



Storm and Non Storm Water Discharge Form

Date

Operator of NOI (Notice of Intent)

Project Name/Address

Date/Volume/Time of Discharge

Company Information

Office Phone

Email Address

Physical Address

City

State.

ZIP Code

Type of Discharge: Check One

**** Discharge will be tested before approval can be given. ****

Landscape irrigation

Emergency Flows (i.e. Flash floods, ruptured pipes)

Rising Ground Water

Water line Flushing

Foundation Drains

Crawl Spaces/Confined Working Space

Riparian Habitat

Non-commercial Car Washing

Street Wash Water

Swimming Pool/non-chlorinated source

Fire Fighting Activities

300 N. Loraine St. 

432-685-7517 

mdwilliams@midlandtexas.gov 

[OFFICE ADDRESS]

[PHONE NUMBER]

[EMAIL]



Printed Name: _____

Signature: _____

For Office Use Only:

Outfall Number: _____

Name of Receiving Creek: _____

Name of Watershed: _____

Approved by: _____

Title: _____

Signature: _____

Date Permit Received: ____/____/____

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