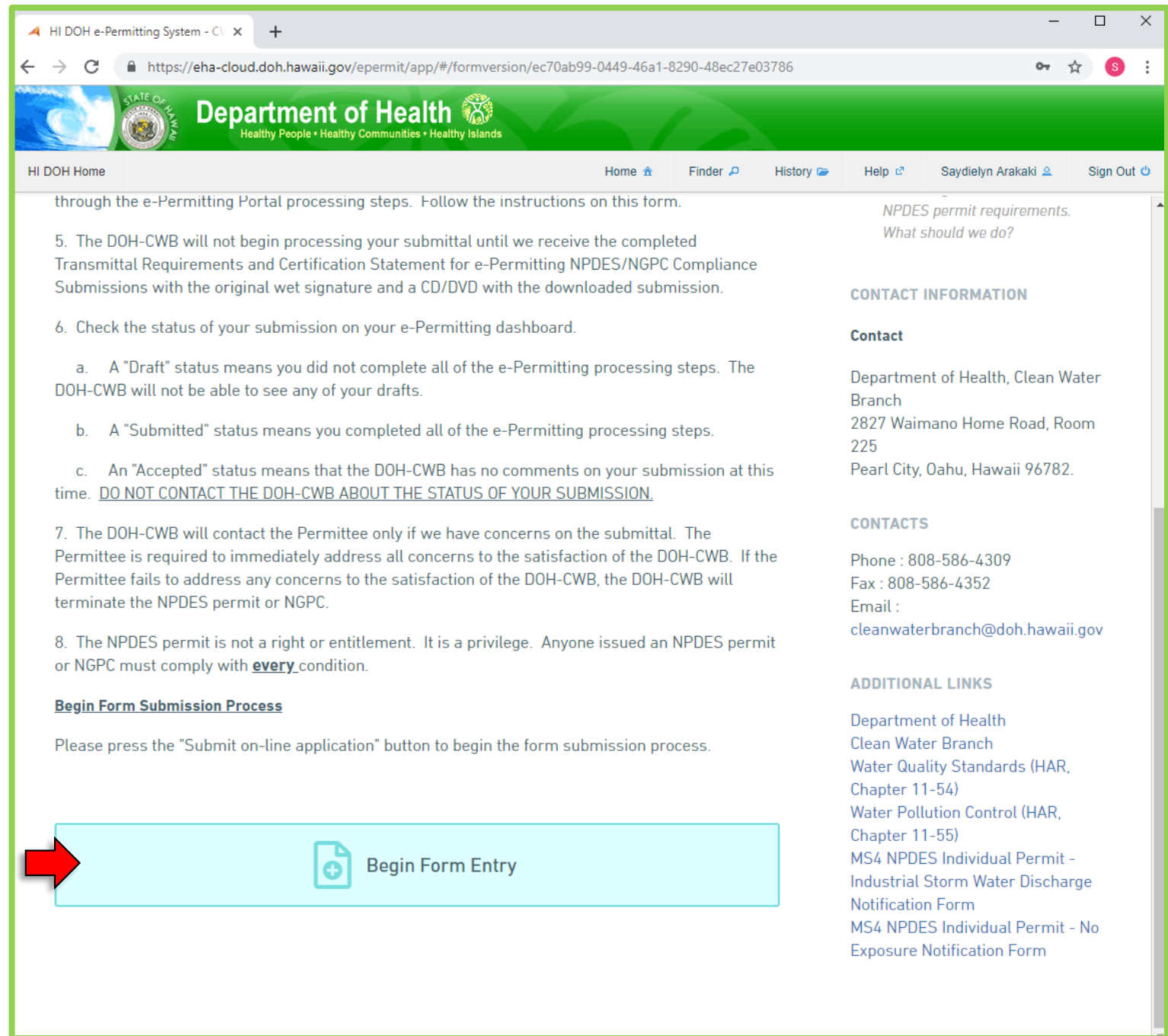
### CONTACTS

Phone : 808-586-4309

# Step 3 (cont.)

 Click on *Begin Form Entry*

Note: If you have not yet logged in, you will now be prompted to Log In



HI DOH e-Permitting System - C... x

https://eha-cloud.doh.hawaii.gov/epermit/app/#/formversion/ec70ab99-0449-46a1-8290-48ec27e03786

Department of Health  
Healthy People • Healthy Communities • Healthy Islands

HI DOH Home Home Finder History Help Saydielyn Arakaki Sign Out

through the e-Permitting Portal processing steps. Follow the instructions on this form.

5. The DOH-CWB will not begin processing your submittal until we receive the completed Transmittal Requirements and Certification Statement for e-Permitting NPDES/NGPC Compliance Submissions with the original wet signature and a CD/DVD with the downloaded submission.

6. Check the status of your submission on your e-Permitting dashboard.



- a. A "Draft" status means you did not complete all of the e-Permitting processing steps. The DOH-CWB will not be able to see any of your drafts.
- b. A "Submitted" status means you completed all of the e-Permitting processing steps.
- c. An "Accepted" status means that the DOH-CWB has no comments on your submission at this time. DO NOT CONTACT THE DOH-CWB ABOUT THE STATUS OF YOUR SUBMISSION.

7. The DOH-CWB will contact the Permittee only if we have concerns on the submittal. The Permittee is required to immediately address all concerns to the satisfaction of the DOH-CWB. If the Permittee fails to address any concerns to the satisfaction of the DOH-CWB, the DOH-CWB will terminate the NPDES permit or NGPC.

8. The NPDES permit is not a right or entitlement. It is a privilege. Anyone issued an NPDES permit or NGPC must comply with **every** condition.

**Begin Form Submission Process**

Please press the "Submit on-line application" button to begin the form submission process.

  **Begin Form Entry**

NPDES permit requirements.  
What should we do?

**CONTACT INFORMATION**

**Contact**

Department of Health, Clean Water Branch  
2827 Waimano Home Road, Room 225  
Pearl City, Oahu, Hawaii 96782.

**CONTACTS**

Phone : 808-586-4309  
Fax : 808-586-4352  
Email :  
cleanwaterbranch@doh.hawaii.gov

**ADDITIONAL LINKS**

Department of Health  
Clean Water Branch  
Water Quality Standards (HAR, Chapter 11-54)  
Water Pollution Control (HAR, Chapter 11-55)  
MS4 NPDES Individual Permit - Industrial Storm Water Discharge Notification Form  
MS4 NPDES Individual Permit - No Exposure Notification Form

# Step 4

The submittal form is separated into clearly labeled steps

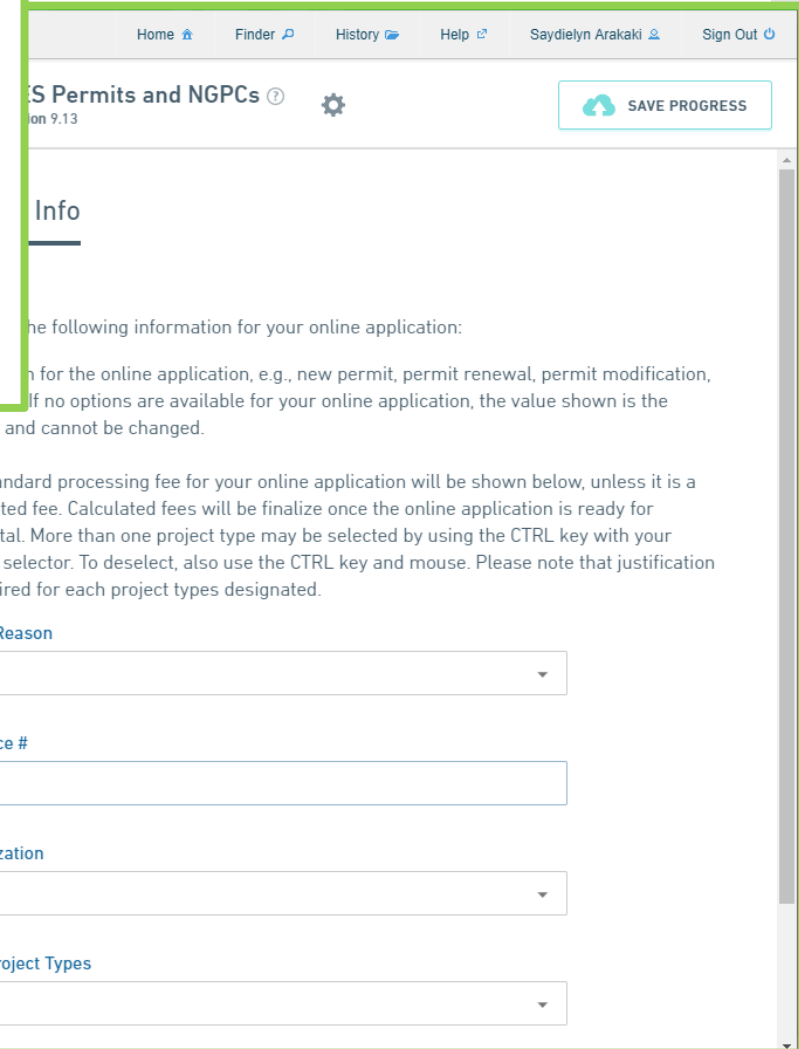
## Processing info

 In the box labeled *Submission Reason*

Choose "New"

 In *File/Reference #*

Type in the NGPC File Number



# Step 4 (cont.)

## Processing info



Select the appropriate fee categorization for your form

Choose "Basic Submission Fee"

Note: You will not be charged a fee



Choose next section

**1. Permit or File Number**

### CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs ?

Submission HNQ-TEMB-BPSP6 Revision 1 Form Version 9.13

SAVE PROGRESS

**Processing Info**

- 1. Permit or File Number
- 2. Notification of Start
- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)
- 4.b Discharge Monitoring Report (Part 2) 1
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification

Please specify the following information for your online application:

- The reason for the online application, e.g., new permit, permit renewal, permit modification, or survey. If no options are available for your online application, the value shown is the default and cannot be changed.
- The standard processing fee for your online application will be shown below, unless it is a calculated fee. Calculated fees will be finalized once the online application is ready for submittal. More than one project type may be selected by using the CTRL key with your mouse selector. To deselect, also use the CTRL key and mouse. Please note that justification is required for each project type designated.

**Submission Reason**

New

**File/Reference #**

**Fee Categorization**

Basic Submission Fee

**Applicable Project Types**



# Step 5

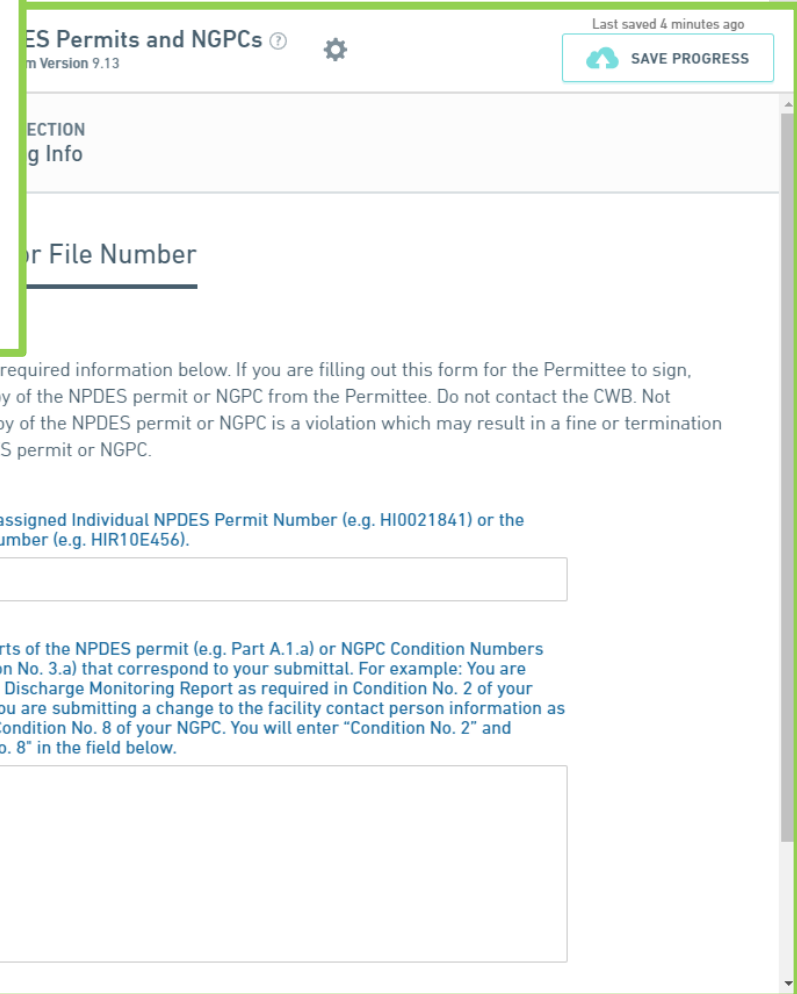
## 1. Permit or File Number

 Type in your NGPC File Number

Note: You can always save your work and come back to it later - click **Save Progress**



To access saved forms, click on the **History** icon for a list of the forms you have saved



# Step 5 (cont.)

## 1. Permit or File Number

➔ Type in the Condition Number referring to submitting DMRs as noted in your NGPC

Note: You can always save your work and come back to it later - click *Save Progress*



To access saved forms, click on the *History* icon for a list of the forms you have saved



**Falsification of information, including providing information in the NOI that does not match what is actually occurring at the project site/facility, may result in criminal penalties for the Permittee and their authorized representative as provided in Clean Water Act, Section 309 and HRS, Section 342D-35.**

As a reminder, this general permit requires the PERMITTEE to:

1. Notify DOH of the discharges associated with construction activity dewatering start date within seven (7) calendar days before the start of dewatering activities.
2. Complete and submit the Solid Waste Disclosure Form for Construction Sites to the DOH, Solid and Hazardous Waste Branch, Solid Waste Section as specified on the form at least 30 calendar days before the start of construction activities. The form can be downloaded at:  
<http://health.hawaii.gov/shwb/files/2013/06/swdiscformnov2008.pdf>.
3. Design, implement, operate, and maintain the project's Site-Specific Dewatering Best Management Practices (BMPs) Plan to ensure that the discharge will not cause or contribute to a violation of applicable State water quality standards (WQS). The effluent shall comply with WQS and the effluent limitations required in this general permit prior to any discharge to State waters.
4. Record the date, starting and ending times, and duration (e.g., hours, minutes) of each discharge and report the information in conjunction with the Discharge Monitoring Report (DMR). Refer to the general permit for the DMR due date(s) and any additional monitoring/reporting requirements. The discharge of construction activity dewatering shall be monitored by the PERMITTEE as specified below:

NPDES Permits and NGPCs ⓘ ⚙️ Last saved 4 minutes ago  
Form Version 9.13 SAVE PROGRESS

DIS SECTION  
osing Info

it or File Number

required information below. If you are filling out this form for the Permittee to sign, copy of the NPDES permit or NGPC from the Permittee. Do not contact the CWB. Not having a copy of the NPDES permit or NGPC is a violation which may result in a fine or termination of the NPDES permit or NGPC.

Provide the assigned Individual NPDES Permit Number (e.g. HI0021841) or the NGPC File Number (e.g. HIR10E456).

\*

Enter the Parts of the NPDES permit (e.g. Part A.1.a) or NGPC Condition Numbers (e.g. Condition No. 3.a) that correspond to your submittal. For example: You are submitting a Discharge Monitoring Report as required in Condition No. 2 of your NGPC, and you are submitting a change to the facility contact person information as required in Condition No. 8 of your NGPC. You will enter "Condition No. 2" and "Condition No. 8" in the field below.

➔ Condition No. 4


4.a Discharge Monitoring Report (Part 1)  
4.b Discharge Monitoring Report (Part 2) 1  
5. Contact Information 1  
6. Authorized Representative Information  
7. Reports, Documents, and Other Attachments  
8. Transfer of Ownership  
9. Owner Name Change  
10. Major Modification



# Step 6

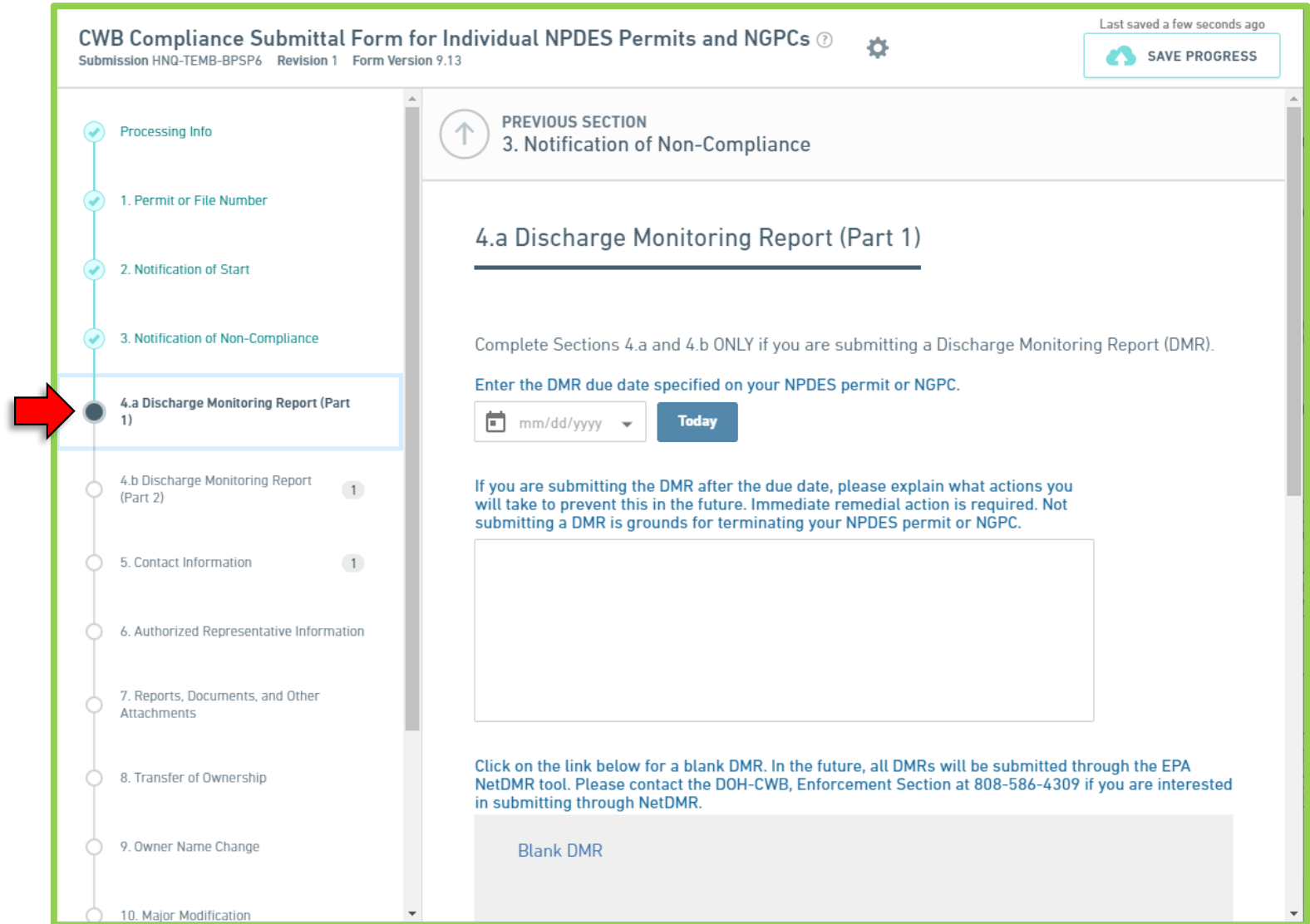
Scroll through each section until you reach section **4.a Discharge Monitoring Report (Part 1)**.

As you scroll through the sections, if it doesn't apply to your submittal, leave it blank.


 You can get to any of the sections by clicking on the Section title on the left side of the page

Or

You can scroll through the sections by clicking on "Next Section" at the bottom of the page



**CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs** ? ⚙️  
Submission HNQ-TEMB-BPSP6 Revision 1 Form Version 9.13


Last saved a few seconds ago  
 **SAVE PROGRESS**

↑ PREVIOUS SECTION  
3. Notification of Non-Compliance

### 4.a Discharge Monitoring Report (Part 1)

Complete Sections 4.a and 4.b ONLY if you are submitting a Discharge Monitoring Report (DMR).

Enter the DMR due date specified on your NPDES permit or NGPC.

 mm/dd/yyyy **Today**

If you are submitting the DMR after the due date, please explain what actions you will take to prevent this in the future. Immediate remedial action is required. Not submitting a DMR is grounds for terminating your NPDES permit or NGPC.

[Blank DMR](#)

Click on the link below for a blank DMR. In the future, all DMRs will be submitted through the EPA NetDMR tool. Please contact the DOH-CWB, Enforcement Section at 808-586-4309 if you are interested in submitting through NetDMR.


Processing Info

- 1. Permit or File Number
- 2. Notification of Start
- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)**
- 4.b Discharge Monitoring Report (Part 2) 1
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification


# Step 6 (cont.)

## 4.a Discharge Monitoring Report (Part 1)

 Enter the DMR due date and an explanation if it is late

 If you don't have a completed DMR, you can download a blank form here

Covered in Part 1 of this guide for instructions on filling out the DMR

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs ?  Last saved a few seconds ago [SAVE PROGRESS](#)

Submission HNQ-TEMB-BPSP6 Revision 1 Form Version 9.13

Processing Info

1. Permit or File Number

2. Notification of Start

3. Notification of Non-Compliance

**4.a Discharge Monitoring Report (Part 1)**

4.b Discharge Monitoring Report (Part 2) 1

5. Contact Information 1

6. Authorized Representative Information

7. Reports, Documents, and Other Attachments

8. Transfer of Ownership

9. Owner Name Change

10. Major Modification

PREVIOUS SECTION  
3. Notification of Non-Compliance

### 4.a Discharge Monitoring Report (Part 1)

Complete Sections 4.a and 4.b ONLY if you are submitting a Discharge Monitoring Report (DMR).

Enter the DMR due date specified on your NPDES permit or NGPC.

If you are submitting the DMR after the due date, please explain what actions you will take to prevent this in the future. Immediate remedial action is required. Not submitting a DMR is grounds for terminating your NPDES permit or NGPC.

Click on the link below for a blank DMR. In the future, all DMRs will be submitted through the EPA NetDMR tool. Please contact the DOH-CWB, Enforcement Section at 808-586-4309 if you are interested in submitting through NetDMR.

[Blank DMR](#)

# Step 6 (cont.)



Before proceeding with the e-permitting portal submittal, you will obtain signatures for both the DMR and Certification Form

Click on the "Save Progress" button at the top right corner of the page

Skip down to the "Certify & Submit" section

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs ?

Submission HNQ-TEMB-BPSP6 Revision 1 Form Version 9.13

Last saved 4 minutes ago

SAVE PROGRESS

3. Notification of Non-Compliance

4.a Discharge Monitoring Report (Part 1)

4.b Discharge Monitoring Report (Part 2) 1

5. Contact Information 1

6. Authorized Representative Information

7. Reports, Documents, and Other Attachments

8. Transfer of Ownership

9. Owner Name Change

10. Major Modification

11. Notice of Cessation

Review

Certify & Submit

PREVIOUS SECTION  
3. Notification of Non-Compliance

### 4.a Discharge Monitoring Report (Part 1)

Complete Sections 4.a and 4.b ONLY if you are submitting a Discharge Monitoring Report (DMR).

Enter the DMR due date specified on your NPDES permit or NGPC.

mm/dd/yyyy Today

If you are submitting the DMR after the due date, please explain what actions you will take to prevent this in the future. Immediate remedial action is required. Not submitting a DMR is grounds for terminating your NPDES permit or NGPC.

Blank DMR

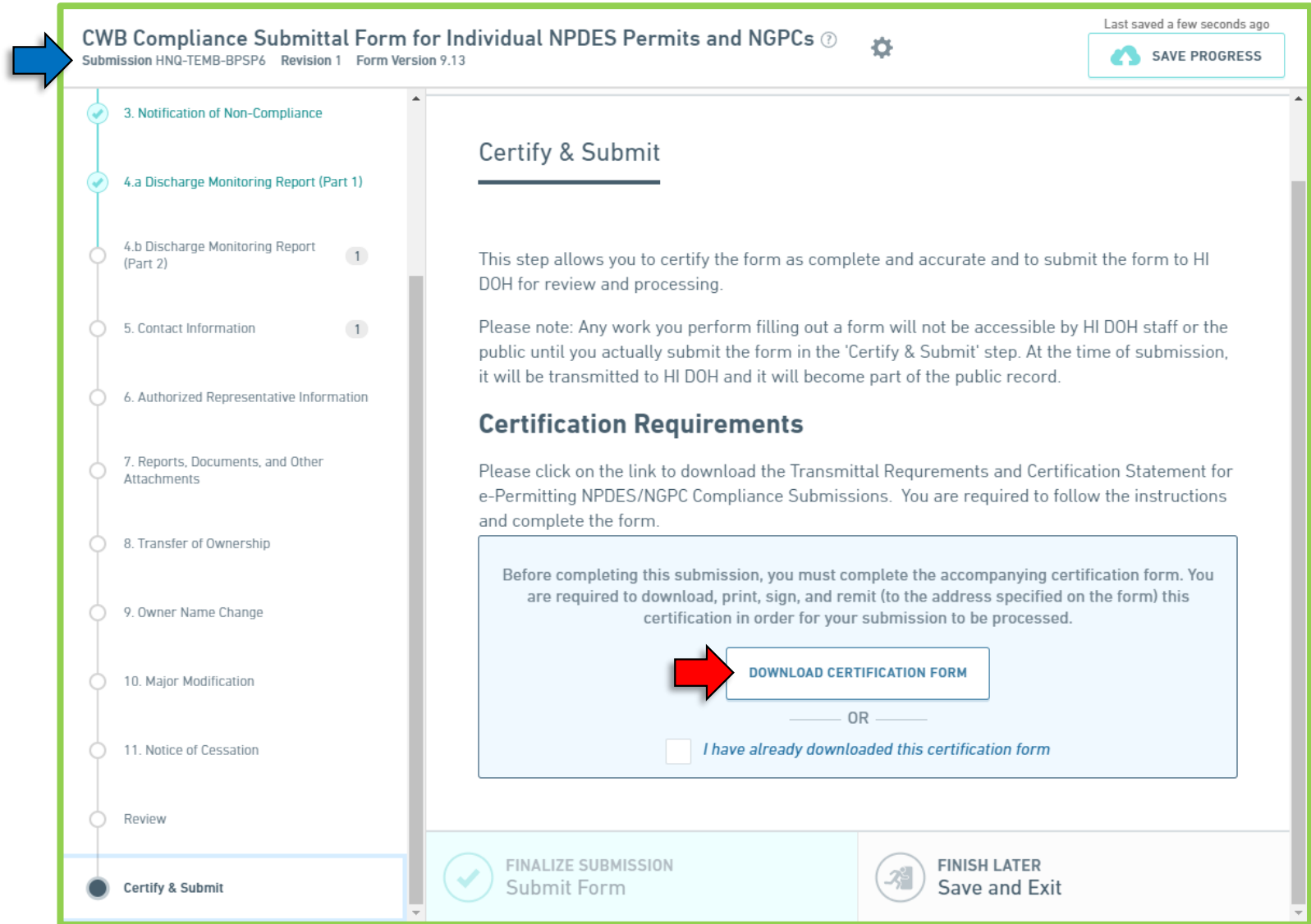
# Step 7

## Certify & Submit

 Download the required *Certification Form*

Note: If your browser blocks pop-ups, you need to manage pop-ups in your browser settings - allow pop-ups from this DOH website

 Use this submission number to fill out the Certification Form



**CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs** ?

Submission HNQ-TEMB-BPSP6 Revision 1 Form Version 9.13

Last saved a few seconds ago

[SAVE PROGRESS](#)

3. Notification of Non-Compliance

4.a Discharge Monitoring Report (Part 1)

4.b Discharge Monitoring Report (Part 2) 1

5. Contact Information 1

6. Authorized Representative Information

7. Reports, Documents, and Other Attachments

8. Transfer of Ownership

9. Owner Name Change

10. Major Modification

11. Notice of Cessation

Review

**Certify & Submit**

This step allows you to certify the form as complete and accurate and to submit the form to HI DOH for review and processing.

Please note: Any work you perform filling out a form will not be accessible by HI DOH staff or the public until you actually submit the form in the 'Certify & Submit' step. At the time of submission, it will be transmitted to HI DOH and it will become part of the public record.

**Certification Requirements**

Please click on the link to download the Transmittal Requirements and Certification Statement for e-Permitting NPDES/NGPC Compliance Submissions. You are required to follow the instructions and complete the form.

Before completing this submission, you must complete the accompanying certification form. You are required to download, print, sign, and remit (to the address specified on the form) this certification in order for your submission to be processed.

[DOWNLOAD CERTIFICATION FORM](#)

OR

I have already downloaded this certification form

**FINALIZE SUBMISSION**  
Submit Form

**FINISH LATER**  
Save and Exit

# Step 8

## Certification Form

This is the form you recently downloaded.

 1. Fill in e-permitting Submission Number and NGPC Number

 2. Check *Discharge Monitoring Report (DMR)*

 3. Input the name of the *Certifying Person*

Unless you are the *Certifying Person*, do not sign the form



## TRANSMITTAL REQUIREMENTS AND CERTIFICATION STATEMENT FOR E-PERMITTING NPDES/NGPC COMPLIANCE SUBMISSIONS

1. Submission and Permit/File Numbers



e-Permitting Submission #: \_\_\_\_\_  
NPDES Permit or NGPC File Number: \_\_\_\_\_

2. I am submitting (check all that apply):

<input type="checkbox"/> Notification of start of construction/discharge	<input type="checkbox"/> Reports and documents
<input type="checkbox"/> Notification of non-compliance	<input type="checkbox"/> Site-specific plans
<input checked="" type="checkbox"/> Discharge Monitoring Report (DMR)	<input type="checkbox"/> Transfer of ownership (\$500 fee)
<input type="checkbox"/> Revised contact information	<input type="checkbox"/> Owner name change
<input type="checkbox"/> Authorized representative information	<input type="checkbox"/> Major modification to an NGPC (\$500 fee) or major modification to an Individual NPDES Permit (\$1000 fee)
<input type="checkbox"/> Notice of Cessation	<input type="checkbox"/> Other, please describe _____

3. Certification Statement

**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 knowing violations.**

Signature \_\_\_\_\_ Date Signed \_\_\_\_\_



Printed First and Last Name \_\_\_\_\_

# Step 8 (cont.)

## Certification Form

 4. Read and check all three boxes.

5. This does not apply to DMRs; leave blank.

 6. Check “My submittal does not require a filing fee”.

Next, print Certification Form

4. **Transmittal Requirements Applicable to All Submittals (Check all.)**

- I have read the instructions on Pages 2 and 3. If I do not follow all of the instructions on Pages 2 and 3, I acknowledge that this submittal will not be accepted by the Clean Water Branch (CWB), and I am delaying the processing of my submittal.
- The signature provided in Item No. 3 is an original signature.
- My CD or DVD is attached. This CD or DVD contains only the downloaded e-Permitting submission identified in Item No. 1 above. I have not altered this file.

5. **Transfer of Ownership Transmittal Requirements (Check if applicable.)**

- I am submitting a transfer of ownership. The Transfer of Ownership Written Agreement with original signatures is attached.

6. **Filing Fee (Check only one.)**

- A \$500 check made payable to the State of Hawaii is attached.
- The filing fee was paid online through the e-Permitting Portal.
- A \$1000 check made payable to the State of Hawaii is attached.
- I am a State agency, and I am requesting a Bill for Collection.
- My submittal does not require a filing fee.

# Step 9

1. Take the completed DMR (from Part 1 of this guide) and a print out of the certification form and get both signed by either the Owner or Authorized Rep

*Tip: Submitting both forms together for signatures will reduce routing time and allow for faster submissions!*

2. After obtaining the signatures, scan copies of both documents

*Scanned copies will be submitted electronically*

*Hard copies will be mailed to DOH*

3. Log back into the E-Permitting Portal and finish up your submission



## TRANSMITTAL REQUIREMENTS AND CERTIFICATION STATEMENT FOR E-PERMITTING NPDES/NGPC COMPLIANCE SUBMISSIONS

### 1. Submission and Permit/File Numbers

e-Permitting Submission #: HNQ-TEMB-BPSP6  
 NPDES Permit or NGPC File Number: HI73HP180

### 2. I am submitting (check all that apply):

<input type="checkbox"/> Notification of start of construction/discharge	<input type="checkbox"/> Reports and documents
<input type="checkbox"/> Notification of non-compliance	<input type="checkbox"/> Site-specific plans
<input checked="" type="checkbox"/> Discharge Monitoring Report (DMR)	<input type="checkbox"/> Transfer of ownership (\$500 fee)
<input type="checkbox"/> Revised contact information	<input type="checkbox"/> Owner name change
<input type="checkbox"/> Authorized representative information	<input type="checkbox"/> Major modification to an NGPC (\$500 fee) or major modification to an Individual NPDES Permit (\$1000 fee)
<input type="checkbox"/> Notice of Cessation	<input type="checkbox"/> Other, please describe

### 3. Certification Statement

**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. Based on my inquiry of the person or persons who manage the system, I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.**

Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

Printed First and Last Name Minerva McGonagall

### 4. Transmittal Requirements Applicable to All Submittals (Check all.)

- I have read the instructions on Pages 2 and 3. If I do not follow all of the instructions on Pages 2 and 3, I acknowledge that this submittal will not be accepted by the Water Branch (CWB), and I am delaying the processing of my submittal.
- The signature provided in Item No. 3 is an original signature.
- My CD or DVD is attached. This CD or DVD contains only the downloaded e-Permitting submission identified in Item No. 1 above. I have not altered the submission.

### 5. Transfer of Ownership Transmittal Requirements (Check if applicable.)

- I am submitting a transfer of ownership. The Transfer of Ownership Written with original signatures is attached.

PERMITTEE NAME/ADDRESS (Include Facility Name, Location, if Different) **Hogwarts School of Witchcraft and Wizardry**  
 ADDRESS **Platform 9 3/4, Bustom Rd., Kings Cross, London, UK**  
 FACILITY LOCATION **Quidditch Stadium Emergency Repairs**  
 5290 Hogwarts Drive

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) Form Approved OMB No. 2040-0004

PERMIT NUMBER **HI 73HP180** DISCHARGE NUMBER **BL 1**

MONITORING PERIOD FROM **19 09 01** TO **19 09 30**  Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Quantity of Discharge	<input checked="" type="checkbox"/>	300		GPD							
	PERMIT REQUIREMENT									1/Dis	Est
Total Suspended Solids	<input type="checkbox"/>				0.5 (MIN)	0.73 (AVG)	1.0 (MAX)	mg/l			
	PERMIT REQUIREMENT					55.0				1/Dis	Grab
Turbidity	<input type="checkbox"/>				0.70 (MIN)	0.71 (AVG)	0.73 (MAX)	NTU			
	PERMIT REQUIREMENT					10.0				1/Dis	Grab
pH	<input type="checkbox"/>				7.63 (MIN)	7.7 (AVG)	7.81 (MAX)	Standard Units			
	PERMIT REQUIREMENT				5.5 MIN		8.0 MAX			1/Dis	Grab
Oil and Grease	<input type="checkbox"/>				1.1 (MIN)	1.4 (AVG)	2.0 (MAX)	mg/l			
	PERMIT REQUIREMENT					15.0				1/Dis	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER **Minerva McGonagall**

TELEPHONE **345 748-4951** DATE **19 09 20**

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT \_\_\_\_\_

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Total Suspended Solids and Turbidity Limitations are based on dry season.

EPA Form 3320-1 PAGE 1 OF 1

# Step 10

## 4.a Discharge Monitoring Report (Part 1)

Upload your scanned, completed DMR and certification form

Move onto the next section 4.b Discharge Monitoring Report (Part 2)

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs ? ⚙️ Last saved 17 minutes ago 🔄 SAVE PROGRESS

File/Reference # HI16GF028 Submission HNP-NECG-AX1TD Revision 1 Form Version 9.13

- Processing Info
- 1. Permit or File Number
- 2. Notification of Start
- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)**
- 4.b Discharge Monitoring Report (Part 2) 1
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change


Click on the link below for DMR instructions.

[DMR Instructions](#)

Upload the DMR (including lab data sheets, QA/QC, etc.) in PDF format.

*In addition to uploading your DMR, be sure to copy the pdf file(s) to a CD for submittal. Along with the CD, you must also include the original signed hard copies in your submittal to the Clean Water Branch.*

Drop files here to upload



OR

**NEXT SECTION**  
4.b Discharge Monitoring Report (Part 2)

# Step 11

## 4.b Discharge Monitoring Report (Part 2)

Answer the questions in this section if you have a *permit/NGPC parameter limitation exceedance*.

If you do not have any limitation exceedances, skip ahead to the next section.

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs ? ⚙️

File/Reference # HI16GF028 Submission HNP-NECG-AX1TD Revision 1 Form Version 9.13 Last saved 42 minutes ago 🏠 SAVE PROGRESS

- Processing Info
- 1. Permit or File Number
- 2. Notification of Start
- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)
- 4.b Discharge Monitoring Report (Part 2) 1**
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification

PREVIOUS SECTION  
4.a Discharge Monitoring Report (Part 1)

### 4.b Discharge Monitoring Report (Part 2)

Complete Sections 4.a and 4.b ONLY if you are submitting a Discharge Monitoring Report (DMR). Complete the fields below if you have a permit/NGPC parameter limitation exceedance. If you have additional limitation exceedances, press the " " button to enter information for each parameter.

**1 4.b Discharge Monitoring Report (Part 2)** DUPLICATE

Provide the parameter with a limitation exceedance.

Provide the measured concentration and units.

Provide the NPDES or NGPC limitation and units.



Provide the reason for the exceedance.


# Step 11 (cont.)

## 4.b Discharge Monitoring Report (Part 2)

If you have more than one exceedance, duplicate or add new exceedance(s).

After inputting any exceedances, continue on to the next section.

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs  

File/Reference # HI16GF028 Submission HNP-NECG-AX1TD Revision 1 Form Version 9.13 Last saved 36 minutes ago  SAVE PROGRESS


- Processing Info
- 1. Permit or File Number
- 2. Notification of Start
- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)
- 4.b Discharge Monitoring Report (Part 2) 1**
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification

Provide the measured concentration and units.


Provide the NPDES or NGPC limitation and units.

Provide the reason for the exceedance.

Describe the action that will be taken to prevent a future exceedance.

 **DUPLICATE 4.B DISCHARGE MONITORING REPORT (PART 2)**


**ADD NEW 4.B DISCHARGE MONITORING REPORT (PART 2)**

 **NEXT SECTION**  
**5. Contact Information**


# Step 12

Continue clicking on or scrolling through every section (even if it isn't what you're submitting).


Note: There must be a checkmark to the left of all header sections to submit the form.

 Once you have passed through a section, a checkmark will appear in the circle to the left of the section name.

 Any section not visited will remain blank.

 Any section that is not properly filled out will turn red and an x will appear in the circle

*If there is only a red x next to Review, it means a section is missing a checkmark (i.e. Contact and Authorized Representative Information)*

**CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs** ? 

Submission HNP-NGCD-29DBP Revision 1 Form Version 9.13 Last saved 2 minutes ago [SAVE PROGRESS](#)

- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)
- 4.b Discharge Monitoring Report (Part 2)** 1
- 5. Contact Information 1
- 6. Authorized Representative Information**
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification
- 11. Notice of Cessation
- Review**
- Certify & Submit**

### Certify & Submit

This step allows you to certify the form as complete and accurate and to submit the form to HI DOH for review and processing.

Please note: Any work you perform filling out a form will not be accessible by HI DOH staff or the public until you actually submit the form in the 'Certify & Submit' step. At the time of submission, it will be transmitted to HI DOH and it will become part of the public record.

### Certification Requirements


Please click on the link to download the Transmittal Requirements and Certification Statement for e-Permitting NPDES/NGPC Compliance Submissions. You are required to follow the instructions and complete the form.


Before completing this submission, you must complete the accompanying certification form. You are required to download, print, sign, and remit (to the address specified on the form) this certification in order for your submission to be processed.

[DOWNLOAD CERTIFICATION FORM](#)

OR

I have already downloaded this certification form

 **FINALIZE SUBMISSION**  
Submit Form

 **FINISH LATER**  
Save and Exit

# Step 13

## Review

On the *Review* page, you can see your finished application



To make changes to any section, click on a section header on the left

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs ?

Submission HNP-NGCD-29DBP Revision 1 Form Version 9.13 Last saved a few seconds ago

- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)
- 4.b Discharge Monitoring Report (Part 2)** 1
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification
- 11. Notice of Cessation
- Review**
- 

### 4.b Discharge Monitoring Report (Part 2)

Complete Sections 4.a and 4.b ONLY if you are submitting a Discharge Monitoring Report (DMR). Complete the fields below if you have a permit/NGPC parameter limitation exceedance. If you have additional limitation exceedances, press the " " button to enter information for each parameter.

**1 4.b Discharge Monitoring Report (Part 2)**

Provide the parameter with a limitation exceedance.  
*None Specified*

Provide the measured concentration and units.  
*None Specified*

Provide the NPDES or NGPC limitation and units.  
*None Specified*

Provide the reason for the exceedance.  
*None Specified*


Describe the action that will be taken to prevent a future exceedance.  
*None Specified*

# Step 13 (cont.)

## Review

 Make a pdf copy by clicking **Print Review**. Save the pdf.

 To finish the application, choose **Certify & Submit**

**CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs** ? 

Submission HNP-NGCD-29DBP Revision 1 Form Version 9.13 Last saved 3 minutes ago [SAVE PROGRESS](#)

- 3. Notification of Non-Compliance
- 4.a Discharge Monitoring Report (Part 1)
- 4.b Discharge Monitoring Report (Part 2) 1
- 5. Contact Information 1
- 6. Authorized Representative Information
- 7. Reports, Documents, and Other Attachments
- 8. Transfer of Ownership
- 9. Owner Name Change
- 10. Major Modification
- 11. Notice of Cessation
- Review**
- ✖ Certify & Submit

My requested major modification includes (select all that apply):  
*None Specified*

**Upload Major Modification Information**  
*No files uploaded*

COMMENT  
*None Specified*





---

### 11. Notice of Cessation

Complete this section **ONLY** if you are submitting the Notice of Cessation to terminate your NPDES permit or NGPC.


By completing this section, the Permittee certifies that: 1) I want to terminate the NPDES permit or NGPC, and 2) I acknowledge that I am no longer authorized to discharge from the facility or site. Enter the date the discharge and/or activity ceased.  
*None Specified*

---


  **NEXT SECTION**  
Certify & Submit   **Print Review**

# Step 14

## Certify & Submit

 Check the box that says "I have already downloaded this certification form"

 Submit the form

**CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs** ? 

Submission HNQ-TEMB-BPSP6 Revision 2 Form Version 9.13 Last saved 4 minutes ago [SAVE PROGRESS](#)

**Certify & Submit**

This step allows you to certify the form as complete and accurate and to submit the form to HI DOH for review and processing.

Please note: Any work you perform filling out a form will not be accessible by HI DOH staff or the public until you actually submit the form in the 'Certify & Submit' step. At the time of submission, it will be transmitted to HI DOH and it will become part of the public record.

### Certification Requirements


Please click on the link to download the Transmittal Requirements and Certification Statement for e-Permitting NPDES/NGPC Compliance Submissions. You are required to follow the instructions and complete the form.


Before completing this submission, you must complete the accompanying certification form. You are required to download, print, sign, and remit (to the address specified on the form) this certification in order for your submission to be processed.

[DOWNLOAD CERTIFICATION FORM](#)

OR

*I have already downloaded this certification form*

  **FINALIZE SUBMISSION**  
Submit Form

 **FINISH LATER**  
Save and Exit

**3. Notification of Non-Compliance**

**4.a Discharge Monitoring Report (Part 1)**

**4.b Discharge Monitoring Report (Part 2)** 1

**5. Contact Information** 1

**6. Authorized Representative Information**

**7. Reports, Documents, and Other Attachments**

**8. Transfer of Ownership**

**9. Owner Name Change**

**10. Major Modification**

**11. Notice of Cessation**

**Review**

# Step 14 (cont.)

The application is submitted, however it is not complete until the *Certification Form* is received by DOH.

Continue to Part 3 on the next page!

## Submission Confirmation

Your form has been submitted to HI DOH. The information pertaining to this submission is available on the right. You can always review this information later by clicking on the Submission History link in the header of the system.

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs  
version 9.13

(Submission #: HNQ-TEMB-BPSP6, revision 1)

### Thank you for your submission!

Your submission has successfully been submitted. A confirmation message has been issued to you at mcgonagall@hog.edu. We recommend that you retain a copy of your receipt for this transaction by using the [Print Receipt](#) function.

### RECEIPT

**Submission #** HNQ-TEMB-BPSP6

**Submitted on** 6/26/2019 2:01 PM

Thank you for your submission!

[Print Receipt](#)

# Part 3: Mailing the Submission

Have the following documents ready:

- Scanned copies of:
  - The DMR(s)
  - Certification form
  - Lab results
  - E-Permitting Submittal
- Certification form with wet signature
- Original DMR(s) with wet signature
- Lab results

# Step 1

Save onto a CD, DVD, or thumb drive:

1. Scanned, signed DMR
2. Scanned/PDF of the lab results
3. Scanned, signed Certification Form
4. PDF of your e-permitting submittal (Part 2, Step 13, cont.)

PERMITTEE NAME/ADDRESS (Include Facility Name, Location of Discharge)  
NAME: Hogwarts School of Witchcraft and Wizardry  
ADDRESS: Platform 9 3/4, Euston Rd., Kings Cross, London, UK  
FACILITY LOCATION: Quidditch Stadium Emergency Repairs

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)  
Form Approved OMB No. 2040-0004

HI 73HP180 PERMIT NUMBER  
BL 3 DISCHARGE NUMBER

TEST MONITORING PERIOD  
FROM 09/01/19 TO 09/30/19

Check here if No Discharge  NOTE: Read Instructions before completing this form

PARAMETER	QUANTITY OR LOADING	QUALITY OR CONCENTRATION			NO. OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE		
Quantity of Discharge	300 QPD				1/Dis	Est
Total Suspended Solids		0.5 (MIN)	0.73 (AVG)	1.0 (MAX)	mg/l	1/Dis Grab
Turbidity		0.70 (MIN)	0.71 (AVG)	0.73 (MAX)	NTU	1/Dis Grab
pH		7.63 (MIN)	7.7 (AVG)	7.81 (MAX)	Stand and	1/Dis Grab
Oil and Grease		5.5 MIN		8.0 MAX	mg/l	1/Dis Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Minerva McGonagall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*Minerva McGonagall*

TELEPHONE: 345 748-4951 DATE: 19 09 20

EPA Form 3320-1 PAGE 1 OF 1

Agument, Inc.

CLIENT: Borgen & Borden, 13 Knockham Alley, Knockham Alley, UK

AGUMENT REPORT OF ANALYTICAL RESULTS

SAMPLE TYPE: Stream water

DATE SAMPLED: 09/04/19

ANALYTE #	Water Quality Sample	Reporting Unit	Method
1	Temperature (°C)	23.0	YSI 2001B-01 (098)
2	Dissolved Oxygen (mg/L)	7.81	YSI 2001B-01 (098)
3	Dissolved Oxygen (% saturation)	7.70	YSI 2001B-01 (098)
4	Total Suspended Solids (mg/L)	0.73	EPA 8161.1 (09)
5	pH	7.7	EPA 8161.1 (09)
6	Oil & Grease (mg/L)	1.0	EPA 8161.1 (09)
7	Ammonia (mg N/L)	0.73	EPA 8161.1 (09)
8	Nitrite + Nitrate (mg N/L)	581	SM 5000-NO3E (098)
9	Total Nitrogen (mg N/L)	900	Col. EPA 8161.1 (09)
10	Total Phosphorus (µg P/L)	120	09/20 EPA 808
11	Chloride (µg/L)	-0.38	1.1/1.0 EPA 808
12	Dobson (µg/L)	-0.02	0.11/0.02 EPA 808

G. Delacour, Laboratory Director

Agument, Inc.

CLIENT: Borgen & Borden, 13 Knockham Alley, Knockham Alley, UK

AGUMENT REPORT OF ANALYTICAL RESULTS

SAMPLE TYPE: Stream water

DATE SAMPLED: 09/16/19

ANALYTE #	Water Quality Sample	Reporting Unit	Method	Analysis Date
1	Temperature (°C)	23.0	YSI 2001B-01 (098)	Field 04/10
2	Dissolved Oxygen (mg/L)	7.78	YSI 2001B-01 (098)	Field 12/07/18
3	Dissolved Oxygen (% saturation)	7.69	YSI 2001B-01 (098)	Field 12/12/18
4	Total Suspended Solids (mg/L)	0.71	EPA 8161.1 (09)	Field 12/12/18
5	pH	7.7	EPA 8161.1 (09)	Field 12/12/18
6	Oil & Grease (mg/L)	1.2	EPA 8161.1 (09)	Field 12/12/18
7	Ammonia (mg N/L)	582	SM 5000-NO3E (098)	Field 12/12/18
8	Nitrite + Nitrate (mg N/L)	900	Col. EPA 8161.1 (09)	Field 12/12/18
9	Total Nitrogen (mg N/L)	120	09/20 EPA 808	Field 12/12/18
10	Total Phosphorus (µg P/L)	-0.38	1.1/1.0 EPA 808	Field 12/12/18
11	Chloride (µg/L)	-0.02	0.11/0.02 EPA 808	Field 12/12/18
12	Dobson (µg/L)			

G. Delacour, Laboratory Director

TRANSMITTAL REQUIREMENTS AND CERTIFICATION STATEMENT FOR E-PERMITTING NPDES/NGPC COMPLIANCE SUBMISSIONS

1. Submission and Permit/File Numbers  
e-Permitting Submission #: HNQ-TEMB-BPSP6  
NPDES Permit or NGPC File Number: H173HP180
2. I am submitting (check all that apply):  
 Notification of start of construction/discharge  
 Notification of non-compliance  
 Discharge Monitoring Report (DMR)  
 Revised contact information  
 Authorized representative information  
 Notice of Cessation  
 Reports and documents  
 Site-specific plans  
 Transfer of ownership (\$500 fee)  
 Owner name change  
 Major modification to an NGPC (\$500 fee) or major modification to an individual NPDES Permit (\$1000 fee)  
 Other, please describe
3. Certification Statement  
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 knowing violations.  
Signature: *Minerva McGonagall* Date Signed: 09/20/19  
Printed First and Last Name: Minerva McGonagall
4. Transmittal Requirements Applicable to All Submittals (Check all)  
 I have read the instructions on Pages 2 and 3. If I do not follow all of the instructions on Pages 2 and 3, I acknowledge that this submittal will not be accepted by the Clean Water Branch (CWB), and I am delaying the processing of my submittal.  
 The signature provided in Item No. 3 is an original signature.  
 My CD or DVD is attached. This CD or DVD contains only the downloaded e-Permitting submission identified in Item No. 1 above. I have not altered this file.
5. Transfer of Ownership Transmittal Requirements (Check if applicable.)  
 I am submitting a transfer of ownership. The Transfer of Ownership Written Agreement with original signatures is attached.

CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs

NPDES Permit or NGPC File Number: H173HP180

1. PERMIT OR FILE NUMBER  
Consent to discharge under this permit is contingent upon the permittee's compliance with all conditions of the permit and the NPDES permit or NGPC file number.

2. NOTICE OF START  
Consent to discharge under this permit is contingent upon the permittee's compliance with all conditions of the permit and the NPDES permit or NGPC file number.

3. NOTICE OF NON-COMPLIANCE  
Consent to discharge under this permit is contingent upon the permittee's compliance with all conditions of the permit and the NPDES permit or NGPC file number.

4. NOTICE OF CESSATION  
Consent to discharge under this permit is contingent upon the permittee's compliance with all conditions of the permit and the NPDES permit or NGPC file number.



# Last Step!

At this point, you should have submitted your on-line form.

Next, package up:

1. Your CD/DVD or thumb drive with the pdfs (Part 3, Step 1);
2. The transmittal/certification form with wet signature (Part 2, Step 11); and
3. Original DMR(s) with wet signature.

Note: Make sure you give the Clean Water Branch the transmittal/certification form and DMR with the original, wet signature!

Keep copies of all documents!

Send the packaged items to the Clean Water Branch:

DOH Clean Water Branch  
Hale Ola Room 225  
2827 Waimano Home Road  
Pearl City, Hawaii 96782

