



CITY OF WATERLOO, IOWA

CITY HALL • 715 MULBERRY STREET 50703

Illicit Discharge Reporting Form

Individual Filing Report: _____
(Last Name) (First Name)

Date of Reporting (mm/dd/yyyy): _____

Contact Information: _____

Location of Discharge (please be specific):

Description of Problem:

Attachment(s) (circle all that apply): **Map** **Photograph**

Other (please specify): _____