11/16/15

Application for Wastewater Directly Discharged to Plant

Date:

Company Name: _____

Contact Information: _____

_____

Facility Discharging Waste: _____

Potential Contaminants: _____

Volume of Wastewater: _____

Name (print) : _____

Title : _____

Signature:_____Date_____

Attach any analytical data :

Return to: Erik Schell
La Crosse WWU
905 Joseph Houska Drive
La Crosse, WI 54601
schelle@cityoflacrosse.org