

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

NAME Mora Independent School District
ADDRESS PO Box 179
Mora, NM 87732

NM 0031097
PERMIT NUMBER

001-A
DISCHARGE NUMBER

FACILITY Athletic Field
LOCATION Ranger Road, Hwy 518
Mora, NM 87732

MONITORING PERIOD		
YEAR	MO	DAY
2022	2	01

FROM	TO
2022	2022

NOTE: Read instructions before

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SAMPLE PERMIT REQUIREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Beverly Dobbins-Monroy, Signatory Authority

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system of internal controls that assures 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.

Beverly Dobbins-Monroy
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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

575 387-3105
TELEPHONE NUMBER

DATE 2 2 0 3 0 3
AREA NUMBER YEAR MO DAY