**TPDES Pretreatment Program Annual Report Form**

**for Industrial User Inventory Modifications**

**Reporting month/year:** **,**  **to**  ,

**TPDES Permit No.:** **Permittee:** **Treatment Plant:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INDUSTRIAL USER INVENTORY MODIFICATIONS** | | | | | |
| **FACILITY NAME, ADDRESS AND**  **CONTACT PERSON** | **ADD, CHANGE, DELETE**  **(Including**  **categorical**  **reclassification to NSCIU or MTCIU)** | **IF DELETION: Reason For Deletion** | **IF ADDITION OR SIGNIFICANT CHANGE:** | | |
| **PROCESS DESCRIPTION** | **POLLUTANTS (Including**  **any sampling waiver**  **given for each pollutant**  **not present)** | **FLOW RATE 9**  **(In gallons per day)**  **R = Regulated**  **U = Unregulated**  **T = Total** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

9 For NSCIUs, total flow must be given, if regulated flow is not determined.