

Instructions For The Completion Of Discharge Monitoring Reports

****We prefer the submission of our PDF generated DMR forms or submission through EDMR. However, if you choose to create your own forms they must match our forms exactly or they will be returned for proper completion ****

1. **Permittee Name & Facility Address:** This information can be found within your NPDES permit.
2. **NPDES Permit Number:** The NPDES permit number can also be found in your permit. It consists of 9 characters and begins with the letters IL. Example: IL-----.
3. **Discharge Number:** The outfall number where the discharge occurred.
4. **Monitoring Period:** Must begin with the first day of the monitoring period and end on the last day of the monitoring period. Example: 05/01/2012 to 05/31/2012. **(The format should be mm/dd/yyyy).**
5. **Major/Minor Indicator:** Be sure to include this information on the DMR. If unaware of the classification, please contact our permit section at 217-782-0610.
6. **No Discharge Box:** Place an 'X' within this box if a discharge did not occur during the monitoring period indicated. **If you did not discharge, please skip down to instructions #13 – 17. You will not report any data within the DMR fields if a discharge did not occur.**
7. **Parameters:** Be sure to fill in the data boxes as required by your permit.
8. **Limit requirements:**
 - a. You may type or handwrite your numerical data into the sample measurement areas. Do not type or write in the sample measurement areas where there are asterisks (****) in the permit requirement area.
 - b. There are allocated areas for load and concentration measurement data which may include numeric data and symbols. **Only the following symbols are allowed: <, >, =, "T" and "E".** The symbols must always precede the number value, with the exception of the "T", which has no numeric value. Type or print "T" when reporting "too numerous to count". Type or print "E" followed by numeric value when reporting an estimated value.
 - c. A "less than" (<) symbol should be used for reporting measurement data that is below the lab's lowest detectable measurement value. Mass loading and concentration value should be reported as < the instrument detection limit (IDL). "Less than" data should be considered as the recorded value for calculation purposes, i.e. <1 mg/l recorded as 1. When a data set includes "less than" values, calculation results should be reported with "less than" on the dmr form. (Example: <1 mg/l for TSS).
 - d. The only parameter in which zero would be an acceptable value is Fecal Coliform; all others should have measurement data reported, see item 'C' above. This is especially important if you are not sampling, you would not report a '0' as the measurement amount.
9. **Units Codes:** Each permit states the units in which you should sample and report your measurement data. **Do not change the units which are specified on your DMR as they are specific to your permit. (See Attachment 1)**
10. **Excursions:** Type or handwrite the total number of times the values within the quantity/load and/or concentration limits by row for average or maximum were exceeded for each parameter. The total number of exceedances possible is 5, depending upon the reporting requirements.
11. **Frequency Of Analysis:** Type or print the code which best reflects the actual frequency of sampling that occurred during the monitoring period for each parameter. **(See Attachment 2)**
 - a. If the frequency is not listed on attachment 2, type or write "xx/xx" in the frequency column and describe the actual frequency in the comment section.
 - b. If unable to obtain a sample you will report the numbers '495' in the frequency of analysis column. Please provide an explanation in the Comment Section. ***Not reporting a value on a required parameter in your permit may result in non-reporting violations.**
12. **Sample Type:** Type or print the sample type from attachment 3 which best reflects the actual sample type used during the monitoring period for each parameter. **Use uppercase letters. (See Attachment 3)**
13. **Name/Title Principal Executive Officer:** Print or Type the person's name that is responsible for completion of the DMR.
14. **Signature:** This must be an original signature. If sent without an original signature it will be returned and need to be resubmitted. The DMR will receive the submission date it was resubmitted on.

- 15. Telephone Number:** Please provide us with a telephone number or email address in the event that we need to contact you.
- 16. Date:** The date in which you filled out the form.
- 17. Comments:** This area is used for explanations for not sampling or other non-reporting issues.

Helpful hints:

- A.** When you receive a supply of preprinted DMR's there are being sent due to:
- Supply renewal – These are sent out monthly if your supply period is shown to be expiring. We send out a year's worth of DMR's in this mailing.
 - Permit modification – If a permit modification has been issued you should compare the new DMR's with your current permit to see what reporting requirements have changed. You will need to start reporting on these dmr's once your permit has become effective, throw the old dmr's away.
 - Number change – you will also receive a new supply if your permit number has changed. Once your permit has become effective, please discard the old dmr's.
- B.** All fillable areas on the DMR not marked with **** should be completed (with the exception of no discharge). If the DMR is not completed properly, it will be returned.
- C.** If you create and submit your own DMR forms, please use at least a **12** point font.
- D.** DMR due dates vary for each permit. If unaware of your due date, please reference your permit's Special Conditions section.