City of Elkhart
Public Works & Utilities

Elkhart Industrial Pretreatment Program
Self-Monitoring Sampling Event Report

Industry Name: _____ Permit Number: _____

Industry Location: _____

Sample Location (check all that apply): ☐end of process ☐end of pipe

Hour(s) of process wastewater discharge: _____

Sample Type:

Grab Sample* Month: _____ Day: _____ Year: _____ Time: _____ am pm

*** A grab sample is an individual sample collected over a period of time not exceeding 15 minutes.**

Composite Sample** Start Month: _____ Day: _____ Year: _____ Time: _____ am pm
End Month: _____ Day: _____ Year: _____ Time: _____ am pm

****Composite samples musts be representative of daily operations.***

Describe Flow or Time Proportional Technique Used to Collect Composite Sample:

_____

_____

_____

Were sample(s) collected in proper containers in accordance with 40 CFR Part 136: Yes ☐ No☐

Were sample(s) properly preserved in accordance with 40 CFR Part 136: Yes ☐ No ☐

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