

# Industrial Wastewater Discharge Monitoring Form

Company Name

Facility Address

Date

Report Prepared By

## Discharge Details

Monitoring Point

Discharge Start Time

Discharge End Time

Total Discharge Volume (m³)

## Sample Information

Sample Type

Sample Date & Time

Sampler Name

## Analytical Results

Parameter	Result	Unit	Standard Limit
Chemical Oxygen Demand (COD)	<input type="text"/>	mg/L	
Biochemical Oxygen Demand (BOD)	<input type="text"/>	mg/L	
Total Suspended Solids (TSS)	<input type="text"/>	mg/L	
pH	<input type="text"/>		
Oil & Grease	<input type="text"/>	mg/L	
Total Nitrogen	<input type="text"/>	mg/L	
Total Phosphorus	<input type="text"/>	mg/L	
Other (specify)	<input type="text"/>	<input type="text"/>	

Remarks / Actions Taken