

PAGE 2 OF 2

\* SITE NOT ACCESSED DURING THIS QUARTER, NO SAMPLES TAKEN

NAME SEAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

**Form Approved**

NAME	ADDRESS
SEAN COULMAN	1065 WOODLAND AVE #1

ADDRESS
1065 WOODLAND AVE #1
WOODLAND PARK CO 80863

COG-	50213
PERMIT NUMBER	

DISCHARGE NUMBER
------------------

OMB No. 2040-0004  
Approval expires 10-31-94

FACILITY	AGENTS DEL LODGE CLAIM
LOCATION	UNINC, EL PASO COUNTY
ATTENTION:	

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2023	47	01		2023	09	30

(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)
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**NOTE: Read instructions before completing this form.**

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)				QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT PERMIT REQUIREMENT	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
SAMPLE MEASUREMENT PERMIT REQUIREMENT	SAMPLE	*****	*****	*****	*****		*****		NO SAMPLE TAKEN		
	MEASUREMENT	*****	*****	*****	*****		*****				
	PERMIT	*****	*****	*****	*****		*****				
	REQUIREMENT	*****	*****	*****	*****		*****				
SAMPLE MEASUREMENT PERMIT REQUIREMENT	SAMPLE	*****	*****	*****	*****	30-DAY AVG	*****				
	MEASUREMENT	*****	*****	*****	*****		*****				
	PERMIT	*****	*****	*****	*****		*****				
	REQUIREMENT	*****	*****	*****	*****		*****				
SAMPLE MEASUREMENT PERMIT REQUIREMENT	SAMPLE	*****	*****	*****	*****	30-DAY AVG	*****				
	MEASUREMENT	*****	*****	*****	*****		*****				
	PERMIT	*****	*****	*****	*****		*****				
	REQUIREMENT	*****	*****	*****	*****		*****				
SAMPLE MEASUREMENT PERMIT REQUIREMENT	SAMPLE	*****	*****	*****	*****	30-DAY AVG	*****				
	MEASUREMENT	*****	*****	*****	*****		*****				
	PERMIT	*****	*****	*****	*****		*****				
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	PERMIT	*****	*****	*****	*****		*****				
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	PERMIT	*****	*****	*****	*****		*****				
	REQUIREMENT	*****	*****	*****	*****		*****				
SAMPLE MEASUREMENT PERMIT REQUIREMENT	SAMPLE	*****	*****	*****	*****	30-DAY AVG					



PERMITTEE NAME/ADDRESS (include Facility Name/Location if different)

NAME SEAN COWMAN

ADDRESS 1065 WOODLAND AVE #1

WOODLAND PARK, CO 80863

FACILITY AGENTS DEL LODGE CLAIM

LOCATION UNINC. EL PASO COUNTY

ATTENTION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

COG-502113  
PERMIT NUMBER

DISCHARGE NUMBER

(2-16)

(17-19)

Form Approved.

OMB No. 2040-0004

Approval expires 10-31-94

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2022	10	01	2022	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
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PERMIT REQUIREMENT	SAMPLE MEASUREMENT	*****	*****	*****	*****					
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	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	30-DAY AVG	*****			
PERMIT REQUIREMENT	SAMPLE MEASUREMENT	*****	*****	*****	*****					
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	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	30-DAY AVG	*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318.

(Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (reference all attachments here)

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE

NUMBER

YEAR

MO

DAY

DATE