

## 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: 3-14-14 Date SSO Ended: 3-14-14

Address of SSO: 815 Cedar

Name of Person Reporting Overflow: Terry Sanders Phone No.: 870-425-6510

Description of SSO: ( ) Manhole Overflow Manhole # \_\_\_\_\_  
 ( ) Lift Station Overflow  
 ( ) Main Line Overflow  
 ( ) Service Line overflow  
 Other: Describe Clean out

Estimated Volume: 4 Gal

Ultimate Discharge Location: Ground  
 (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 \_\_\_\_\_

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