WASTE WATER TREATMENT DISPOSAL SUMMARY LOG (only one site per form)

	·• per 10111,	
REPORTING PERIOD: Jan 1 to June 30 July 1 to Dec 31	Waste	Total Volume
STP LICENSE NAME:	Туре	To update volume value, highlight value and press F9
	S	0
LICENSE #:	PT/VT	0
	G	0
Waste Water Treatment Facility Name:	С	0
	GrW	0

0

0

Mail completed forms to: DEQ, WUTMB, Septic Tank Pumper Program, PO Box 200901, Helena, MT 59620-0901

	DISPOSAL	G – G	VOLUME by WASTE TYPE S - Septic, PT/VT – Portable Toilet/Vault G – Grease, C - Carwash, GrW – Gray Water, O - Other (specify)					DATE AND TIME	DISPOSED BY
	TIME	s	PT/ VT	G	с	<mark>GrW</mark>	O	PUMPED	(list pumper name)