STREAM MONITORING PROGRAM REPORT FORM FOR A MAJOR SPILL

(Attn: Christine Barber (Permitting, Compliance and Enforcement Program) Fax No. 404-362-3881)

Name of City/County: _____ Spill Amount: _____

Date Spill Occurred: _____ Date Spill Reported to EPD _____

Spill Location: _____ Date of Public Notice (PN): _____

Name of Receiving Stream Affected: _____

Upstream Sampling Location: [see GPS location] Written Report Submitted to EPD: (Y/N)

Downstream sampling Location: [see GPS location] Copy of PN Submitted to EPD: (Y/N)

		UP STREAM				DOWN STREAM			
	DATE	DO	TEMP	pH	FCOLI	DO	TEMP	pH	FCOLI
DAY 1									
DAY 2									
DAY 3									
DAY 4									
DAY 5									
DAY 6									
DAY 7									
Week 1 Geometric Mean:									
WEEK 2									
WEEK 3									
WEEK 4									
Month 1 Geometric Mean: (Use All 10 data points)									
MONTH									
WEEK 1									
WEEK 2									
WEEK 3									
WEEK 4									
Month 3 Geometric Mean:									
MONTH 12									
WEEK 1									
WEEK 2									
WEEK 3									
WEEK 4									
Month 12 Geometric Mean:									