Permit Number: MI0023094 v6.0

DMR Period: 5/1/2023 - 5/31/2023

DMR Version: 1

Digitally signed by:
MiEnviro Portal
Date: 2023.06.16 06:40:07 -04:00
Reason: Copy Of Record
Location: State of Michigan

I Limit Set Name: 001A -

Facility Name: Hartford WWTP

Permittee Name: City of Hartford

Set: 1 of 4

Parameter	Flow	Total Suspended Solids	Total Suspended Solids	Total Suspended Solids	Total Suspended Solids	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Carbonaceous Biochemical Oxygen Demand (CBOD5)
Mon. Loc.	Final Effluent (1)	Prior to Disinfection (B)	Prior to Disinfection (B)	Conventional Daily	Conventional Daily	Prior to Disinfection (B)	Prior to Disinfection (B)
Limit	(Report) MGD	45 mg/L	130 lbs/day	(Report) mg/L	(Report) lbs/day	40 mg/L	120 lbs/day
Stat. Base	Maximum Daily	Maximum 7-Day Average	Maximum 7-Day Average	Maximum Daily	Maximum Daily	Maximum 7-Day Average	Maximum 7-Dag Average
5/1/2023	0.562			18	84.36744		
5/2/2023	0.432			17	61.24896		
5/3/2023	0.302			15	37.7802		
5/4/2023	0.422			18	63.35064		
5/5/2023	0.441						
5/6/2023	0.516						
5/7/2023	0.338	18	61.752696	22	62.01624	10.38	36.1962672
5/8/2023	0.418	18.4	58.823688	20	69.7224	9.54	30.3616032
5/9/2023	0.387	18.2	56.902152	16	51.64128	9.88	30.7158864
5/10/2023	0.385	18.8	60.905352	18	57.7962	10.06	32.5675332
5/11/2023	0.381	18.6	59.03886	17	54.01818	9.48	30.0338412
5/12/2023	0.395	18.6	59.03886			9.48	30.0338412
5/13/2023	0.488	18.6	59.03886			9.48	30.0338412
5/14/2023	0.29	18.4	56.793732	21	50.7906	9.45	29.1126048
5/15/2023	0.367	17.8	53.255904	17	52.03326	9.57	28.8078612
5/16/2023	0.353	17.8	52.348512	16	47.10432	9.63	28.3266432
5/17/2023	0.35	18.4	53.049072	21	61.299	9.19	26.4526452
5/18/2023	0.356	18.6	52.93398	18	53.44272	10.21	29.180826
5/19/2023	0.336	18.6	52.93398			10.21	29.180826
5/20/2023	0.417	18.6	52.93398			10.21	29.180826
5/21/2023	0.252	19	52.443588	23	48.33864	10.6	29.3381184

TELEPHONE I Certify under penalty of law that this document and all attachments were DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER prepared under my direction or supervision in accordance with a system Andrew Warner designed to assure that qualified personnel properly gather and evaluate the 2693625457 information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and SIGNATURE OF PRINCIPAL EXECUTIVE AREA NUMBER YEAR МО DAY belief, true, accurate, and complete. I am aware that there are significant OFFICER OR AUTHORIZED AGENT CODE penalties for submitting false information, including the possibility of fine and TYPED OR PRINTED imprisonment for knowing violations.

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 1 of 5

Facility Name: Hartford WWTP
Permittee Name: City of Hartford

Permit Number: MI0023094 v6.0
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DMR Version: 1

5/22/2023	0.318	19.8	53.17584	21	55.69452	11.2	30.2346684
5/23/2023	0.308	20.8	54.5436	21	53.94312	10.38	27.235104
5/24/2023	0.292	20.2	51.050808	18	43.83504	10.34	26.3734152
5/25/2023	0.285	20	48.443724	17	40.4073	10.2	24.5839848
5/26/2023	0.367	20	48.443724			10.2	24.5839848
5/27/2023	0.26	20	48.443724			10.2	24.5839848
5/28/2023	0.258	19	46.522188	18	38.73096	9.76	23.7613272
5/29/2023	0.263	18.4	43.279596	18	39.48156	10.52	24.3733164
5/30/2023	0.284	17.2	39.596652	15	35.5284	11.2	25.6716876
5/31/2023	0.289	16.6	38.060424	15	36.1539	12.04	27.6577752

Set: 2 of 4

Parameter	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Total Phosphorus (as P)	Total Phosphorus (as P)	Total Residual Chlorine	Total Mercury	Total Mercury
Mon. Loc.	Conventional Daily	Conventional Daily	Prior to Disinfection (B)	Prior to Disinfection (B)	Final Effluent (1)	Final Effluent (1)	Final Effluent (1)
Limit	(Report) mg/L	(Report) lbs/day	(Report) mg/L	(Report) lbs/day	38 ug/L	(Report) ng/L	(Report) lbs/day
Stat. Base	Maximum Daily	Maximum Daily	Maximum Daily	Maximum Daily	Maximum Daily	Maximum Daily	Maximum Daily
5/1/2023	12.1	56.713668	0.62	2.9059896	10		
5/2/2023	9.9	35.668512	0.78	2.8102464	20		
5/3/2023	9.2	23.171856	0.836	2.10561648	10		
5/4/2023	10.1	35.546748	0.908	3.19568784	30		
5/5/2023					10		
5/6/2023							
5/7/2023	10.6	29.880552	0.91	2.5652172			
5/8/2023	7.9	27.540348	0.913	3.18282756	10		
5/9/2023	11.6	37.439928	0.85	2.743443	20		
5/10/2023	10.1	32.43009	0.73	2.343957	10		
5/11/2023	7.2	22.878288	0.933	2.96464482	40		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system	Andrew Warner	TELEPHONE		DATE		
	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, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and		2693625457				
belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine as imprisonment for knowing violations.		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 2 of 5

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5/12/2023					10	
5/13/2023						
5/14/2023	10.45	25.27437	0.753	1.8212058		
5/15/2023	8.5	26.01663	0.594	1.81810332	10	
5/16/2023	11.9	35.033838	0.798	2.34932796	10	
5/17/2023	7.9	23.0601	0.986	2.878134	30	
5/18/2023	12.3	36.519192	0.871	2.58603384	10	
5/19/2023					10	
5/20/2023						
5/21/2023	12.4	26.060832	0.42	0.8827056		
5/22/2023	11.5	30.49938	0.583	1.54618596	20	
5/23/2023	7.8	20.036016	0.512	1.31518464	10	
5/24/2023	7.7	18.751656	0.606	1.47577968	10	
5/25/2023	11.6	27.57204	0.429	1.0196901	20	
5/26/2023					10	
5/27/2023						
5/28/2023	10.2	21.947544	1.03	2.2162716		
5/29/2023	15.3	33.559326	0.996	2.18464632		
5/30/2023	11.2	26.527872	1.1	2.605416		
5/31/2023	11.9	28.682094	1.3	3.133338		

Set: 3 of 4

Parameter	Total Mercury - uncorrected	Total Mercury - field duplicate	Total Mercury - field blank	Total Mercury - laboratory method blank	Fecal Coliform	Fecal Coliform	CBOD5 Minimum % Removal
Mon. Loc.	Mercury QA- Effluent	Mercury QA- Effluent	Mercury QA- Effluent	Mercury QA- Effluent	Final Effluent (1)	Fecal Daily	Percent Removal (K)
Limit	(Report) ng/L	(Report) ng/L	(Report) ng/L	(Report) ng/L	400 #/100mL	(Report) #/100mL	(Report) %
Stat. Base	Maximum Daily	Maximum Daily	Maximum Daily	Maximum Daily	Max 7-Day Geometric Mean	Maximum Daily	Minimum Daily % Removal
5/1/2023						62	0.906923077
5/2/2023						52	0.9208

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system	Andrew Warner	-	TELEPHONE	DATE		
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TYPED OR PRINTED	belief, true, accurate, and complete. I am aware that there are significant	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

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5/3/2023		32	0.92
5/4/2023		41	0.930344828
5/5/2023		25	
5/6/2023			
5/7/2023	40.25814645		0.94111111
5/8/2023	37.58945013	44	0.944561404
5/9/2023	35.48773042	39	0.9072
5/10/2023	32.30384583	20	0.935873016
5/11/2023	31.47443608	36	0.954285714
5/12/2023	34.40193551	39	
5/13/2023	34.40193551		
5/14/2023	34.40193551		0.9346875
5/15/2023	32.27916841	32	0.943333333
5/16/2023	32.91570091	43	0.902857143
5/17/2023	35.20697522	28	0.940377358
5/18/2023	38.03850049	53	0.919344262
5/19/2023	32.21812419	17	
5/20/2023	32.21812419		
5/21/2023	32.21812419		0.932972973
5/22/2023	34.33687685	44	0.923333333
5/23/2023	32.16173273	31	0.945263158
5/24/2023	34.3653486	39	0.951875
5/25/2023	31.44570697	34	0.936438356
5/26/2023	34.99058299	29	
5/27/2023	34.99058299		
5/28/2023	34.99058299		0.960769231
5/29/2023	37.35309653	61	0.917297297
5/30/2023	44.92345935	78	0.921403509
5/31/2023	52.37404629	84	0.925625

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Parameter	Total Suspended	рН	рН	Dissolved Oxygen		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system	Andrew Warner	TELEPHONE		DATE		
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Removal Final Effluent Final Efflu		Solids Minimum					
Mon. Loc. Removal (K)							
Limit (Report)	Mon Loc						
Stat. Base Minimum Daily % Removal Minimum Daily Minimum Daily Minimum Daily Minimum Daily 5/1/2023 0.88 7.3 7.3 8.7 5/2/2023 0.897590361 7.3 7.3 8.3 5/3/2023 0.918918919 7.3 7.2 8.5 5/4/2023 0.918918919 7.3 7.3 8.4 5/5/2023 7.2 7.2 8.1 5/6/2023 0.88172043							
State Stat	Limit		6.5 SU	9.0 SU	3.0 mg/L		
5/2/2023 0.897590361 7.3 7.3 8.3 5/3/2023 0.791666667 7.2 7.2 8.5 5/4/2023 0.918918919 7.3 7.3 8.4 5/5/2023 0.88172043	Stat. Base		Minimum Daily	Maximum Daily	Minimum Daily		
5/3/2023 0.791666667 7.2 7.2 8.5 5/4/2023 0.918918919 7.3 7.3 8.4 5/5/2023 7.2 7.2 8.1 5/6/2023 8.1 8.1 5/7/2023 0.89172043 8.1 5/8/2023 0.892473118 7.2 7.2 8.1 5/9/2023 0.913043478 7.1 7.1 8.1 5/10/2023 0.901098901 7.1 7.1 8.1 5/11/2023 0.895061728 7 7 7.8 5/12/2023 7.2 7.2 7.6 5/13/2023 0.895037037 7 7.6 5/14/2023 0.803561644 7.1 7.1 7.4 5/16/2023 0.9 7 7 7.3 5/17/2023 0.883333333 7.1 7.1 7.5 5/18/2023 0.890243902 7.1 7.1 7.5 5/20/2023 7.1 7.1 7.5 5/21/2023 0.864705882 7.2 7.2 7.3 5/22/2023 0.861842105 7.2 7.2 7.3 5/23/2023 0.881944444 7.2 7.2 7.3 5/24/2023 0.881944444 7.2	5/1/2023	0.88		7.3	8.7		
5/4/2023 0.918918919 7.3 7.3 8.4 5/5/2023 7.2 7.2 8.1 5/6/2023 8.1 8.1 5/7/2023 0.88172043 8.1 5/8/2023 0.913043478 7.1 7.1 5/10/2023 0.901098901 7.1 7.1 8.1 5/11/2023 0.895061728 7 7 7.8 5/13/2023 7.2 7.2 7.6 5/13/2023 7.2 7.2 7.6 5/13/2023 0.87037037 7 7.3 5/15/2023 0.883561644 7.1 7.1 7.4 5/16/2023 0.9 7 7 7.3 5/18/2023 0.890243902 7.1 7.1 7.5 5/19/2023 0.890243902 7.1 7.1 7.5 5/20/2023 7.1 7.1 7.1 7.5 5/21/2023 0.864705882 7.2 7.2 7.3 5/22/2023 0.861842105 7.2 7.2 7.3 5/22/2023 0.87668852 7.2 7.2 7.3 5/23/2023 0.88194444 7.2 7.2 7.1 5/26/2023 0.88194444 7.2 7.2 7.	5/2/2023	0.897590361		7.3			
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5/28/2023 0.890243902	5/27/2023						
	5/28/2023	0.890243902					

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system	Andrew Warner	TELEPHONE		DATE		
	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, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and		2693625457				
TYPED OR PRINTED	belief, true, accurate, and complete. I am aware that there are significant	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 5 of 5

Facility Name: Hartford WWTP
Permittee Name: City of Hartford

Permit Number: MI0023094 v6.0
DMR Period: 5/1/2023 - 5/31/2023

DMR Version: 1

5/29/2023	0.875	7.1	7.1	6.9	
5/30/2023	0.898648649	7.2	7.2	6.8	
5/31/2023	0.902597403	7.1	7.1	7	

DMR Instructions:
DMR Comments: (none)

• Set 2 DMR Value Comments:

• Date: 5/11/2023 12:00:00 AM, Column 5 Comment: Our flow equalization tank is nearly finished. When the flow evens out it will be much easier to get the dose right every day.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system	Andrew Warner		TELEPHONE			
	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, or those persons directly responsible for gathering the		2693625457				
TYPED OR PRINTED	information, the 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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 6 of 5

DISCHARGE MONITORING REPORT (DMR)

Facility Name: Hartford WWTP
Permittee Name: City of Hartford

Permit Number: MI0023094 v6.0
DMR Period: 5/1/2023 - 5/31/2023

DMR Version: 1

Limit Set: 001A

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION					FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
Flow (50050) Final Effluent (1) Lab ID:	SAMPLE MEASUREMENT	0.36	0.562	MGD	****	****	****	****		Daily	Report Total Daily Flow
	PERMIT REQUIREMENT	REPORT Maximum Monthly Average	REPORT Maximum Daily		****	****	****			Daily	Report Total Daily Flow
Total Suspended Solids (00530) Prior to Disinfection (B)	SAMPLE MEASUREMENT	52.1	52.6	lbs/day	****	18.3	20.8	mg/L		5X Weekly	24-Hr Composit e
Lab ID:	PERMIT REQUIREMENT	88 Maximum Monthly Average	130 Maximum 7-Day Average	_ ibs/day	****	30 Maximum Monthly Average	45 Maximum 7-Day Average			5X Weekly	24-Hr Composit e
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082) Prior to Disinfection	SAMPLE MEASUREMENT	29.6	36.2	lbs/day	****	10.4	12.0	mg/L		5X Weekly	24-Hr Composit e
(B) Lab ID:	PERMIT REQUIREMENT	73 Maximum Monthly Average	120 Maximum 7-Day Average	IDS/GAY	****	25 Maximum Monthly Average	40 Maximum 7-Day Average	mg/ n		5X Weekly	24-Hr Composit e
Total Phosphorus (as P) (00665) Prior to Disinfection (B)	SAMPLE MEASUREMENT	2.3	3.2	lbs/day	****	0.803	1.3	mg/L		5X Weekly	24-Hr Composit e
Lab ID:	PERMIT REQUIREMENT	2.9 Maximum Monthly Average	REPORT Maximum Daily		****	1.0 Maximum Monthly Average	REPORT Maximum Daily	97.2		5X Weekly	24-Hr Composit e

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system	Andrew Warner	1	ELEPHONE			
	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, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and		2693625457				
TYPED OR PRINTED	belief, true, accurate, and complete. I am aware that there are significant	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 1 of 2

DISCHARGE MONITORING REPORT (DMR)

Facility Name: Hartford WWTP
Permittee Name: City of Hartford

Permit Number: MI0023094 v6.0
DMR Period: 5/1/2023 - 5/31/2023

DMR Version: 1

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION					FREQUENCY	SAMPLE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	1111	
Total Residual Chlorine (50060) Final Effluent (1)	SAMPLE MEASUREMENT	****	****	****	****	****	40	- /-		5X Weekly	Grab	
Lab ID:	PERMIT REQUIREMENT	****	****	****	****	****	38 Maximum Daily	ug/L		5X Weekly	Grab	
Total Mercury (71900) Final Effluent (1)	SAMPLE MEASUREMENT	*G	*G	lbs/day	****	*G	*G			Quarterly	Calculat ion	
Lab ID:	PERMIT REQUIREMENT	REPORT Maximum Monthly Average	REPORT Maximum Daily		****	REPORT Maximum Monthly Average	REPORT Maximum Daily	ng/L		Quarterly	Calculat ion	
Total Mercury (71900) Hg Calculation (X)	SAMPLE MEASUREMENT	*G	****		****	*G	****			Quarterly	Calculat ion	
Lab ID:	PERMIT REQUIREMENT	0.000012 12-Month Rolling Average	****	lbs/day	****	4.0 12-Month Rolling Average	****	ng/L	Quarterly	Calculat ion		
Fecal Coliform (74055) Final Effluent (1)	SAMPLE MEASUREMENT	****	****		****	38.9	52.4			5X Weekly	Grab	
Lab ID:	PERMIT REQUIREMENT	****	****	****	****	200 Max Monthly Geometric Mean	400 Max 7-Day Geometric Mear	#/100mL		5X Weekly	Grab	
CBOD5 Minimum % Removal (80091) Percent Removal (K)	SAMPLE MEASUREMENT	****	****	****	96.1	****	90.3			Monthly	Calculat ion	
Lab ID:	PERMIT REQUIREMENT	****	****		85 Minimum Monthly % Removal	****	REPORT Minimum Daily % Removal	8		Monthly	Calculat ion	
Total Suspended Solids Minimum % Removal	SAMPLE MEASUREMENT	****	****	****	91.9	****	79.2	90		Monthly	Calculat ion	
ME/TITLE PRINCIPAL EXECUTIVE	OFFICER	, , ,	of law that this documen			7 . 1		TELEPHONE		DA	TE	

prepared under my direction or supervision in accordance with a system Andrew Warner designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who 2693625457 manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and SIGNATURE OF PRINCIPAL EXECUTIVE NUMBER YEAR AREA DAY belief, true, accurate, and complete. I am aware that there are significant OFFICER OR AUTHORIZED AGENT CODE penalties for submitting false information, including the possibility of fine and TYPED OR PRINTED imprisonment for knowing violations.

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 2 of 2

DISCHARGE MONITORING REPORT (DMR)

Facility Name: Hartford WWTP
Permittee Name: City of Hartford

Permit Number: MI0023094 v6.0
DMR Period: 5/1/2023 - 5/31/2023

DMR Version: 1

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
(81011) Percent Removal (K) Lab ID:	PERMIT REQUIREMENT	****	****		85 Minimum Monthly % Removal	****	REPORT Minimum Daily % Removal			Monthly	Calculat ion
pH (00400) Final Effluent (1)	SAMPLE MEASUREMENT	****	****		7.0	****	7.3			5X Weekly	Grab
Lab ID:	PERMIT REQUIREMENT	****	****	****	6.5 Minimum Daily	****	9.0 Maximum Daily	SU		5X Weekly	Grab
Dissolved Oxygen (00300) Final Effluent (1)	SAMPLE MEASUREMENT	****	****		6.7	****	****			5X Weekly	Grab
Lab ID:	PERMIT REQUIREMENT	****	****	****	3.0 Minimum Daily	****	****	mg/L		5X Weekly	Grab

DMR Instructions:

DMR Comments: (none)

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TYPED OR PRINTED	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

Permit Number: MI0023094 v6.0 **DMR Version:** 1 Generated: 6/16/2023 6:40 AM Page 3 of 2

Submission Identifier: DMR-MI0023094-20230531-1

 $\textbf{Submission Signature Hash:} \ / 7 eWaSkDwajdRkWKiAY4p4FxgOWgUBQqXYeCBmoTZ1M=\\$

Submitter Name: Andrew Warner

Submitter Email: warnerwastewater@gmail.com

Submitted Date/Time: 6/16/2023 6:40:07 AM