FACILITY NAME:	
WV/NPDES PERMIT NO.:	
CONTACT PERSON/PHONE NUMBER:	
1. CUSTOMERS (single family dwelling establishments)	
2. OTHER (Please include commercial, public service districts, apartments, apartments, etc. counted as system.)(4500 gallons per month)	ment complexes, subdivisions,
Customer Name	Estimated Daily Wastewater Flow
TOTA	AL FLOW
I certify under penalty of law that the under my direction or supervision. The the best of my knowledge and belief, to I am aware that there are significant place information, including the possible imprisonment for knowing violations.	information submitted, is to rue, accurate, and complete. penalties for submitting
DATE	OFFICIAL'S SIGNATURE
We will process your personal information (email adnumber) in accordance with the State of West Virgicustomary business purposes. Your personal information third parties in the normal course of business of regulatory requirements, including Freedom of Information and Waste Management will appropriately secure you questions about our use of your personal information officer at depprivacyofficer@wv.gov.	nia's Privacy Policy for appropriate and on may be disclosed to other State agencies r as needed to comply with statutory or ation Act requests. The Division of Water or personal information. If you have any
SECTION B (TO BE COMPLETED BY THE SECT	ION)
1. Customers	

Total Flow =				
350		350 GPD		
3.	Total Customers			
4.	Annual Permit Fee			

2. Customer Equivalents