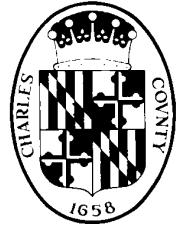


# CHARLES COUNTY GOVERNMENT

Department of Utilities  
WILLIAM A. SHREVE, SR. DIRECTOR



## AUTOMOTIVE ESTABLISHMENT REPORTING FORM

(Please type or print legibly in blue or black ink)

1. Wastewater Discharge Permit Number: \_\_\_\_\_
2. Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_  
\_\_\_\_\_
4. Business address: \_\_\_\_\_  
\_\_\_\_\_
5. Date of last oil/water separator cleaning/pump-out: \_\_\_\_\_
6. Company performing cleaning/pump-out service: \_\_\_\_\_
7. Disposal method of other wastes and solvents: \_\_\_\_\_

*"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, or those persons directly responsible for gathering the 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."*

Date	Signature of Authorized Representative	Title
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**Please complete this form and mail it along with a copy of your last invoice for cleaning/pump-out to:**

Charles County Department of Public Works - Utilities  
5310 Hawthorne Road  
La Plata, MD 20646  
ATTN: Karl L. Ott, Pretreatment Specialist  
If you have questions about this form, please call 301-609-5632.