INDUSTRIAL DISCHARGE PERMIT REPORTING FORM

MILBANK MFG. CO. INC
PO BOX 754
KOKOMO, IN 46903-0754

PLEASE COMPLETE AND SUBMIT THIS FORM BY NO LATER THAN THE 28 th DAY OF THE FOLLOWING MONTH TO:

PRETREATMENT ADM.
KOKOMO WWTP
1501 W. MARKLAND AVE.
KOKOMO, IN 46901

PERMIT # 019

OUTFALL # 001

MO. YR 0898

EFFLUENT CHARACTERISTICS	pH	ZN	PB	FE	AG	
SAMPLE TYPE	Grab	COMPOSIT	COMPOSIT	COMPOSIT	COMPOSIT	
FREQUENCY 2 X WK						
EFFLUENT LIMITATIONS WEEKLY/MONTHLY	6 / 10	2.10 / 1.19	.56 / .35	20 /	.35 / .19	/
UNITS	S.U.	PPM	PPM	PPM	PPM	
DATE OF SAMPLE						
AUG 04 1998	9.10	.072	.080	.71	.020	
AUG 06 1998	9.16	.082	.080	1.40	.020	
AUG 11 1998	9.43	.12	.080	.78	.020	
AUG 13 1998		.095	.080	.79	.020	
AUG 18 1998	9.35	.18	.080	.57	.020	
AUG 20 1998	9.44	.091	.080	.16	.020	
AUG 25 1998	8.99	.59	.080	.81	.020	
AUG 27 1998		.50	.080	.63	.020	
MONTHLY AVERAGE		.216	.080	.731	.020	
MAXIMUM VALUE	9.44	.59	.080	1.40	.020	
MINIMUM VALUE	8.99	.072	.080	.16	.020	
FLOW (GALLONS PER DAY)	4714 GAL PER DAY					

33,000 GAL SANITARY USE 21 DAYS WORKED

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 gathered and evaluate the information submitted. Based upon 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.

Richard Tyler
Signature of Authorized Agent

9-21-98
Date

MIL0001340