

BYPASS/OVERFLOW REPORT

Send Overflow Report to: Greg Hurley – ADEQ Enforcement Section
Phone: 501-682-0638
FAX: 501-682-0880

Name of Facility: MOUNTAIN HOME WWTP Permit No : AR0021211

Date SSO Began: unknown Date SSO Ended: 6-8-2016

Address of SSO: 411 S. Main

Name of Person Reporting Overflow: Plumbing Inspector (Justin Williams) Phone No.: 870-425-5115

Description of SSO: () Manhole Overflow Manhole # _____
() Lift Station Overflow
() Main Line Overflow
 Service Line overflow
() Other: Describe _____

Estimated Volume: 100 Gal

Ultimate Discharge Location: Ground around cleanout
(Name or location of receiving stream/creek if applicable, ditch, pavement, ground, storm drain)

Cause of SSO – Check all that apply

- () I and I - Rainfall
- () Roots
- () Grease
- Debris
- () Equipment Failure
- () Construction
- () Vandalism
- () Power Failure
- () Other – Describe _____

Action Taken – Check all that apply

- Machine rodded
- () Jet-Vac
- () Hydro Cleaned
- () Hand rodded
- () Disinfected and Deodorized
- Spread Lime on Affected Area
- () Used Generator Too Power Pumps/Equipment
- () Other – Describe _____

Told customer to lime the area & replace broken cleanout cap.
They fixed the issues today. I went back & done a visual inspection on 6-8-2016 @ 2:00 p.m.
Justin Williams

Environmental Impact

- NEAH – No Evidence of Adverse Health/Environmental Impact
- () OEHC – Observed or Evidence of Human Contact
- () OEEI – Observed or Evidence of Environmental Impact
- () EFK – Evidence of Fish Kill