

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Commander, Navy Region Hawaii
ADDRESS 850 Ticonderoga Street, Ste 110
JBPHH, HI 96860

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

HI S000257
PERMIT NUMBER

DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

FACILITY
LOCATION

MONITORING PERIOD

YEAR MO DAY YEAR MO DAY

FROM TO

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

HI S000257
PERMIT NUMBER

DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

FACILITY
LOCATION

MONITORING PERIOD

YEAR MO DAY YEAR MO DAY

FROM TO

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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