



Hazardous Metals Monitoring Waiver for Storm Water Discharges Associated with Industrial Activity Under the TPDES Multi-Sector General Permit (TXR050000)

Complete this form for the outfalls listed in the facility's storm water pollution prevention plan (SWPPP). Use additional forms as needed. Keep this form on site with the SWPPP and make sure that it is readily available to TCEQ investigators on request.

TPDES Permit Number: TXR05|_|_|_|_|

Outfall (as listed in the SWPPP)	These metals are excluded from monitoring if checked:											
	As	Ba	Cd	Cr	Cu	Pb	Mn	Hg	Ni	Se	Ag	Zn

Key to metals: As = arsenic; Ba = barium; Cd = cadmium; Cr = chromium; Cu = copper; Pb = lead; Mn = manganese; Hg = mercury; Ni = nickel; Se = selenium; Ag = silver; Zn = zinc

I certify under penalty of law that the hazardous metals checked in the above table meet at least one of the three criteria found in Part III, Section C.1. (d) (1) to (4) for the discharge location/respective outfall that is authorized by the TPDES Multi-Sector General Permit:

- That the regulated facility does not use a raw material, produce an intermediate product, or produce a final product that contains one of these hazardous metals.
- That any raw materials, intermediate products, or final products which contain a hazardous metal are never exposed to storm water or runoff.
- That a sample of the discharge from the facility has been analyzed for one or more of the listed hazardous metals, and the results indicate that the metal(s) is/are not present in detectable levels. Test methods utilized are sensitive enough to detect the following parameters at the minimum analytical level (MAL) as specified in Part III.D.1.(e)(iii) of the TPDES Multi-Sector General Permit.

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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Operator/Representative Name (printed or typed): _____

Signature: _____ **Date (mm/dd/yy):** _____