

NOTE: EPA proposes the text in this Appendix as part of the Proposed 2026 MSGP.

Proposed Appendix M – Discharge Monitoring Report (DMR) Form

Part 7.2 requires you to use the electronic DMR system to prepare and submit your Discharge Monitoring Report (DMR) form. However, if you are given approval by the EPA Regional Office to use a paper DMR form, and you elect to use it, you must complete and submit the following form.

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NPDES FORM 6100-29		UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460 MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (DMR) FORM	OMB No. 2040-NEW Exp. Date: MM/DD/YYYY
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A. Approval to Use Paper DMR Form

1. Have you been granted a waiver from electronic reporting from the EPA Regional Office*? YES NO

If yes, check which waiver you have been granted, the name of the EPA Regional Office staff person who granted the waiver, and the date of approval:

Waiver granted: The owner/operator's headquarters is physically located in a geographic area (i.e., ZIP code or census tract) that is identified as under-served for broadband Internet access in the most recent report from the Federal Communications Commission.

The owner/operator has issues regarding available computer access or computer capability

Name of EPA staff person that granted the waiver: _____

Date approval obtained: ____ / ____ / _____

*** Note: Note: You are required to obtain approval from the applicable EPA Regional Office prior to using this paper DMR form. If you have not obtained a waiver, you must file this form electronically using the NetDMR at <https://npdes-ereporting.epa.gov/net-netdmr>**

B. Permit Information

1. NPDES ID: _____

2. Reason(s) for Submission (Check all that apply):

Submitting monitoring data (Fill in all Sections).

Reporting no discharge for all discharge points for this monitoring period (Fill in Sections A, B, C, D, E.1, and G).

Reporting that your site status has changed to inactive and unstaffed and there are no industrial materials or activities exposed to stormwater (Fill in Sections A, B, C, D, and F.4 (include date of status change in comment field).

Reporting that your site status has changed to active and/or there are industrial materials or activities exposed to stormwater (Fill in all Sections and include date of status change in comment field in Section F.4).

C. Facility Operator Information

1. Operator Information:

Operator Name: _____

Mailing Address:

Street: _____

City: _____ State: ____ ZIP Code: _____ - _____

Phone: _____ - _____ - _____ Ext. _____

E-mail: _____

2. DMR Preparer (Complete if DMR was prepared by someone other than the certifier):

First Name, Middle Initial, Last Name: _____

Organization: _____

Phone: _____ - _____ - _____ Ext. _____

E-mail: _____

D. Facility Information

1. Facility Name:

2. Facility Address:
 Street/Location:

City: State: ZIP Code:

County or Similar Government Subdivision:

E. Discharge Information

1. Identify monitoring period: Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

Quarter 1 (January 1 – March 31) Quarter 1: From / To /

Quarter 2 (April 1 – June 30) Quarter 2: From / To /

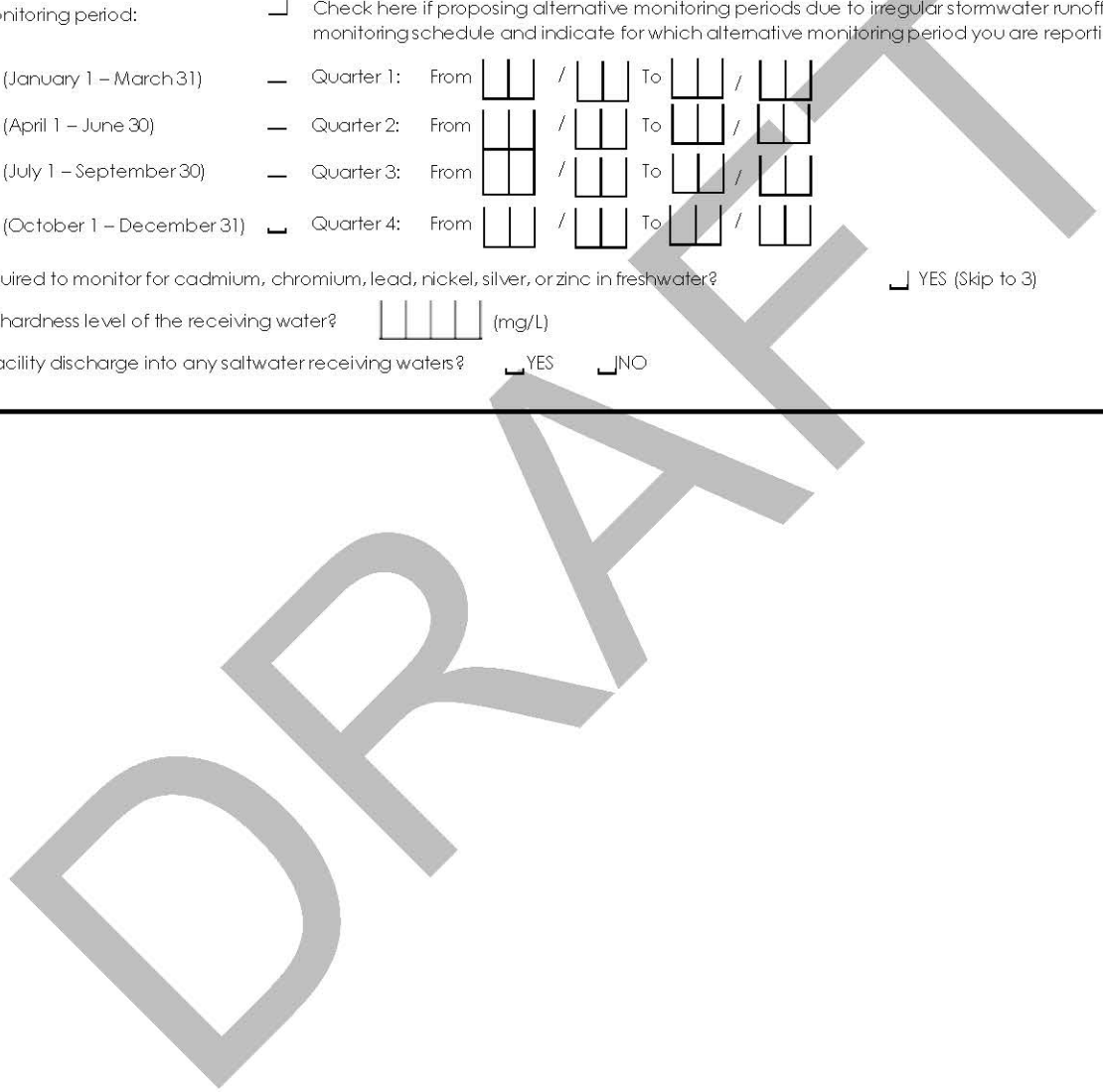
Quarter 3 (July 1 – September 30) Quarter 3: From / To /

Quarter 4 (October 1 – December 31) Quarter 4: From / To /

2. Are you required to monitor for cadmium, chromium, lead, nickel, silver, or zinc in freshwater? YES (Skip to 3) NO (Skip to 4)

3. What is the hardness level of the receiving water? (mg/L)

4. Does your facility discharge into any saltwater receiving waters? YES NO



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F. Monitoring Information Note: Make additional copies of this form as necessary.

1. Nature of Discharge: Rainfall (Complete line items 2.a., 2.b., & 2.c.) Snowmelt

2. a. Duration of the rainfall event (hours): 2.b. Rainfall amount (inches): . 2.c. Time since previous measurable storm event (days):

3.a. Discharge Point ID (list the same 3-digit discharge points identified on the NOI form)	3.b. Check if Any Discharge Points are Substantially Identical to Other Discharge Points Listed	3.c. Check if No Discharge	3.d. Monitoring Type IM, BM, ELG, S/T, I, O*	3.e. Parameter	3.f. Quantity or Concentration	3.g. Units	3.h. Results Description	3.i. Collection Date	3.j. Exceedance solely attributable to natural background pollutant levels per Part 5.2.6.1	3.k. Exceedance due to run-on per Part 5.2.6.2	3.l. Exceedance due to an abnormal event per Part 5.2.6.3	3.m. Exceedance but discharge does not result in any exceedance of water quality standards per Part 5.2.6.5	3.n. Aluminum Exceedance demonstrated to not result in an exceedance of your facility-specific criteria per Part 5.2.6.4.a	3.o. Copper Exceedance demonstrated to not result in an exceedance of your facility-specific criteria per Part 5.2.6.4.b
	<input type="checkbox"/> Substantially identical to discharge point: _____	<input type="checkbox"/>									<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Substantially identical to discharge point: _____	<input type="checkbox"/>									<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Substantially identical to discharge point: _____	<input type="checkbox"/>									<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Substantially identical to discharge point: _____	<input type="checkbox"/>									<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* (IM) - Indicator monitoring; (BM) - Benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

G. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.

First Name, Middle, Last Name

Title:

Signature: _____

Date: / /

E-mail:

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Instructions for Completing EPA Form 6100-29

**Discharge Monitoring Report (DMR) for Stormwater Discharges
Associated with Industrial Activity Under the NPDES Multi-Sector General Permit**

This Form Replaces Form 6100-29 (03/21) Form OMB No. 2040-NEW

Who Must Submit a Discharge Monitoring Report to EPA?

Facilities covered under EPA's NPDES Stormwater Multi-Sector General Permit (MSGP or permit) that are required to monitor pursuant to Parts 4.2 and 8 of the permit must submit Discharge Monitoring Reports (DMRs) consistent with the reporting requirements specified in Part 7.3 of the permit.

Completing the Form

Obtain and read a copy of the 2026 MSGP, viewable at <https://www.epa.gov/npdes/stormwater-discharges-industrial-activities>. To complete this form, type or print, using uppercase letters, in the appropriate areas only. Please place each character between the marks. Abbreviate if necessary to stay within the number of characters allowed for each item. Use only one space for breaks between words, but not for punctuation marks unless they are needed to clarify your response. Please submit original document with signature in ink - do not send a photocopied signature. **Photocopy your DMR form for your records before you send the completed original form to the appropriate address.**

Section A. Approval to Use Paper DMR Form

You must indicate whether you have been granted a waiver from electronic reporting from the EPA Regional Office. Note that you are not authorized to use this paper DMR form unless the EPA Regional Office has approved its use. Where you have obtained approval to use this form, indicate the waiver that you have been granted, the name of the EPA staff person who granted the waiver, and the date that approval was provided. See <https://www.epa.gov/npdes/contact-us-stormwater> for a list of EPA Regional Office contacts.

Section B. Permit Information

Provide the NPDES ID (i.e., NOI tracking number) assigned to the facility for which this DMR is being submitted.

Indicate your reason(s) for submitting this DMR by checking all boxes that apply. The reasons for submission are defined as follows:

- *Submitting monitoring data:* For each storm sampled, submit one DMR form with data for all discharge points sampled. Select this reason even if you only have monitoring data for some of your discharge points (i.e., some discharge points did not discharge). If you select this reason you are required to complete all Sections of the form.
- *Reporting no discharge for all discharge points for this monitoring period:* Indicates that there were no discharges from all discharge points during this monitoring period. If you select this reason you are only required to complete Sections A, B, C, D, E.1, and G.
- *Reporting that your site status has changed to inactive and unstaffed and there are no industrial materials or activities exposed to stormwater:* Indicates that your facility is currently inactive and unstaffed and there are no industrial materials or activities exposed to stormwater (See Part 4.2.1.3 of the permit for more information). If you select this reason you are only required to complete Sections A, B, C, D, and F.4 (include date of status change in comment field).

- *Reporting that your site status has changed from inactive to active and/or there are industrial materials or activities exposed to stormwater:* Indicates that your facility is currently active (See Part 4.2.1.3 of the permit for more information). If you select this reason you are required to complete all Sections of the form and include date of status change in the comment field in Section F.4.

Section C. Facility Operator Information.

Provide the legal name of the person, firm, public organization, or any other entity that operates the facility for which this DMR is being submitted. An operator of a facility is the legal entity that controls the operation of the facility. Refer to Appendix A of the permit for the definition of "operator". Provide the operator's mailing address, phone number, and e-mail. The operator information in this Section should match the operator information provided on your NOI form.

Provide the name, organization, phone number, an e-mail address for the person who prepared this DMR form.

Section D. Facility Information

Enter the official or legal name and complete street address, including city, state, ZIP code, and county or similar government subdivision of the facility. If the facility lacks a street address, indicate the general location of the facility (e.g., Intersection of State Highways 61 and 34). Complete facility information must be provided for the DMR form to be valid. The facility information in this Section should match the facility information provided on your NOI form.

Section E. Discharge Information.

Indicate the appropriate monitoring period (Quarter 1, 2, 3, or 4) covered by the DMR. "Alternative" monitoring periods can apply to facilities located in arid and semi-arid climates, or in areas subject to snow or prolonged freezing. To use alternative monitoring periods, you must provide a revised monitoring schedule here. If using alternative monitoring periods, identify the first day of the monitoring period through the last day of the monitoring period for each of the four periods. The dates should be displayed as month / day . See Parts 4.1.6 and 4.1.7 of the permit for more information.

If you are submitting benchmark monitoring data, identify if your facility is required to collect benchmark samples for one or more hardness-dependent metals (i.e., cadmium, lead, nickel, silver, and zinc). If you select "yes" to this question provide the hardness level of the receiving water (in mg/L). If you select "no" to this question, you must identify if your facility discharges into any saltwater receiving waters.

Section F. Monitoring Information

For the reported monitoring event indicate whether the discharge was from a rainfall or snowmelt event. If you select "rainfall" then indicate the duration (in hours) of the rainfall event, rainfall total (in inches) for that rainfall event, and time (in days) since the previous measurable storm event in line items 2.a-c. For both rainfall and snowmelt monitoring, you must identify the date of collection for the monitoring event in column 3.i. of the table. If the discharge occurs during a period of both rainfall and

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snowmelt, check both the rainfall and snowmelt boxes and report the appropriate rainfall information in item 2.a-c. To report multiple monitoring events in the same reporting period, copy this form and enter each monitoring event separately with data for all discharge points sampled.

Identify all the discharge points from your facility that discharge stormwater. Each discharge point must be assigned a unique 3-digit number (e.g., 001, 002, 003), and should match the discharge points identified on your NOI form.

If any discharge points are substantially identical, check the box in 3.b and identify the discharge point that the discharge point in 3.a is substantially identical to. In 3.d – k, you only need to provide benchmark monitoring data for one of the discharge points if it is substantially identical.

For any discharge point for which there was no discharge during the monitoring period, check the box in 3.c.

In 3.d, identify the type of monitoring using the specified codes, in parentheses, below:

- (IM) – Indicator monitoring
- (BM) – Benchmark monitoring
- (ELG) – Annual effluent limitations guidelines monitoring;
- (S/T) – State- or Tribal-specific monitoring;
- (I) – Impaired waters monitoring; or
- (O) – Other monitoring as required by EPA.

In 3.e, enter each "parameter" (or "pollutant") monitored. For BM and ELG monitoring, use the same parameter name as in Part 8 of the permit.

In 3.f., enter a sample measurement value for each parameter analyzed and required to be reported. When a parameter is not detected above the minimum level, enter the data qualifier signifying less than the minimum level for that parameter (e.g., < 1 µg/L, if the minimum level for a parameter is 1 µg/L). Two exceptions apply in limited situations: 1) For a parameter with a benchmark, limitation, or water quality standard that is below the minimum level; or 2) When the result of analysis is between the method detection limit and the minimum level (i.e., a confirmed detection but below the level that can be reliably quantified, also known as "estimated value"), the permittee may report the No Data Indicator Code for "below minimum level" (NODI B) so long as the test method used for analysis has the lowest minimum level of the EPA-approved analytical methods for the parameter. Otherwise, report the data qualifier signifying less than the minimum level.

In 3.g., enter the units for sample measurement values (i.e., "mg/L" for milligrams per liter) for each parameter analyzed and required to be reported. For monitoring results reported as NODI B this space will be left blank and the units will be reported in Column 3.f.

3.h. must be completed for any monitoring results reported as NODI B in the "Quality or Concentration" column. For NODI B, report the laboratory method detection limit and units in this column.

In 3.i. identify the sampling date for each parameter monitoring result reported on this form.

3.j. *Exceedance solely attributable to natural background pollutant levels per Part 5.2.6.1:* Check box if following the first 4 quarters of benchmark monitoring (or sooner if the exceedance is triggered by less than 4 quarters of data) you have determined that the exceedance of the benchmark is attributable solely to the presence of that pollutant in the natural background for that

discharge point and any substantially identical discharge points, or for impaired waters monitoring, the presence of the pollutant is caused solely by natural background, provided that all of the conditions in Part 5.2.6.1 are met.

3.k. *Exceedance due to run-on per Part 5.2.6.2:* Check box if you can demonstrate and obtain EPA agreement that run-on from a neighboring source (e.g., a source external to your facility) is the cause of the exceedance, provided that the conditions in Part 5.2.6.2 are met.

3.l. *Exceedance due to an abnormal event per Part 5.2.6.3:* Check box if one single sampling event is abnormal and you have immediately documented that the single event was abnormal and met all other conditions in Part 5.2.6.3.

3.m. *Exceedance but discharge does not result in any exceedance of water quality standards per Part 5.2.6.5:* Check box if you can demonstrate through an analysis that an exceedance triggering AIM requirements does not result in any exceedance of applicable water quality standards, provided that all the conditions in Part 5.2.6.5 are met.

3.n. *Aluminum exceedance demonstrated to not result in an exceedance of your facility-specific criteria per Part 5.2.6.4.a:* Check box if you can demonstrate through an analysis that an aluminum exceedance does not result in an exceedance of your facility-specific criteria using the national recommended water quality criteria in-lieu of the applicable MSGP benchmark threshold.

3.o. *Copper exceedance demonstrated to not result in an exceedance of your facility-specific criteria per Part 5.2.6.4.b:* Check box if you can demonstrate through an analysis that a copper exceedance does not result in an exceedance of your facility-specific criteria using the national recommended water quality criteria in-lieu of the applicable MSGP benchmark threshold.

Where violations of the permit requirements are reported, include a brief explanation in the box under 4 to describe the cause and corrective actions taken, and reference each violation by date. Also, this section should include any additional comments such as are required when changing site status from inactive and unstaffed to active or vice versa. Attach additional pages if you need more space.

Attach additional copies of Section F as necessary to address all discharge points and parameters.

Section G. Certification Information

DMRs must be signed by a person described below, or by a duly authorized representative of that person.

For a corporation: By a responsible corporate officer. For the purpose of this Section, a responsible corporate officer means:

(i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long-term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions

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taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

For a partnership or sole proprietorship: By a general partner or the proprietor, respectively; or

For a municipality, state, federal, or other public agency: By either a principal executive officer or ranking elected official. For purposes of this Part, a principal executive officer of a federal agency includes (i) the chief executive officer of the agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA). Include the name and title of the person signing the form and the date of signing.

Include the name, title, and e-mail address of the person signing the form and the date of signing. An unsigned or undated DMR form will be considered incomplete.

Paperwork Reduction Act Notice

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-NEW). Responses to this collection of information are mandatory (40 CFR 122.26). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is estimated to be between 22 and 124 minutes per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Submitting Your Form

If you have been granted a waiver from your Regional Office to submit a paper NOI form, you must send your NOI by mail to one of the following addresses:

For Regular U.S. Mail Delivery:

Stormwater Notice Processing Center
Mail Code 4203M, ATTN: 2026 MSGP Reports
U.S. EPA
1200 Pennsylvania Avenue, NW
Washington, DC 20460

For Overnight/Express Mail Delivery:

Stormwater Notice Processing Center
William Jefferson Clinton East Building – Room 7420
ATTN: 2026 MSGP Reports
U.S. EPA
1201 Constitution Avenue, NW
Washington, DC 20004

Visit this website for instructions on how to submit electronically: <https://www.epa.gov/npdes/stormwater-discharges-industrial-activities-ereporting>