



Glenbard Wastewater Authority

945 Bemis Road Glen Ellyn, Illinois 60137
Telephone: 630-790-1901 – Fax: 630-858-8119

INDUSTRIAL PRETREATMENT PROGRAM SELF-MONITORING REPORT TOTAL TOXIC ORGANICS CERTIFICATION FORM

For Time Period: _____ to _____ of _____
Start Date End Date Year

Industry Name: _____

Industry Address: _____

Check this box if industry has **NOT** added additional toxic organics to any process at facility.

Did this Industry haul waste off-site for disposal during the reporting period?
Yes No

Manifests for hauled waste during reporting period must accompany this form.

"Based on my inquiry of the person or persons directly responsible for managing compliance with the pretreatment standard for the total toxic organics (TTO), I certify that, to the best of my knowledge and belief, no dumping of concentrated solvents and/or toxic organics into the wastewater has occurred since filing of the last report. I further certify that this facility is implementing the Toxic Organic Management Plan submitted to the Glenbard Wastewater Authority."

"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 ensure 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 of Authorized Representative

Date: _____