

**APPENDIX E-5
COVID-19 INCIDENT
NO PROCESS DISCHARGE CERTIFICATION STATEMENT
REPORT FORM**

The recent pandemic has effected business operations at the permitted facility. This “No Process Discharge Certification” is hereby submitted as notification that our facility has had a time period for which normal operations were suspended and there was no discharge of categorical wastewater. This certification is to report that disruption of our normal operations during the time period noted below. Notification of normal operations will require written notification to SAWS. The facility can continue to discharge domestic sanitary during this time period.

CERTIFICATION

I hereby certify that (facility) _____

covered by Permit No. _____ is / did not discharging any
wastewater from processes regulated by National Categorical Pretreatment Standards from
_____ to _____ (time period of no discharge).

Check box if semi-annual required self-monitoring was effected and not obtained prior to June 1, 2020 due to normal operations not occurring.

If normal operations assume after June 1, an additional self-monitoring event is required to be submitted prior to December 1, 2020 (for a total of 2 representative sampling events.). Herein also submitted are any pertinent records (i.e., waste manifests; etc.) describing the disposal of any process wastes from the facility during the time period above.

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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, 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