

**CONFIRMATION NUMBER**

**E7DAB1D9-BAF8-4A7E-9793-4DB7382CAAE4**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** E7DAB1D9-BAF8-4A7E-9793-4DB7382CAAE4

**Date Sent:** 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/10/2015**

Time:

**2:05 am**

Date Overflow Ended: **5/11/2015**

Time:

Location:

**Carol Ann Cross Park, RL01-0680, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**225200**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**4E0180AB-9837-4E21-819B-7BD09DB8F990**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 4E0180AB-9837-4E21-819B-7BD09DB8F990

**Date Sent:** 6/9/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**4:00 pm**

Date Overflow Ended: **5/22/2015**

Time:

**2:30 pm**

Location:

**4510 North 6th Street, FL002-0524 to 0522, creek**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

Follow up on SSO ID #69740F99-8754-4C51-8ECE-34CC5876AA00

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**69740F99-8754-4C51-8ECE-34CC5876AA00**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 69740F99-8754-4C51-8ECE-34CC5876AA00  
**Date Sent:** 5/21/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/20/2015  
**Date Overflow Ended:**  
**Location:**

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**4:00 pm**

4510 North 6th Street, FL02-0524 to 0522, creek

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OE EI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

flow in creek is to high to get equipment to repair site. Will repair when creek flow recedes.

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**BD1B2132-6883-469C-B188-EC6ED179C8C5**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** BD1B2132-6883-469C-B188-EC6ED179C8C5

**Date Sent:** 6/8/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/25/2015**

Time:

**12:00 pm**

Date Overflow Ended: **5/25/2015**

Time:

**12:30 pm**

Location:

**4607 Irene Street, FL01-0800 to 0820, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**30**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

This SSO was filed late due to paper work being misplaced.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**DED4A74A-896D-440E-8B1F-393715F49E31**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** DED4A74A-896D-440E-8B1F-393715F49E31

**Date Sent:** 5/20/2015

SSO  Bypass  Upset.

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**3:10 am**

Date Overflow Ended: **5/20/2015**

Time:

**2:16 pm**

Location: **420 North 20th Street, P005-1860, storm drain**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**50700**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river, stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Disinfected and Deodorized
- Jet-Vac
- Hydro Cleaned
- Hand rodded
- Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment
- Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**121F2619-6E8E-4C6D-906E-185E2EEE08C2**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 121F2619-6E8E-4C6D-906E-185E2EEE08C2**

**Date Sent: 5/21/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**9:25 am**

Date Overflow Ended: **5/21/2015**

Time:

**9:35 am**

Location:

**4110 Kinkead Avenue, P007-1750, storm drain**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**76250**

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**F71A0489-A067-47A2-A323-8F52313BA091**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** F71A0489-A067-47A2-A323-8F52313BA091

**Date Sent:** 5/28/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/25/2015**

Time:

**10:55 am**

Date Overflow Ended: **5/25/2015**

Time:

**1:00 am**

Location: **3201 South 93rd Circle, M001-1390 to 1370, building**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**125**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**Basement Backup**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

[Empty box for additional comments]

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**B58E8C3D-8628-49A3-BD05-1AB52C19129D**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** B58E8C3D-8628-49A3-BD05-1AB52C19129D  
**Date Sent:** 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
 Date Overflow Began: **5/24/15**  
 Date Overflow Ended: **5/24/15**  
 Location: **56th and Rogers, S004-1140, storm drain**

Facility name:  
 Time:  
 Time:

**Massard**  
**11:30 am**  
**11:30 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **72000**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**



**CONFIRMATION NUMBER**

**03389F7A-0CB5-42EA-9656-59AEC2276BA**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 03389F7A-0CB5-42EA-9656-59AEC2276BA**

**Date Sent: 5/28/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/28/2015**

Time:

**9:30 am**

Date Overflow Ended: **5/28/2015**

Time:

**10:25 am**

Location: **8900 Meandering Way, M002-0230, Creek**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:**

**unknown**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

Observed evidence of overflow.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**A7839252-8FDE-43EB-8998-93CE5100B3A1**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** A7839252-8FDE-43EB-8998-93CE5100B3A1

**Date Sent:** 5/28/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name: **Massard**

Date Overflow Began: **5/27/2015**

Time: **5:45 pm**

Date Overflow Ended: **5/27/2015**

Time: **5:55 pm**

Location: **4914 Armour Avenue, S009780 to 0770, ditch**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**unknown**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

Observed evidence of overflow.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**F151627D-80D0-4465-B0C0-16B1D7F55326**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: F151627D-80D0-4465-B0C0-16B1D7F55326**  
**Date Sent: 5/25/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/24/2015**  
 Date Overflow Ended: **5/25/2015**  
 Location: **1801 Old Greenwood Road, P009-0165, ditch**

Facility name:  
 Time:  
 Time:

**P Street**  
**10:15 pm**  
**2:40 pm**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 98500**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**E81E85B1-C77F-48CB-9D1D-329D0A3A99E9**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** E81E85B1-C77F-48CB-9D1D-329D0A3A99E9

**Date Sent:** 5/26/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street WWTP**

Date Overflow Began: **5/24/2015**

Time:

**7:15 pm**

Date Overflow Ended: **5/25/2015**

Time:

**7:15 pm**

Location: **722 North 20th St. P005-1840**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer; building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 144000**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Steve Floyd**

Title **Supt.**

Telephone Number **(479) 784-2331**

Additional Comments if Needed:

cleanup scheduled

Email a Copy of This Report to the Email Address:

**sfloyd@fortsmithar.gov**

**CONFIRMATION NUMBER**

**CAA5F17F-8ECC-4A0D-90B8-92251246FEB2**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** CAA5F17F-8ECC-4A0D-90B8-92251246FEB2

**Date Sent:** 5/27/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/26/2015**

Date Overflow Ended: **5/26/2015**

Location: **2700 West Y St. P009-0660**

Facility name:

Time:

Time:

**P Street WWTP**

**10:39 am**

**12:00 pm**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **2835**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Steve Floyd**

Title **Supt.**

Telephone Number **(479) 784-2331**

Additional Comments if Needed:

Mail a Copy of This Report to the Email Address:  
**floyd@fortsmithar.gov**

**CONFIRMATION NUMBER**

**4B305F83-F4C0-4C95-9272-2BDE6DAD144E**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 4B305F83-F4C0-4C95-9272-2BDE6DAD144E  
**Date Sent:** 5/29/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/28/2015  
**Date Overflow Ended:** 5/28/2015

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**4:45 pm**  
**6:30 pm**

**Location:** 8006 Hermitage Drive, 2006-1250, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** 105

(Give an estimate in gallons)

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

[Empty box for additional comments]

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**AD4D6C5B-93AC-47DD-8D21-0C475E284BA8**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** AD4D6C5B-93AC-47DD-8D21-0C475E284BA8

**Date Sent:** 5/29/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/26/2015**

Time:

**12:15 pm**

Date Overflow Ended: **5/29/2015**

Time:

**8:15 am**

Location: **300 South U Street, MC01-0106, creek**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

**Cause of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

*(Enter overflow type if not listed)*

**Volume:** **102000**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

This is close out for confirmation number 6EBD2A9E-A924-4464-8142-FF18A8C319E3.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

24-Hour Sanitary Sewer Overflow Report

SSO ID#: 687CF749-616C-4B91-8087-999448F6A303

Date Sent: 5/29/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/26/2015**

Time:

**12:15 pm**

Date Overflow Ended: **5/29/2015**

Time:

**8:15 am**

Location: **300 South U Street, MC01-0100, creek**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: **408000**

(Give an estimate in gallons)

Impact of SSO Event: **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

This is close out for confirmation number B660FDD2-C26F-421B-BCBC-E1EA244D7218.

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**jjohnson@fsark.com**



**CONFIRMATION NUMBER**

**914F7DCF-9C03-42A2-A4E7-80221669BDD6**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 914F7DCF-9C03-42A2-A4E7-80221669BDD6

**Date Sent:** 5/28/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/28/15**

Time:

**9:30 am**

Date Overflow Ended: **5/28/15**

Time:

**11:45 am**

Location:

**3633 Fischer Avenue, FL01-1820 to 1810**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe **repaired line**
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

Contractor broke the sewer installing a fiber optic line with a boring machine.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**ODF7D70B-10BE-41FA-B673-7F6066B3E8E4**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** ODF7D70B-10BE-41FA-B673-7F6066B3E8E4

**Date Sent:** 5/27/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name: **Massard**

**9:15 am**

Date Overflow Began: **5/26/2015**

Time:

**6:20 pm**

Date Overflow Ended: **5/26/2015**

Time:

Location:

**2000 Zero Street, 2001-0758, creek**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**40875**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OE EI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

24-Hour Sanitary Sewer Overflow Report

SSO ID#: 7125326F-4EF3-4D3D-93BE-0B868B57F3EC  
Date Sent: 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Date Overflow Began: 5/24/2015

Date Overflow Ended: 5/25/2015

Location: 1806 Zero Street, 2001-0550 to 0551, building

Facility name:

Time:

Time:

Massard

12:00 pm

11:15 am

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: 13950

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By Jimmie B Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
jjohnson@fsark.com

24-Hour Sanitary Sewer Overflow Report

SSO ID#: 45DF25B8-975C-464C-B880-7824BFCA9C95

Date Sent: 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**Massard**

Date Overflow Began: **5/24/2015**

Time:

**12:30 pm**

Date Overflow Ended: **5/25/2015**

Time:

**11:30 am**

Location: **3100 Kelley Highway, P004-1015, paved area**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 66000**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

## 24-Hour Sanitary Sewer Overflow Report

SSO ID#: 7FDA3A09-CED6-48F9-94AC-CC2E94C8C347

Date Sent: 5/25/2015

 SSO  Bypass  Upset

Facility Permit Number: AR0033278

Facility name:

P Street

Date Overflow Began: 5/24/2015

Time:

1:00 pm

Date Overflow Ended: 5/25/2015

Time:

1:30 am

Location: 1010 South 19th Street, #011-2690 to 2680, yard

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

## Type of Overflow

## Cause of Overflow

- Manhole Overflow  
 Lift Station Overflow  
 Main Line Overflow  
 Service Line Overflow  
 Other Overflow Type:

*(Enter overflow type if not listed)*

- I & I - Rainfall  
 Roots  
 Grease  
 Debris  
 Equipment Failure  
 Construction  
 Vandalism  
 Power Failure  
 Line Failure/Break  
 Other Cause:

Volume: 300

*(Give an estimate in gallons)*

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

## Action Taken - Check all that apply

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized  
 Jet-Vac  Hydro Cleaned  
 Hand rodded  Spread Lime on Affected Area  
 Used Generator To Power Pumps/Equipment  Public Notification  
 Other: Describe

## Environmental Damage

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

Reported By Jimmie B Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**5D6EBC0C-CB6E-4E05-A521-C90B448825FE**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 5D6EBC0C-CB6E-4E05-A521-C90B448825FE

**Date Sent:** 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/24/2015**

Date Overflow Ended: **5/25/2015**

Location:

**2910 Midland Blvd, S008-2180 to 2170, building**

Facility name:

Time:

Time:

**P Street**

**2:30 pm**

**1:30 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**6900**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact  NEAH - No Evidence of Adverse Health/Environmental Impact
- OEI - Observed or Evidence of Environmental Impact  EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

CONFIRMATION NUMBER

BB2C14A0-B39C-42F0-BF9C-409AFD2A3F82

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: BB2C14A0-B39C-42F0-BF9C-409AFD2A3F82

Date Sent: 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Facility name:

P Street

Date Overflow Began: 5/24/2015

Time:

3:15 pm

Date Overflow Ended: 5/25/2015

Time:

2:05 pm

Location:

400 North 20th Street, P005-1920, paved area

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: 342500

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**863E1BF2-374F-41FC-B0A2-FACD14245A58**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 863E1BF2-374F-41FC-B0A2-FACD14245A58**

**Date Sent: 5/25/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/24/2015**

Time:

**2:05 pm**

Date Overflow Ended: **5/25/2015**

Time:

**1:45 pm**

Location: **4109 Bradley Drive, S008-0660 to 0650, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 14250**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**



**CONFIRMATION NUMBER**

**33DCB8ED-8EDE-4457-BF5D-B716170981C6**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 33DCB8ED-8EDE-4457-BF5D-B716170981C6  
**Date Sent:** 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/24/2015**  
 Date Overflow Ended: **5/25/2015**  
 Location: **North 20th and North E Street, P005-1869, paved area**

Facility name:  
 Time:  
 Time:

**P Street**  
**3:00 pm**  
**2:00 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 276000**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**49E183E4-5A74-4824-BAE0-D3A6A495F3F4**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 49E183E4-5A74-4824-BAE0-D3A6A495F3F4**

**Date Sent: 5/25/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/24/2015**

Date Overflow Ended: **5/25/2015**

Location: **3200 North M Street, P005-3030, ditch**

Facility name:

Time:

Time:

**P Street**

**3:30 pm**

**2:10 pm**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 340000**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

CONFIRMATION NUMBER

30713042-B5C2-4C88-9814-CA2DE49CB428

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 30713042-B5C2-4C88-9814-CA2DE49CB428

Date Sent: 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Date Overflow Began: 5/24/2015

Date Overflow Ended: 5/25/2015

Location:

Facility name:

Time:

Time:

P Street

3:45 pm

2:20 pm

3700 Kinkead Avenue, P007-0482, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: 271000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

CONFIRMATION NUMBER

4869A5AA-0526-4AE5-8A8C-344B48288ECD

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 4869A5AA-0526-4AE5-8A8C-344B48288ECD

Date Sent: 5/25/2015

SSO  Bypass  Upset

Facility Permit Number: AR0021750

Facility name: Massard

Date Overflow Began: 5/24/2015

Time: 5:05 pm

Date Overflow Ended: 5/25/2015

Time: 4:30 pm

Location: 1801 South 74th Street, RL01-1060, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: 278000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**0C74EA20-36D1-4C30-A731-EB4B26CBD544**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 0C74EA20-36D1-4C30-A731-EB4B26CBD544**

**Date Sent: 5/25/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/24/15**

Date Overflow Ended: **5/24/15**

Location:

Facility name:

Time:

Time:

**P Street**

**12:30 pm**

**7:46 pm**

**1600 South W Street, MC02-1150 to 1140, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**4650**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**95D7E2AE-800F-45EE-BAEE-FAE7410F2DC2**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 95D7E2AE-800F-45EE-BAEE-FAE7410F2DC2  
**Date Sent:** 5/21/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/20/2015  
**Date Overflow Ended:** 5/20/2015  
**Location:** 3200 North M Street, P005-3030, creek

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**3:30 am**  
**9:28 pm**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** 270000

*(Give an estimate in gallons)*

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**B04D87C9-F790-4595-82BC-44672888EAAA**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** B04D87C9-F790-4595-82BC-44672888EAAA

**Date Sent:** 5/20/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**8:46 am**

Date Overflow Ended: **5/20/2015**

Time:

**1:58 pm**

Location: **2900 Brooken Hill, 2005-0450, storm drain**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**7800**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**5948DC4B-2FE5-4B86-8008-5CC44E6E891B**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 5948DC4B-2FE5-4B86-8008-5CC44E6E891B  
**Date Sent:** 5/20/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/20/2015**  
 Date Overflow Ended: **5/20/2015**  
 Location: **400 North 20th Street, P005-1920, storm drain**

Facility name:  
 Time:  
 Time:

**P Street**  
**3:00 am**  
**2:14 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **101100**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**



**CONFIRMATION NUMBER**

**BD2BDC80-D0DE-495F-83C8-2388B9CF4D6F**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** BD2BDC80-D0DE-495F-83C8-2388B9CF4D6F

**Date Sent:** 5/27/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard WWTP**

Date Overflow Began: **5/26/2015**

Time:

**9:10 am**

Date Overflow Ended: **5/26/2015**

Time:

**9:10 am**

Location: **2809 Brooken Hill Dr. Z005-0450/0230**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **1**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Steve Floyd**

Title **Supt.**

Telephone Number **(479) 784-2331**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**sfloyd@fortsmithar.gov**

**CONFIRMATION NUMBER**

**0BF717A2-3A4F-47B7-B31F-6E594346D3E5**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 0BF717A2-3A4F-47B7-B31F-6E594346D3E5

**Date Sent:** 5/26/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0021750

**Facility name:** Massard WWTP

**Date Overflow Began:** 5/24/2015

**Time:** 8:30 pm

**Date Overflow Ended:** 5/25/2015

**Time:** 7:25 pm

**Location:** 1307 South 17th St. P006-0360 to0350

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** 35375

*(Give an estimate in gallons)*

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Steve Floyd**

Title **Supt.**

Telephone Number **(479) 784-2331**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**sfloyd@fortsmithar.gov**

**CONFIRMATION NUMBER**

**29E4A993-AB5D-4DB5-967E-948898BD269F**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 29E4A993-AB5D-4DB5-967E-948898BD269F  
**Date Sent:** 5/26/2015

SSO  Bypass  Upset

Facility Permit Number:	<b>AR0021750</b>	Facility name:	<b>Massard WWTP</b>
Date Overflow Began:	<b>5/24/2015</b>	Time:	<b>5:40 pm</b>
Date Overflow Ended:	<b>5/25/2015</b>	Time:	<b>7:55 pm</b>

Location: **12920 Brittany Drive. FC02-0860**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **133500**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Machine rodded               | <input type="checkbox"/> Disinfected and Deodorized   |
| <input type="checkbox"/> Jet-Vac                                 | <input type="checkbox"/> Hydro Cleaned                |
| <input type="checkbox"/> Hand rodded                             | <input type="checkbox"/> Spread Lime on Affected Area |
| <input type="checkbox"/> Used Generator To Power Pumps/Equipment | <input type="checkbox"/> Public Notification          |
| <input type="checkbox"/> Other: Describe                         |   |

**Environmental Damage**

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

Reported By **Steve Floyd** Title **Superintendent** Telephone Number **(479) 784-2331**

**Additional Comments if Needed:**

cleanup scheduled

Email a Copy of This Report to the Email Address:  
**sfloyd@fortsmithar.gov**

CONFIRMATION NUMBER

187167CC-C026-4D4F-8376-9A286ADA8357

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 187167CC-C026-4D4F-8376-9A286ADA8357

Date Sent: 5/26/2015

SSO  Bypass  Upset

Facility Permit Number: AR0021750

Facility name: Massard WWTP

Date Overflow Began: 5/24/2015

Time: 8:45 pm

Date Overflow Ended: 5/25/2015

Time: 7:35 pm

Location: 5800 Boys Club Ln Z001-0760

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
 Lift Station Overflow
 Main Line Overflow
 Service Line Overflow
 Other Overflow Type:

(Enter overflow type if not listed)

Volume: 137000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
 Roots
 Grease
 Debris
 Equipment Failure
 Construction
 Vandalism
 Power Failure
 Line Failure/Break
 Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
 Jet-Vac  Hydro Cleaned
 Hand rodded  Spread Lime on Affected Area
 Used Generator To Power Pumps/Equipment  Public Notification
 Other: Describe

Environmental Damage

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

Reported By Steve Floyd

Title Superintendent

Telephone Number (479) 784-2331

Additional Comments if Needed:

cleanup scheduled

Email a Copy of This Report to the Email Address:

sfloyd@fortsmithar.gov

CONFIRMATION NUMBER

FBE5580A-B301-45E1-BC10-7D216D64D97C

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: FBE5580A-B301-45E1-BC10-7D216D64D97C

Date Sent: 5/26/2015

SSO  Bypass  Upset

Facility Permit Number: AR0021750

Facility name:

Massard WWTP

Date Overflow Began: 5/24/2015

Time:

8:30 pm

Date Overflow Ended: 5/25/2015

Time:

7:35 pm

Location: 5800 Boys Club Ln Z001-0756

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
 Lift Station Overflow
 Main Line Overflow
 Service Line Overflow
 Other Overflow Type:

Cause of Overflow

- I & I - Rainfall
 Roots
 Grease
 Debris
 Equipment Failure
 Construction
 Vandalism
 Power Failure
 Line Failure/Break
 Other Cause:

(Enter overflow type if not listed)

Volume: 380875

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
 Jet-Vac  Hydro Cleaned
 Hand rodded  Spread Lime on Affected Area
 Used Generator To Power Pumps/Equipment  Public Notification
 Other: Describe

Environmental Damage

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

Reported By Steve Floyd

Title Superintendent

Telephone Number (479) 784-2331

Additional Comments if Needed:

cleanup scheduled

Email a Copy of This Report to the Email Address:

sfloyd@fortsmithar.gov

**CONFIRMATION NUMBER**

**2CC1D2A0-368A-4F0E-B1F9-B1359856039C**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 2CC1D2A0-368A-4F0E-B1F9-B1359856039C

**Date Sent:** 5/26/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Date Overflow Began: **5/24/2015**

Date Overflow Ended: **5/25/2015**

Location: **5800 Boys Club Ln Z001-0770**

Facility name:

Time:

Time:

**Massard WWTP**

**8:50 pm**

**7:35 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 375375**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Steve Floyd**

Title **Superintendent**

Telephone Number **(479) 784-2331**

Additional Comments if Needed:

cleanup scheduled

Email a Copy of This Report to the Email Address:

**sfloyd@fortsmithar.gov**

**CONFIRMATION NUMBER**

**BFC09DE1-89B7-4A5E-B261-A73A79FDC336**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** BFC09DE1-89B7-4A5E-B261-A73A79FDC336

**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Date Overflow Began: **5/10/2015**

Date Overflow Ended: **5/10/2015**

Location: **5600 Rogers Avenue, S004-1140, storm drain**

Facility name:

Time:

Time:

**Massard**

**6:00 am**

**8:00 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:** **168000**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

24-Hour Sanitary Sewer Overflow Report

SSO ID#: 89F5853B-9B73-4C97-AC53-E8E48AE3DBFB

Date Sent: 5/22/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **05/22/2015**

Time:

**08:25 am**

Date Overflow Ended: **05/22/2015**

Time:

**08:00 pm**

Location: **4623 Rogers Avenue, S004-1010 to 1000, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: **6950**

(Give an estimate in gallons)

Impact of SSO Event: **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Set up by-pass pumping**

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**



CONFIRMATION NUMBER

A46F988F-C6AB-4550-9FD8-540091EC2A8A

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: A46F988F-C6AB-4550-9FD8-540091EC2A8A
Date Sent: 5/25/2015

[X] SSO [ ] Bypass [ ] Upset

Facility Permit Number: AR0021750
Date Overflow Began: 5/24/2015
Date Overflow Ended: 5/25/2015
Location:

Facility name:
Time:
Time:

Massard
5:15 pm
4:30 pm

Carol Ann Cross Park, RL01-0680, ditch

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- [X] Manhole Overflow
[ ] Lift Station Overflow
[ ] Main Line Overflow
[ ] Service Line Overflow
[ ] Other Overflow Type:

Cause of Overflow

- [X] I & I - Rainfall
[ ] Roots
[ ] Grease
[ ] Debris
[ ] Equipment Failure
[ ] Construction
[ ] Vandalism
[ ] Power Failure
[ ] Line Failure/Break
[ ] Other Cause:

(Enter overflow type if not listed)

Volume: 139500

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- [ ] Machine rodded [X] Disinfected and Deodorized
[ ] Jet-Vac [ ] Hydro Cleaned
[ ] Hand rodded [ ] Spread Lime on Affected Area
[ ] Used Generator To Power Pumps/Equipment [ ] Public Notification
[ ] Other: Describe

Environmental Damage

- [X] OEHC - Observed or Evidence of Human Contact [X] NEAH - No Evidence of Adverse Health/Environmental Impact
[ ] OEEI - Observed or Evidence of Environmental Impact [ ] EFK - Evidence of Fish Kill

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:
jjohnson@fsark.com

**CONFIRMATION NUMBER**

**F3FBB79F-98FA-40B9-9C3D-F09C3DC8663D**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** F3FBB79F-98FA-40B9-9C3D-F09C3DC8663D

**Date Sent:** 5/25/2015

SSO  Bypass  Upset

**Facility Permit Number:** **AR0021750**

**Facility name:**

**Massard**

**Date Overflow Began:** **5/24/2015**

**Time:**

**5:30 pm**

**Date Overflow Ended:** **5/25/2015**

**Time:**

**4:30 pm**

**Location:** **7400 Euper Lane, RL01-1070, paved area**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **138000**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

**Reported By** **Jimmie B. Johnson**

**Title** **Superintendent**

**Telephone Number** **(479) 784-2231**

**Additional Comments if Needed:**

**Email a Copy of This Report to the Email Address:**

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**EE4E7A16-8A17-43E7-A6FC-6931752A559A**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** EE4E7A16-8A17-43E7-A6FC-6931752A559A

**Date Sent:** 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Date Overflow Began: **5/20/2015**

Date Overflow Ended: **5/20/2015**

Location: **Carol Ann Cross Park, RL01-0680, yard**

Facility name:

Time:

Time:

**Massard**

**5:45 am**

**5:55 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:**

**73000**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

[Empty box for additional comments]

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**EDC4AEDC-4111-46FF-8766-1813C760C232**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** EDC4AEDC-4111-46FF-8766-1813C760C232  
**Date Sent:** 5/21/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0021750  
**Date Overflow Began:** 5/20/2015  
**Date Overflow Ended:** 5/20/2015  
**Location:**

**Facility name:** Massard  
**Time:** 12:10 pm  
**Time:** 7:10 pm

2002 South 71st Street, RL01-1120, storm drain

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** 23100

(Give an estimate in gallons)

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**01054A6A-77C3-48D9-98DF-E2A4DC9BA4BE**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 01054A6A-77C3-48D9-98DF-E2A4DC9BA4BE**

**Date Sent: 5/21/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**10:40 am**

Date Overflow Ended: **5/20/2015**

Time:

**2:15 pm**

Location: **2312 Ingersol Circle, Z002-0860 to 0850, creek**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 11100**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe **repaired line**
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

Aerial creek crossing was damaged by flood waters.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

CONFIRMATION NUMBER

6D157490-9D20-4D26-9B05-A1E093BFD3F5

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 6D157490-9D20-4D26-9B05-A1E093BFD3F5

Date Sent: 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Facility name: P Street

10:50 am

Date Overflow Began: 5/20/2015

Time:

9:00 am

Date Overflow Ended: 5/20/2015

Time:

Location: 1815 South 16th Street, MC02-0950, storm drain

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: 61000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

CONFIRMATION NUMBER

C60502AC-5ACB-45F5-89AD-A8F6EE5EC3BC

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: C60502AC-5ACB-45F5-89AD-A8F6EE5EC3BC

Date Sent: 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Date Overflow Began: 5/20/2015

Date Overflow Ended: 5/20/2015

Location: 614 North 41st Street, storm drain

Facility name:

Time:

Time:

P Street

9:25 am

8:50 pm

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
 Lift Station Overflow
 Main Line Overflow
 Service Line Overflow
 Other Overflow Type:

(Enter overflow type if not listed)

Volume: 68500

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
 Roots
 Grease
 Debris
 Equipment Failure
 Construction
 Vandalism
 Power Failure
 Line Failure/Break
 Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
 Jet-Vac  Hydro Cleaned
 Hand rodded  Spread Lime on Affected Area
 Used Generator To Power Pumps/Equipment  Public Notification
 Other: Describe

Environmental Damage

- OEHC - Observed or Evidence of Human Contact  NEAH - No Evidence of Adverse Health/Environmental Impact
 OEEL - Observed or Evidence of Environmental Impact  EFK - Evidence of Fish Kill

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**DCD27D0C-494B-41D3-B69C-B86CA0A601BB**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** DCD27D0C-494B-41D3-B69C-B86CA0A601BB

**Date Sent:** 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**10:39 am**

Date Overflow Ended: **5/20/2015**

Time:

**7:30 pm**

Location: **3700 Kindead Avenue, P007-0482, storm drain**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:** **29205**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**



CONFIRMATION NUMBER

674C671B-2B22-4FD8-B10D-E8E3D4C128B9

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 674C671B-2B22-4FD8-B10D-E8E3D4C128B9

Date Sent: 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Facility name:

P Street

Date Overflow Began: 5/20/2015

Time:

12:20 pm

Date Overflow Ended: 5/21/2015

Time:

8:16 am

Location: 5100 South 29th Street, Z001-2330 to 2320, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Volume: 12000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**680A58E8-4908-472F-9748-347F680DD4E7**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 680A58E8-4908-472F-9748-347F680DD4E7  
**Date Sent:** 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/20/2015**

Date Overflow Ended: **5/20/2015**

Location: **1307 South 17th Street, P006-0380 to 0360, storm drain**

Facility name:

Time:

Time:

**P Street**

**10:10 am**

**9:00 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 65000**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**A40C338C-0838-4FDF-856B-7EDC948D2D6A**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** A40C338C-0838-4FDF-856B-7EDC948D2D6A  
**Date Sent:** 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
Date Overflow Began: **5/20/2015**  
Date Overflow Ended: **5/20/2015**  
Location: **1319 South 17th Street, P006-0380 to 0360, storm drain**

Facility name:  
Time:  
Time:

**P Street**  
**10:10 am**  
**9:00 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**65000**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**4AC78CD6-D5AA-4B11-AD9A-AEAB798CB974**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 4AC78CD6-D5AA-4B11-AD9A-AEAB798CB974

**Date Sent:** 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/20/2015**

Time:

**8:20 am**

Date Overflow Ended: **5/20/2015**

Time:

**7:25 pm**

Location:

**2116 South 70th Street, RL01-1280, storm drain**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**42500**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

CONFIRMATION NUMBER

226CB456-63B8-4833-A331-D21A153C8280

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 226CB456-63B8-4833-A331-D21A153C8280

Date Sent: 5/21/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Date Overflow Began: 5/20/2015

Date Overflow Ended: 5/20/2015

Location: 1013 North 18th Street, storm drain

Facility name:

Time:

Time:

P Street

9:15 am

7:55 pm

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
 Lift Station Overflow
 Main Line Overflow
 Service Line Overflow
 Other Overflow Type:

(Enter overflow type if not listed)

Volume: 64000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
 Roots
 Grease
 Debris
 Equipment Failure
 Construction
 Vandalism
 Power Failure
 Line Failure/Break
 Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
 Jet-Vac  Hydro Cleaned
 Hand rodded  Spread Lime on Affected Area
 Used Generator To Power Pumps/Equipment  Public Notification
 Other: Describe

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**1EFCDB59-ED54-43C4-8DB3-B98FEDF86DD8**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 1EFCDB59-ED54-43C4-8DB3-B98FEDF86DD8**

**Date Sent: 5/21/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/20/2015**

Time:

**8:20 am**

Date Overflow Ended: **5/20/2015**

Time:

**7:20 pm**

Location: **1813 Craftwood, S001-0880, storm drain**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 16500**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**05A6E183-5F63-4D54-883F-8ACC03D176CC**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 05A6E183-5F63-4D54-883F-8ACC03D176CC**

**Date Sent: 5/20/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/20/2015**

Time:

**7:40 am**

Date Overflow Ended: **5/20/2015**

Time:

**8:45 am**

Location: **3100 Kelley Highway, P004-2190, Paved area**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**3250**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**7F926120-7E2F-4E92-928F-5B1BB7C0F368**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 7F926120-7E2F-4E92-928F-5B1BB7C0F368**  
**Date Sent: 5/20/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
Date Overflow Began: **5/20/2015**  
Date Overflow Ended: **5/20/2015**  
Location: **5600 Rogers Avenue, S004-1420, storm drain**

Facility name:  
Time:  
Time:

**Massard**  
**4:00 am**  
**12:00 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 4800**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**



CONFIRMATION NUMBER

02957529-6580-4C54-8122-A69CA8D8CAA0

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 02957529-6580-4C54-8122-A69CA8D8CAA0
Date Sent: 5/20/2015

SSO Bypass Upset

Facility Permit Number: AR0021750
Date Overflow Began: 5/20/2015
Date Overflow Ended: 5/20/2015
Location: 1801 South 74th Street, RL01-1060, yard

Facility name: Massard
Time: 5:00 am
Time: 3:15 pm

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
Lift Station Overflow
Main Line Overflow
Service Line Overflow
Other Overflow Type:

(Enter overflow type if not listed)

Volume: 92250

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
Roots
Grease
Debris
Equipment Failure
Construction
Vandalism
Power, Failure
Line Failure/Break
Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
Disinfected and Deodorized
Jet-Vac
Hydro Cleaned
Hand rodded
Spread Lime on Affected Area
Used Generator To Power Pumps/Equipment
Public Notification
Other: Describe

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:
jjohnson@fsark.com

**CONFIRMATION NUMBER**

**807A0164-525B-4FBD-913B-E437C556953B**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 807A0164-525B-4FBD-913B-E437C556953B  
**Date Sent:** 5/20/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
 Date Overflow Began: **5/20/2015**  
 Date Overflow Ended: **5/20/2015**  
 Location: **12920 Brittany Drive, FC02-0860, yard**

Facility name:  
 Time:  
 Time:

**Massard**  
**10:57 am**  
**1:43 pm**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **37350**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**EA610B43-26EB-46CE-A15F-1BBEC6A03FAB**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** EA610B43-26EB-46CE-A15F-1BBEC6A03FAB  
**Date Sent:** 5/20/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/20/2015  
**Date Overflow Ended:** 5/20/2015  
**Location:**

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**10:16 am**  
**2:10 pm**

**South P Street and Old Greenwood Road, P009-0200, storm drain**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** 11700

*(Give an estimate in gallons)*

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

**Reported By** Jimmie B. Johnson

**Title** Superintendent

**Telephone Number** (479) 784-2231

**Additional Comments if Needed:**

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**53F6398F-2356-4BD7-B7FE-BE248DDDE77**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 53F6398F-2356-4BD7-B7FE-BE248DDDE77  
**Date Sent:** 5/19/2015

SSO  Bypass  Upset

Facility Permit Number:	<b>AR0033278</b>	Facility name:	<b>P Street</b>
Date Overflow Began:	<b>5/19/2015</b>	Time:	<b>8:15 am</b>
Date Overflow Ended:	<b>5/19/2015</b>	Time:	<b>9:00 am</b>
Location:	<b>8313 South 35th Street, 2003-1730, paved area</b>		

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **225**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OE EI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**C56DD0B2-E469-4D8F-9A7F-AD924BB41780**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: C56DD0B2-E469-4D8F-9A7F-AD924BB41780**  
**Date Sent: 5/14/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/13/2015**  
 Date Overflow Ended: **5/13/2015**  
 Location: **5901 Highway 71, Z001-0280, storm drain**

Facility name:  
 Time:  
 Time:

**P Street**  
**2:10 pm**  
**2:50 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 200**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**4034F2D1-B647-4528-92DA-A885D2F83702**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 4034F2D1-B647-4528-92DA-A885D2F83702**  
**Date Sent: 5/14/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
Date Overflow Began: **5/11/2015**  
Date Overflow Ended: **5/14/2015**  
Location:

Facility name: **Massard**  
Time: **3:12 pm**  
Time: **8:00 am**

**5601 Jenny Lind Road, The manway to a 5 million gallon wet weather sewer storage tank was leaking, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type: **manway of storage tank**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

*(Enter overflow type if not listed)*

**Volume: 53280**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Replaced gasket**

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

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**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**D8C3F483-8A88-4E26-AE3E-54B35B7FCB91**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

SSO ID#: D8C3F483-8A88-4E26-AE3E-54B35B7FCB91  
Date Sent: 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
Date Overflow Began: **5/11/2015**  
Date Overflow Ended:  
Location:

Facility name: **Massard**  
Time: **3:12 pm**  
Time:

**5601 Jenny Lind Road, The manway to a 5 million gallon wet weather sewer storage tank is leaking, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type: **manway of storage tank**

(Enter overflow type if not listed)

**Volume:**

(Give an estimate in gallons)

Impact of SSO Event: **SSO Reached Public Land Only (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

CONFIRMATION NUMBER

4C725392-5549-4083-92A2-0A1E26928051

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 4C725392-5549-4083-92A2-0A1E26928051
Date Sent: 5/14/2015

SSO Bypass Upset

Facility Permit Number: AR0021750
Date Overflow Began: 5/13/2015
Date Overflow Ended: 5/13/2015
Location:

Facility name:
Time:
Time:

Massard
12:00 pm
12:10 pm

Massard Plant Grounds, Scum and Grit Overflow bypass pump hose came apart.

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
Lift Station Overflow
Main Line Overflow
Service Line Overflow
Other Overflow Type: by pass hose came apart

(Enter overflow type if not listed)

Volume: 500

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
Roots
Grease
Debris
Equipment Failure
Construction
Vandalism
Power Failure
Line Failure/Break
Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
Jet-Vac
Hand rodded
Used Generator To Power Pumps/Equipment
Other: Describe
Disinfected and Deodorized
Hydro Cleaned
Spread Lime on Affected Area
Public Notification
put by pass line back together

Environmental Damage

- OEHC - Observed or Evidence of Human Contact
OEI - Observed or Evidence of Environmental Impact
NEAH - No Evidence of Adverse Health/Environmental Impact
EFK - Evidence of Fish Kill

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

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jjohnson@fsark.com



**CONFIRMATION NUMBER**

**512C4FCD-DDDA-4D36-89AA-FF846A8B258C**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 512C4FCD-DDDA-4D36-89AA-FF846A8B258C  
**Date Sent:** 5/13/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
 Date Overflow Began: **5/13/2015**  
 Date Overflow Ended: **5/13/2015**  
 Location: **4914 Armour Avenue, S009-0785-0780, yard**

Facility name: **Massard**  
 Time: **11:00 am**  
 Time: **11:00 am**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **1**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**6C59D0A8-0F52-4977-9D26-EF93C9E84C8B**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 6C59D0A8-0F52-4977-9D26-EF93C9E84C8B

**Date Sent:** 5/13/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278

**Facility name:** P Street

**Date Overflow Began:** 5/13/2015

**Time:** 12:20 pm

**Date Overflow Ended:** 5/13/2015

**Time:** 12:40 pm

**Location:** 1306 North R Street, P004-0040, storm drain

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** 400

(Give an estimate in gallons)

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

**Reported By** Jimmie B. Johnson

**Title** Superintendent

**Telephone Number**

**Additional Comments if Needed:**

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**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**DA0870B5-3183-49ED-91C6-908A87565CDA**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** DA0870B5-3183-49ED-91C6-908A87565CDA  
**Date Sent:** 5/13/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/12/2015**  
 Date Overflow Ended: **5/13/2015**  
 Location:

Facility name:  
 Time:  
 Time:

**P Street**  
**2:00 pm**  
**1:00 am**

**3409 Santa Fe Street, FL01-0340, building & yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **660**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**A15BAC64-4632-43ED-AF8B-0F029B142E92**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** A15BAC64-4632-43ED-AF8B-0F029B142E92  
**Date Sent:** 5/13/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/12/2015  
**Date Overflow Ended:** 5/12/2015  
**Location:**

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**9:58 am**  
**10:10 am**

**3830 Crystal Lane, FL02-0670 and 0680, ditch**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** 1

*(Give an estimate in gallons)*

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

**Reported By** Jimmie B. Johnson

**Title** Superintendent

**Telephone Number** (479) 784-2231

**Additional Comments if Needed:**

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**C4E2DB7F-EF1B-4339-85C8-C0753C112F41**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** C4E2DB7F-EF1B-4339-85C8-C0753C112F41  
**Date Sent:** 5/13/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/12/2015  
**Date Overflow Ended:** 5/12/2015  
**Location:**

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**12:30 pm**  
**1:20 pm**

**815 North 35th Street, P008-0290, ditch**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** 500

(Give an estimate in gallons)

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**CE7D68E5-BBA7-4F9E-9D89-8C2B22AC893E**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** CE7D68E5-BBA7-4F9E-9D89-8C2B22AC893E

**Date Sent:** 5/13/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/12/2015**

Time:

**11:30 am**

Date Overflow Ended: **5/12/2015**

Time:

**11:58 am**

Location: **2002 South 71st Street, RL01-1120, storm drain**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**1**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OE EI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**A7D4D75B-C5B0-416D-B549-9D8A1101526B**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** A7D4D75B-C5B0-416D-B549-9D8A1101526B

**Date Sent:** 5/13/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/12/2015**

Date Overflow Ended: **5/12/2015**

Location:

**4000 Free Ferry Road, P007-1140, creek**

Facility name:

Time:

Time:

**P Street**

**3:00 pm**

**4:15 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 1875**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OE EI - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**CE37BE14-81FC-4284-B7C8-8E593CC2F68F**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** CE37BE14-81FC-4284-B7C8-8E593CC2F68F

**Date Sent:** 5/13/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name: **Massard**

Date Overflow Began: **5/13/2015**

Time: **9:00 am**

Date Overflow Ended: **5/13/2015**

Time: **10:00 am**

Location:

**2224 North 52nd Street, S005-0770 to 0760, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **3000**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**



**CONFIRMATION NUMBER**

**5F08433A-CD96-4E12-A1F9-D2ED80B8660C**

(NOTE: You will need this number, should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 5F08433A-CD96-4E12-A1F9-D2ED80B8660C**  
**Date Sent: 5/12/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
Date Overflow Began: **5/11/2015**  
Date Overflow Ended: **5/12/2015**  
Location: **2000 Zero Street, Z001-0460, creek**

Facility name:  
Time:  
Time:

**P Street**  
**4:20 pm**  
**10:30 am**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 103000**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**D69FE819-B56D-47AC-B35B-F40273252E1C**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** D69FE819-B56D-47AC-B35B-F40273252E1C

**Date Sent:** 5/12/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/11/2015**

Time:

**4:30 pm**

Date Overflow Ended: **5/12/2015**

Time:

**8:25 am**

Location: **2000 Zero Street, 2001-770, creek**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

**Cause of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

*(Enter overflow type if not listed)*

**Volume:** **135750**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**46ABB4E2-8EC9-41E5-97FA-9A27EC46A346**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 46ABB4E2-8EC9-41E5-97FA-9A27EC46A346**

**Date Sent: 5/12/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/11/2015**

Date Overflow Ended: **5/12/2015**

Location: **2000 Zero Street, 2001-0754, creek**

Facility name:

Time:

Time:

**P Street**

**4:20 pm**

**8:25 am**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 181000**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

CONFIRMATION NUMBER

57C654A9-4DC2-4EA6-8559-28F70B1F51E5

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 57C654A9-4DC2-4EA6-8559-28F70B1F51E5

Date Sent: 5/12/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Facility name: P Street

11:45 am

Date Overflow Began: 5/11/2015

Time: 8:05 am

Date Overflow Ended: 5/12/2015

Time:

Location: 3002 North L Street, P008-0030 to 0020, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: 6100

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

jjohnson@fsark.com

**CONFIRMATION NUMBER**

**35CAFF24-93AA-4815-AC98-C07EC097EFA5**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 35CAFF24-93AA-4815-AC98-C07EC097EFA5**

**Date Sent: 5/12/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/11/2015**

Time:

**12:40 pm**

Date Overflow Ended: **5/11/2015**

Time:

**10:15 pm**

Location: **3601 Wheeler, MC04-0042 to 0040, creek**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:**

**5750**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe **repaired**
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

---

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**31276279-8357-41BF-925E-A26F5825C10F**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 31276279-8357-41BF-925E-A26F5825C10F

**Date Sent:** 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/10/2015**

Date Overflow Ended: **5/11/2015**

Location:

Facility name:

Time:

Time:

**Massard**

**11:05 am**

**3:39 pm**

**1013 North 18th Street, P005-1495, storm drain**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 188400**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**D589613B-0412-4B4C-89E2-DC448FE51B40**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** D589613B-0412-4B4C-89E2-DC448FE51B40

**Date Sent:** 5/12/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Date Overflow Began: **5/11/2015**

Date Overflow Ended: **5/11/2015**

Location:

Facility name:

**Massard WWTP**

Time:

**7:30 pm**

Time:

**9:00 pm**

**Scum and Grit overflow line break. Massard plant grounds.  
Using portable pumps to pump around the break until repaired.**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type: **Plant line break**

*(Enter overflow type if not listed)*

**Volume: 1000**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Pumping around break**

**Environmental Damage**

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

Reported By **Steve Floyd**

Title **Superintendent**

Telephone Number **(479) 784-2331**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**sfloyd@fortsmithar.gov**

CONFIRMATION NUMBER

67C453FA-F2BC-4EBA-9F72-D5F5E053F962

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 67C453FA-F2BC-4EBA-9F72-D5F5E053F962
Date Sent: 5/11/2015

[X] SSO [ ] Bypass [X] Upset
Facility Permit Number:
Date Overflow Began:
Date Overflow Ended:
Location:

AR0033278
5/10/2015
5/11/2015

Facility name:
Time:
Time:

P Street
6:10 pm
3:00 pm

1319 North 17th Street, P006-360 to 0350, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- [X] Manhole Overflow
[ ] Lift Station Overflow
[ ] Main Line Overflow
[ ] Service Line Overflow
[ ] Other Overflow Type:

(Enter overflow type if not listed)

Volume: 269000

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- [X] I & I - Rainfall
[ ] Roots
[ ] Grease
[ ] Debris
[ ] Equipment Failure
[ ] Construction
[ ] Vandalism
[ ] Power Failure
[ ] Line Failure/Break
[ ] Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- [X] Machine rodded [X] Disinfected and Deodorized
[ ] Jet-Vac [ ] Hydro Cleaned
[ ] Hand rodded [ ] Spread Lime on Affected Area
[ ] Used Generator To Power Pumps/Equipment [ ] Public Notification
[ ] Other: Describe

Environmental Damage

- [X] OEHC - Observed or Evidence of Human Contact [X] NEAH - No Evidence of Adverse Health/Environmental Impact
[ ] OEEI - Observed or Evidence of Environmental Impact [ ] EFK - Evidence of Fish Kill

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

This is closeout to confirmation number F6512EF1-AAE1-4A0C-940C-F103A4BFCC45

Email a Copy of This Report to the Email Address:
jjohnson@fsark.com



**CONFIRMATION NUMBER**

**F6512EF1-AAE1-4A0C-940C-F103A4BFCC45**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** F6512EF1-AAE1-4A0C-940C-F103A4BFCC45

**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/9/2015**

Time:

**6:10 pm**

Date Overflow Ended:

Time:

Location:

**1319 South 17th Street, P006-0360 to 0350, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:**

(Give an estimate in gallons)

Impact of SSO Event:

**SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Disinfected and Deodorized
- Jet-Vac
- Hydro Cleaned
- Hand rodded
- Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment
- Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**25B517D7-28E7-4494-8B13-AC35D6A6850D**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 25B517D7-28E7-4494-8B13-AC35D6A6850D  
**Date Sent:** 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/10/2015**  
 Date Overflow Ended: **5/11/2015**  
 Location:

Facility name:  
 Time:  
 Time:

**P Street**  
**10:30 am**  
**10:40 am**

**North 20th and North D Street, P005-1940, storm drain**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 145000**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**0BB0F313-1F6F-427D-B6B1-984CC21D7A5D**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 0BB0F313-1F6F-427D-B6B1-984CC21D7A5D

**Date Sent:** 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name: **Massard**

Date Overflow Began: **5/10/2015**

Time: **2:00 am**

Date Overflow Ended: **5/11/2015**

Time: **3:35 pm**

Location: **1601 South 74th Street, RL01-0730, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **338250**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**38B34505-68C1-4204-8B4D-7A4F6554F9B1**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent:**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 38B34505-68C1-4204-8B4D-7A4F6554F9B1  
**Date Sent:** 5/11/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0021750  
**Date Overflow Began:** 5/10/2015  
**Date Overflow Ended:** 5/11/2015  
**Location:** 12920 Brittney Drive, FL02-1860, ditch

**Facility name:**  
**Time:**  
**Time:**

**Massard**  
**12:15 am**  
**3:15 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** 117000

(Give an estimate in gallons)

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact  NEAH - No Evidence of Adverse Health/Environmental Impact
- OE EI - Observed or Evidence of Environmental Impact  EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**B5F33B6E-F407-472A-9380-5C22FA47319E**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** B5F33B6E-F407-472A-9380-5C22FA47319E

**Date Sent:** 5/11/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278

**Facility name:**

**P Street**

**Date Overflow Began:** 5/11/2015

**Time:**

**1:40 pm**

**Date Overflow Ended:** 5/11/2015

**Time:**

**2:10 pm**

**Location:**

2720 South S Street, P009-0350, ditch

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

**Cause of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

(Enter overflow type if not listed)

**Volume:**

**150**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Disinfected and Deodorized
- Jet-Vac
- Hydro Cleaned
- Hand rodded
- Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment
- Public Notification
- Other: Describe

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- OEEL - Observed or Evidence of Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**4891CDCB-782D-406B-9456-01B5F9261FE6**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**SSO ID#: 4891CDCB-782D-406B-9456-01B5F9261FE6**      **24-Hour Sanitary Sewer Overflow Report**

**Date Sent: 5/11/2015**

SSO    Bypass    Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/11/2015**

Date Overflow Ended: **5/11/2015**

Location:

Facility name:

Time:

Time:

**P Street**

**3:30 pm**

**3:30 pm**

**2809 Broken Hill Drive, Z005-0450, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**1**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**8F42BDD4-5B51-40CB-BA0D-F1F75028AB07**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 8F42BDD4-5B51-40CB-BA0D-F1F75028AB07  
**Date Sent:** 5/11/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/11/2015  
**Date Overflow Ended:** 5/11/2015  
**Location:**

**Facility name:**  
**Time:**  
**Time:**

**P Street**  
**2:40 pm**  
**2:40 pm**

**901 Fresno, MC03- New line manhole constructed to replace new. Project not completed yet. ditch**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** unknown

*(Give an estimate in gallons)*

**Impact of SSO Event:** SSO Reached Receiving Water (river,stream)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

24-Hour Sanitary Sewer Overflow Report

SSO ID#: FFF0F573-77C4-47E2-A95D-5DF88879C509

Date Sent: 5/9/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Facility name:

P Street

Date Overflow Began: 5/9/2015

Time:

1:15 pm

Date Overflow Ended: 5/9/2015

Time:

4:45 pm

Location: 700 Belle Avenue, P008-0690 to 0680, building

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

Cause of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Volume: 150

(Give an estimate in gallons)

Impact of SSO Event: Basement Backup

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By Jimme B Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address: jjohnson@fortsmithar.gov



**CONFIRMATION NUMBER**

**449335E2-D847-4F43-AD06-C470AB0FE5D0**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 449335E2-D847-4F43-AD06-C470AB0FE5D0  
**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/9/2015**  
 Date Overflow Ended: **5/9/2015**  
 Location: **4914 Armour Avenue, S009-0710 to 0679, Yard**

Facility name:  
 Time:  
 Time:

**P Street**  
**4:30 pm**  
**5:50 pm**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 800**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**55CA3A5E-6B58-49DC-B7AA-117D3661EFB0**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 55CA3A5E-6B58-49DC-B7AA-117D3661EFB0

**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Date Overflow Began: **5/10/2015**

Date Overflow Ended: **5/10/2015**

Location:

Facility name:

Time:

Time:

**Massard**

**7:38 am**

**8:24 am**

**4115 Marshall Drive, S008-0760 to 0660, Yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**46**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**2C16E925-CAEE-405F-94B0-0CCB48F48966**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 2C16E925-CAEE-405F-94B0-0CCB48F48966

**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**

Facility name:

**Massard**

Date Overflow Began: **5/10/2015**

Time: -

**6:00 am**

Date Overflow Ended: **5/10/2015**

Time:

**7:59 am**

Location: **108 north 53rd Street, S003-0420 to 0410, yard**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**119**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**844EC1BF-2B8D-4E1C-B901-E37F0D0676E0**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 844EC1BF-2B8D-4E1C-B901-E37F0D0676E0  
**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0021750**  
 Date Overflow Began: **5/10/2015**  
 Date Overflow Ended: **5/10/2015**  
 Location: **1422 North 56th Terrace, S002-1890 to 1880, yard**

Facility name: **Massard**  
 Time: **7:45 am**  
 Time: **8:45 am**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **60**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**F04E613C-5810-4F9F-A0C8-2ADED2377F60**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: F04E613C-5810-4F9F-A0C8-2ADED2377F60**

**Date Sent: 5/10/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/10/2015**

Time:

**5:53 pm**

Date Overflow Ended: **5/10/2015**

Time:

**6:20 pm**

Location:

**3409 Gary Street, P009-2250 to 2210, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

**Cause of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

(Enter overflow type if not listed)

**Volume: 27**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe **Sped up by pass pump**
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**76DF340F-B48B-4E62-96D8-AF7FE9FE700C**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**SSO ID#: 76DF340F-B48B-4E62-96D8-AF7FE9FE700C**      **24-Hour Sanitary Sewer Overflow Report**

**Date Sent: 5/11/2015**

SSO    Bypass    Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/10/2015**

Date Overflow Ended: **5/11/2015**

Location:

Facility name:

Time:

Time:

**P Street**

**1:10 pm**

**10:26 am**

**North 20th and North H Street, P005-1750, paved area**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

**99800**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Occurred at Treatment Plant**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & J).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**CD876CC1-4345-42B1-BCF8-9C06C3F31229**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** CD876CC1-4345-42B1-BCF8-9C06C3F31229

**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/10/2015**

Date Overflow Ended:

Location:

Facility name:

Time:

Time:

**P Street**

**12:00 pm**

**5:45 pm**

**1305 Willowbrook, 2008-0165 to 0160, ditch**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:**

**246,500**

(Give an estimate in gallons)

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**repaired**

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**E79F4A03-7DAB-4C7F-8691-6F9B5F1CE56C**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** E79F4A03-7DAB-4C7F-8691-6F9B5F1CE56C  
**Date Sent:** 5/11/2015

SSO  Bypass  Upset

**Facility Permit Number:** AR0033278  
**Date Overflow Began:** 5/10/2015  
**Date Overflow Ended:** 5/11/2015  
**Location:**

**Facility name:** P Street  
**Time:** 10:45 pm  
**Time:** 10:58 am

**3700 Kinkaed Avenue, P007-0482, yard**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** 217300

(Give an estimate in gallons)

**Impact of SSO Event:** SSO Affected Private Property (ground)

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded  Disinfected and Deodorized
- Jet-Vac  Hydro Cleaned
- Hand rodded  Spread Lime on Affected Area
- Used Generator To Power Pumps/Equipment  Public Notification
- Other: Describe

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact  NEAH - No Evidence of Adverse Health/Environmental Impact
- OEEL - Observed or Evidence of Environmental Impact  EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

This is closeout of confirmation number 6141D0A3-53B4-473A-971E-566E85FAC7F4

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**



CONFIRMATION NUMBER

6141D0A3-53B4-473A-971E-566E85FAC7F4

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 6141D0A3-53B4-473A-971E-566E85FAC7F4

Date Sent: 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: AR0033278

Date Overflow Began: 5/9/2015

Date Overflow Ended:

Location:

Facility name:

Time:

Time:

P Street

10:45 pm

3700 Kindead Avenue, P007-0482, yard

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume:

(Give an estimate in gallons)

Impact of SSO Event:

SSO Affected Private Property (ground)

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address: jjohnson@fsark.com

**CONFIRMATION NUMBER**

**EE260C50-4950-4293-AE41-A0E3B33F0004**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** EE260C50-4950-4293-AE41-A0E3B33F0004  
**Date Sent:** 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/10/2015**

Date Overflow Ended: **5/11/2015**

Location:

Facility name:

Time:

Time:

**P Street**

**3:35 am**

**9:15 am**

**2020 South R Street, P006-0800 to 0790, building**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **178000**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**2F97EBF5-C42F-4854-9F16-FAA0D67B4349**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 2F97EBF5-C42F-4854-9F16-FAA0D67B4349  
**Date Sent:** 5/11/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/10/2015**  
 Date Overflow Ended: **5/11/2015**  
 Location: **400 North 20th Street, P005-1920, paved area**

Facility name:  
 Time:  
 Time:

**P Street**  
**9:50 pm**  
**10:22 am**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **328800**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**6D92FC62-D510-4B25-8A44-90C69B12DD33**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 6D92FC62-D510-4B25-8A44-90C69B12DD33  
**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/9/2015**

Date Overflow Ended:

Location:

Facility name:

Time:

Time:

**P Street**

**9:50 pm**

**400 North 20th Street, P005-1920, Paved Area**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**6EA9B2EC-4E21-4374-994F-0227EDE60C19**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 6EA9B2EC-4E21-4374-994F-0227EDE60C19**  
**Date Sent: 5/11/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/10/2015**  
 Date Overflow Ended: **5/11/2015**  
 Location: **North 20th and E Street, P005-1860, paved area**

Facility name:  
 Time:  
 Time:

**P Street**  
**9:05 pm**  
**10:24 am**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume: 223900**

*(Give an estimate in gallons)*

**Impact of SSO Event: SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

Closed out of confirmations number E5D52228-FA28-4A83-890D-3ECAC853A201

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**E5D52228-FA28-4A83-890D-3ECAC853A201**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** E5D52228-FA28-4A83-890D-3ECAC853A201  
**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/9/2015**

Time:

**9:05 pm**

Date Overflow Ended:

Time:

Location:

**North 20th and North E Street, P005-1860, Paved Area**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Volume:**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river, stream)**

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**BD3216C9-A8D6-4062-9E4F-2A1A8BE71CBD**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** BD3216C9-A8D6-4062-9E4F-2A1A8BE71CBD  
**Date Sent:** 5/12/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/9/2015**  
 Date Overflow Ended: **5/12/2015**  
 Location: **3200 North M Street, P005-3030, ditch**

Facility name:  
 Time:  
 Time:

**P Street**  
**10:20 am**  
**8:00 am**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **692000**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

This is closeout to confirmation number 33FB38F1-2082-4B17-A854-D900CA8E7906.

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**33FB38F1-2082-4B17-A854-D900CA8E7906**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 33FB38F1-2082-4B17-A854-D900CA8E7906

**Date Sent:** 5/10/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

**P Street**

Date Overflow Began: **5/9/2015**

Time:

**10:20 pm**

Date Overflow Ended:

Time:

Location:

**3200 North M Street, P005-3030, ditch**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:**

*(Give an estimate in gallons)*

**Impact of SSO Event:**

**SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**



24-Hour Sanitary Sewer Overflow Report

SSO ID#: 08393443-E56D-432E-B639-70C7687397A2

Date Sent: 5/9/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Facility name:

P Street

Date Overflow Began: **5/9/2015**

Time:

2:00 am

Date Overflow Ended: **5/9/2015**

Time:

8:30 am

Location: **3200 North M Street, P005-3030, ditch**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

Volume: **8190**

(Give an estimate in gallons)

Impact of SSO Event: **SSO Reached Receiving Water (river,stream)**

Cause of Overflow

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

Environmental Damage

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

Reported By **Jimme B Johnson**

Title **Superintendent**

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fortsmithar.gov**

CONFIRMATION NUMBER

9379D260-208C-4596-AB7E-69AA83F08B0E

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

The following information has been sent.

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24-Hour Sanitary Sewer Overflow Report

SSO ID#: 9379D260-208C-4596-AB7E-69AA83F08B0E
Date Sent: 5/8/2015

SSO Bypass Upset

Facility Permit Number: AR0033278
Date Overflow Began: 5/8/2015
Date Overflow Ended: 5/8/2015
Location: 4611 Arlington Avenue, FL02-0640 to 0630, building and yard

Facility name:
Time:
Time:

P Street
6:30 am
7:45 pm

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

Type of Overflow

- Manhole Overflow
Lift Station Overflow
Main Line Overflow
Service Line Overflow
Other Overflow Type:

(Enter overflow type if not listed)

Volume: 375

(Give an estimate in gallons)

Impact of SSO Event: SSO Reached Receiving Water (river,stream)

Cause of Overflow

- I & I - Rainfall
Roots
Grease
Debris
Equipment Failure
Construction
Vandalism
Power Failure
Line Failure/Break
Other Cause:

Action Taken - Check all that apply

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
Disinfected and Deodorized
Jet-Vac
Hydro Cleaned
Hand rodded
Spread Lime on Affected Area
Used Generator To Power Pumps/Equipment
Public Notification
Other: Describe

Environmental Damage

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

Reported By Jimmie B. Johnson

Title Superintendent

Telephone Number (479) 784-2231

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:
jjohnson@fsark.com

**CONFIRMATION NUMBER**

**1EDA4DC0-209F-4B32-9F89-C90161AC8609**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#: 1EDA4DC0-209F-4B32-9F89-C90161AC8609**

**Date Sent: 5/7/2015**

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **2/9/2015**

Date Overflow Ended: **5/07/2015**

Location:

Facility name:

Time:

Time:

**P Street**

**9:30 am**

**8:00 am**

**2321 Rogers Avenue, Nearest Manhole P005-2290, Storm Drain**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 2784**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause: **service tied to storm drain**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe **construct line extension**
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

**Additional Comments if Needed:**

This is close out to Confirmation Number 715871EA-0841-4919-B49D-A96CAB4B9FB9. New line has been constructed and service tied to sanitary sewer.

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**EB9AF8E4-DF60-41F0-ADBB-F8D551D04F6E**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** EB9AF8E4-DF60-41F0-ADBB-F8D551D04F6E  
**Date Sent:** 5/6/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**  
 Date Overflow Began: **5/5/2015**  
 Date Overflow Ended: **5/5/2015**  
 Location: **1305 Willow Brook Loop, 2008-0178-0160, Ditch**

Facility name:  
 Time:  
 Time:

**P Street**  
**4:05 pm**  
**8:15 pm**

*(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).*

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

*(Enter overflow type if not listed)*

**Volume:** **6250**

*(Give an estimate in gallons)*

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

*(Short term and long-term action, including clean-up and any plans to remediate I & I).*

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Set up by-pass pumping**

**Environmental Damage**

- OEHC - Observed or Evidence of Human Contact
- OEEL - Observed or Evidence of Environmental Impact
- NEAH - No Evidence of Adverse Health/Environmental Impact
- EFK - Evidence of Fish Kill

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

**CONFIRMATION NUMBER**

**6D1DD012-C571-48E1-9A47-C559DB29F3FD**

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

**The following information has been sent.**

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**24-Hour Sanitary Sewer Overflow Report**

**SSO ID#:** 6D1DD012-C571-48E1-9A47-C559DB29F3FD  
**Date Sent:** 5/6/2015

SSO  Bypass  Upset

Facility Permit Number:	<b>AR0033278</b>	Facility name:	<b>P Street</b>
Date Overflow Began:	<b>5/5/2015</b>	Time:	<b>11:50 am</b>
Date Overflow Ended:	<b>5/5/2015</b>	Time:	<b>12:45 pm</b>
Location:	<b>5901 Fort Lane, FL01-0030,Ditch</b>		

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume:** **4000**

(Give an estimate in gallons)

**Impact of SSO Event:** **SSO Reached Receiving Water (river,stream)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause: **Crack in manhole**

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & I).

- |  |  |
|--|--|
| <input type="checkbox"/> Machine rodded                          | <input checked="" type="checkbox"/> Disinfected and Deodorized |
| <input checked="" type="checkbox"/> Jet-Vac                      | <input type="checkbox"/> Hydro Cleaned                         |
| <input type="checkbox"/> Hand rodded                             | <input type="checkbox"/> Spread Lime on Affected Area          |
| <input type="checkbox"/> Used Generator To Power Pumps/Equipment | <input type="checkbox"/> Public Notification                   |
| <input checked="" type="checkbox"/> Other: Describe              | <b>repaired Manhole</b>  |

**Environmental Damage**

- |  |   |
|--|---|
| <input type="checkbox"/> OEHC - Observed or Evidence of Human Contact        | <input checked="" type="checkbox"/> NEAH - No Evidence of Adverse Health/Environmental Impact |
| <input type="checkbox"/> OEEL - Observed or Evidence of Environmental Impact | <input type="checkbox"/> EFK - Evidence of Fish Kill  |

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:  
**jjohnson@fsark.com**

24-Hour Sanitary Sewer Overflow Report

SSO ID#: 23CE102D-F77E-4E2E-9467-4BC08FB11625

Date Sent: 5/1/2015

SSO  Bypass  Upset

Facility Permit Number: **AR0033278**

Date Overflow Began: **5/1/2015**

Date Overflow Ended: **5/1/2015**

Location: **1815 Garner Lane, P009-0280 to 0260, yard**

Facility name:

Time:

Time:

**P Street**

**8:00 am**

**9:30 am**

(Give address, manhole number-if numbered. Include where the overflow went-yard, ditch, stream, storm sewer, building, other).

**Type of Overflow**

- Manhole Overflow
- Lift Station Overflow
- Main Line Overflow
- Service Line Overflow
- Other Overflow Type:

(Enter overflow type if not listed)

**Volume: 900**

(Give an estimate in gallons)

**Impact of SSO Event: SSO Affected Private Property (ground)**

**Cause of Overflow**

- I & I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Line Failure/Break
- Other Cause:

**Action Taken - Check all that apply**

(Short term and long-term action, including clean-up and any plans to remediate I & J).

- Machine rodded
- Jet-Vac
- Hand rodded
- Used Generator To Power Pumps/Equipment
- Other: Describe
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification

**Environmental Damage**

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

Reported By **Jimmie B. Johnson**

Title **Superintendent**

Telephone Number **(479) 784-2231**

Additional Comments if Needed:

Email a Copy of This Report to the Email Address:

**jjohnson@fsark.com**

Monthly SSO Report May 2015

Permit Number	Manhole Number	Location	Receiving Water	Duration Min.	Cause	Volume (Gallons)	Component	Date Overflow Started	Date Overflow Stopped	Started	Stopped	Steps Taken
AR0021750	S008-0760 to 0660	4115 Marshall Drive	Yard	46	I & I - Rainfall	46	Main Line	5/10/2015	5/10/2015	7:38 AM	8:24 AM	
AR0021750	S003-0420 to 0410	108 North 53rd Street	yard	119	I & I - Rainfall	119	Main Line	5/10/2015	5/10/2015	6:00 AM	7:59 AM	
AR0021750	S002-1890 to 1880	1422 North 56th Terrace	yard	60	I & I - Rainfall	60	Main Line	5/10/2015	5/10/2015	7:45 AM	8:45 AM	
AR0021750	RL01-0730	1601 South 74th Street	yard	2255	I & I - Rainfall	338250	Manhole	5/10/2015	5/11/2015	2:00 AM	3:35 PM	
AR0021750	FL02-1860	12920 Brittney Drive	ditch	2340	I & I - Rainfall	117000	Manhole	5/10/2015	5/11/2015	12:15 AM	3:15 PM	
AR0021750	RL01-0680	Carol Ann Cross Park	yard	2252	I & I - Rainfall	225200	Manhole	5/10/2015	5/11/2015	2:05 AM	3:37 PM	
AR0021750	S004-1140	5600 Rogers Avenue	storm drain	840	I & I - Rainfall	168000	Manhole	5/10/2015	5/10/2015	6:00 AM	8:00 PM	
AR0021750	The manway to a 5 million gallon wet weather sewer storage tank is leaking	5601 Jenny Lind Road	yard					5/11/2015				
AR0021750	The manway to a 5 million gallon wet weather sewer storage tank was leaking	5601 Jenny Lind Road	yard	5928	I & I - Rainfall	53280	Manway fo storage tank	5/11/2015	5/14/2015	3:12 PM	8:00 AM	
AR0021750	Scum and Grit overflow	Massard WWTP	yard	90	Line Break	1000	Main Line	5/11/2015	5/11/2015	7:30 PM	9:00 PM	Using portable pumps to pump around the break until repaired.
AR0021750	RL01-1120	2002 South 71st Street	storm drain	unknown	I & I - Rainfall	1	Manhole	5/12/2015	5/12/2015	11:30 AM	11:58 AM	
AR0021750	S005-0770 to 0760	2224 North 52nd Street	yard	60	Debris	3000	Main Line	5/13/2015	5/13/2015	9:00 AM	10:00 AM	
AR0021750	S009-0785-0780	4914 Armour Avenue	yard	unknown	I & I - Rainfall	1	Service	5/13/2015	5/13/2015	11:00 AM	11:00 AM	
AR0021750	Scum and Grit Overflow	Massard Plant Grounds	yard	10	Line Failure/Break	500	line failure	5/13/2015	5/13/2015	12:00 AM	12:10 AM	
AR0021750	S004-1420	5600 Rogers Avenue	storm drain	480	I & I - Rainfall	4800	Manhole	5/20/2015	5/20/2015	4:00 AM	12:00 PM	Disinfected and Deodorized
AR0021750	S001-0880	1813 Craftwood	storm drain	660	I & I - Rainfall	16500	Manhole	5/20/2015	5/20/2015	8:20 AM	7:20 PM	
AR0021750	RL01-1120	2002 South 71st Street	storm drain	420	I & I - Rainfall	23100	Manhole	5/20/2015	5/20/2015	12:10 PM	7:10 PM	
AR0021750	RL01-0680	Carol Ann Cross Park	yard	730	I & I - Rainfall	73000	Manhole	5/20/2015	5/20/2015	5:45 AM	5:55 PM	Disinfected and Deodorized
AR0021750	FC02-0860	12920 Brittany Drive	yard	166	I & I - Rainfall	37350	Manhole	5/20/2015	5/20/2015	10:57 AM	1:43 PM	
AR0021750	RL01-1060	1801 South 74th Street	yard	615	I & I - Rainfall	92250	Manhole	5/20/2015	5/20/2015	5:00 AM	3:15 PM	Disinfected and Deodorized
AR0021750	RL01-1280	2116 South 70th Street	storm drain	425	I & I - Rainfall	42500	Manhole	5/20/2015	5/20/2015	8:20 AM	7:25 PM	
AR0021750	S004-1010 to 1000	4623 Rogers Avenue	yard	695	Root, Grease, Line Failure/Break	6950	Main Line	5/22/2015	5/22/2015	8:25 AM	8:00 PM	
AR0021750	Z001-0770	5800 Boys Club Ln	Creek	1365	I & I - Rainfall	375375	Manhole	5/24/2015	5/25/2015	8:50 PM	7:35 PM	
AR0021750	Z001-0756	5800 Boys Club Ln	Creek	1385	I & I - Rainfall	380875	Manhole	5/24/2015	5/25/2015	8:30 PM	7:35 PM	
AR0021750	Z001-0760	5800 Boys Club Ln	Creek	1370	I & I - Rainfall	137000	Manhole	5/24/2015	5/25/2015	8:45 PM	7:35 PM	
AR0021750	FC02-0860	12920 Brittany Drive.	Creek	1335	I & I - Rainfall	133500	Manhole	5/24/2015	5/25/2015	5:40 PM	7:55 PM	
AR0021750	P006-0360 to 0350	1307 South 17th St.	yard	1375	I & I - Rainfall	35375	Manhole	5/24/2015	5/25/2015	8:30 PM	7:25 PM	
AR0021750	RL01-0680	Carol Ann Cross Park	ditch	1395	I & I - Rainfall	139500	Manhole	5/24/2015	5/25/2015	5:15 PM	4:30 PM	Disinfected and Deodorized
AR0021750	RL01-1070	7400 Euper Lane	paved area	1380	I & I - Rainfall	138000	Manhole	5/24/2015	5/25/2015	5:30 PM	4:30 PM	Disinfected and Deodorized
AR0021750	S004-1140	56th and Rogers	storm drain	720	I & I - Rainfall	72000	Manhole	5/24/2015	5/24/2015	11:30 AM	11:30 PM	Disinfected and Deodorized
AR0021750	RL01-1060	1801 South 74th Street	yard	1390	I & I - Rainfall	278000	Manhole	5/24/2015	5/25/2015	5:05 PM	4:30 PM	Disinfected and Deodorized

AR0021750	FL01-0800 to 0820	4607 Irene Street	yard	30	I & I - Rainfall	30	Main Line	5/25/2015	5/25/2015	12:00 PM	12:30 PM	This SSO was filed late due to paper work being misplaced.
AR0021750	M001-1390 to 1370	3201 South 93rd Circle	building	125	Grease	125	Main line	5/26/2015	5/26/2015	10:55 AM	1:00 PM	Jet-Vac, Public notice
AR0021750	Z005-0450 to 0230	2809 Brooken Hill Drive	river/stream	unknown	I & I - Rainfall	1	Service	5/26/2015	5/26/2015	9:10 AM	9:10 AM	
AR0021750	S009780 to 0770	4914 Armour Avenue	ditch	unknown	I & I - Rainfall	unknown	Main Line	5/27/2015	5/27/2015	5:45 PM	5:55 PM	
AR0021750	M002-0230	8900 Meandering Way	Creek	unknown	I & I - Rainfall	unknown	Manhole	5/28/2015	5/28/2015	9:30 AM	10:25 AM	Disinfected and Deodorized
AR0033278	P009-0280 to 0260	1815 Garner Lane	yard	90	Roots	900	Main Line	5/1/2015	5/1/2015	8:00 AM	9:30 AM	Machine Rodded
AR0033278	FL01-0030	5901 Fort Lane	Ditch	55	Roots	4000	Manhole	5/5/2015	5/5/2015	11:50 AM	12:45 PM	Jet-Vac
AR0033278	Z008-0178-0160	1305 Willow Brook Loop	Ditch	250	Line Failure/Break	6250	Main Line	5/5/2015	5/5/2015	4:05 PM	8:15 PM	Set up by-pass pumping
AR0033278	FL02-0640 to 0630	4611 Arlington Avenue	building and yard	75	Grease	375	Main Line	5/8/2015	5/8/2015	6:30 AM	7:45 AM	Jet-Vac (Stopped time was wrongly reported at 7:45 PM)
AR0033278	P008-0690 to 0680	700 Belle Avenue	building	30	I & I - Rainfall	150	Main Line	5/9/2015	5/9/2015	1:15 PM	4:45 PM	Jet-Vac
AR0033278	P005-1860	North 20th and North E Street	Paved Area	0				5/9/2015				
AR0033278	P005-1860	North 20th and E Street	paved area	2239	I & I - Rainfall	223900	Manhole	5/9/2015	5/11/2015	9:05 PM	10:24 AM	Closed out of confirmations number E5D52228-FA28-4A83-890D-3ECAC853A201
AR0033278	P005-3030	3200 North M Street	ditch	390	I & I - Rainfall	8190	Manhole	5/9/2015	5/9/2015	2:00 AM	8:30 AM	Disinfected and Deodorized
AR0033278	P005-3030	3200 North M Street	ditch					5/9/2015				
AR0033278	P005-3030	3200 North M Street	ditch	-140	I & I - Rainfall	692000	Manhole	5/9/2015	5/12/2015	10:20 AM	8:00 AM	Disinfected and Deodorized
AR0033278	P005-1920	400 North 20th Street	Paved Area					5/9/2015				
AR0033278	P005-1920	400 North 20th Street	paved area	2192	I & I - Rainfall	328800	Manhole	5/9/2015	5/11/2015	9:50 PM	10:22 AM	
AR0033278	P006-0360 to 0350	1319 South 17th Street	yard					5/9/2015				
AR0033278	P006-0360 to 0350	1319 North 17th Street	yard	2690	I & I - Rainfall	269000	Manhole	5/10/2015	5/11/2015	6:10 PM	3:00 PM	
AR0033278	S009-0710 to 0679	4914 Armour Avenue	Yard	80	I & I - Rainfall	800	Main Line	5/9/2015	5/9/2015	4:30 PM	5:50 PM	
AR0033278	P007-0482	3700 Kindead Avenue	yard					5/9/2015				
AR0033278	P007-0482	3700 Kinkaed Avenue	yard	2173	I & I - Rainfall	217300	Manhole	5/9/2015	5/11/2015	10:45 PM	10:58 AM	
AR0033278	P005-1495	1013 North 18th Street	storm drain	1884	I & I - Rainfall	188400	Manhole	5/10/2015	5/11/2015	11:05 AM	3:39 PM	
AR0033278	P005-1750	North 20th and North H Street	paved area	1996	I & I - Rainfall	99800	Manhole	5/10/2015	5/11/2015	1:10 PM	10:26 AM	
AR0033278	P006-0800 to 0790	2020 South R Street	building	1780	I & I - Rainfall	178000	Manhole	5/10/2015	5/11/2015	3:35 AM	9:15 AM	
AR0033278	P005-1940	North 20th and North D Street	storm drain	1450	I & I - Rainfall	145000	Manhole	5/10/2015	5/11/2015	10:30 AM	10:40 AM	
AR0033278	P009-2250 to 2210	3409 Gary Street	yard	27	I & I - Rainfall	27	Main Line	5/10/2015	5/10/2015	5:53 PM	6:20 PM	Sped up by pass pump
AR0033278	Z008-0165 to 0160	1305 Willowbrook	ditch	345	Line Failure/Break	246500	Main Line	5/10/2015	5/10/2015	12:00 PM	5:45 PM	repaired line
AR0033278	P009-0350	2720 South S Street	ditch	30	Roots	150	Manhole	5/11/2015	5/11/2015	1:40 PM	2:10 PM	Machine Rodded
AR0033278	MC03-0582	901 Fresno	ditch	unknown	I & I - Rainfall	unknown	Manhole	5/11/2015	5/11/2015	2:40 PM	240 pm	New manhole had not been assign number at reporting time.
AR0033278	Z005-0450	2809 Broken Hill Drive	yard	unknown i	I & I - Rainfall	1	Main Line	5/11/2015	5/11/2015	3:30 PM	3:30 PM	
AR0033278	P008-0030 to 0020	3002 North L Street	yard	1220	I & I - Rainfall	6100	Main Line	5/11/2015	5/12/2015	11:45 AM	8:05 AM	disinfected and Deodorized
AR0033278	Z001-0770	2000 Zero Street	creek	905	I & I - Rainfall	135750	Manhole	5/11/2015	5/12/2015	4:30 PM	8:25 AM	
AR0033278	MC04-0042 to 0040	3601 Wheeler	creek	570	Line Failure/Break	5750	Main Line	5/11/2015	5/11/2015	12:40 PM	10:15 PM	repaired line



AR0033278	Z001-0754	2000 Zero Street	creek	905	I & I - Rainfall	181000	Manhole	5/11/2015	5/12/2015	4:20 PM	8:25 AM	
AR0033278	Z001-0460	2000 Zero Street	creek	1030	I & I - Rainfall	103000	Manhole	5/11/2015	5/12/2015	4:20 PM	10:30 AM	
AR0033278	FL02-0670 and 0680	3830 Crystal Lane	ditch	unknown	I & I - Rainfall	1	Manhole	5/12/2015	5/12/2015	9:58 AM	10:10 AM	
AR0033278	P007-1140	4000 Free Ferry Road	creek	75	Roots, Grease, Line failure	1875	Manhole	5/12/2015	5/12/2015	3:00 PM	4:15 PM	Machine Rodded
AR0033278	FL01-0340	3409 Santa Fe Street	building & yard	660	Line Failure/Break	660	Manhole	5/12/2015	5/13/2015	2:00 PM	1:00 AM	Machine Rodded
AR0033278	P008-0290	815 North 35th Street	ditch	50	Roots, Grease	500	Manhole	5/12/2015	5/12/2015	12:30 PM	1:20 PM	Machine Rodded
AR0033278	P004-0040	1306 North R Street	storm drain	20	Roots, Grease	400	Manhole	5/13/2015	5/13/2015	12:20 PM	12:40 PM	Machine Rodded
AR0033278	Z001-0280	5901 Highway 71	storm drain	40	Grease	200	Manhole	5/13/2015	5/13/2015	2:10 PM	2:50 PM	Jet-Vac
AR0033278	Z003-1730	8313 South 35th Street	paved area	45	Roots	225	Manhole	5/19/2015	5/19/2015	8:15 AM	9:00 AM	Jet-Vac, Disinfected and Deodorized
AR0033278	MC02-0950	1815 South 16th Street	storm drain	610	I & I - Rainfall	61000	Manhole	5/20/2015	5/20/2015	10:50 AM	9:00 AM	
AR0033278	P007-1760	614 North 41st Street	storm drain	685	I & I - Rainfall	68500	Manhole	5/20/2015	5/20/2015	9:25 AM	8:50 PM	
AR0033278	P007-0482	3700 Kindead Avenue	storm drain	531	I & I - Rainfall	29205	Manhole	5/20/2015	5/20/2015	10:39 AM	7:30 PM	
AR0033278	P009-0200	South P Street and Old Greenwood Road	storm drain	234	I & I - Rainfall	11700	Manhole	5/20/2015	5/20/2015	10:16 AM	2:10 PM	
AR0033278	P006-0380 to 0360	1319 South 17th Street	storm drain	650	I & I - Rainfall	65000	Main Line	5/20/2015	5/20/2015	10:10 AM	9:00 PM	
AR0033278	P006-0380 to 0360	1307 South 17th Street	storm drain	650	I & I - Rainfall	65000	Main Line	5/20/2015	5/20/2015	10:10 AM	9:00 PM	
AR0033278	P004-2190	3100 Kelley Highway	Paved area	65	I & I - Rainfall	3250	Manhole	5/20/2015	5/20/2015	7:40 AM	8:45 AM	Disinfected and Deodorized
AR0033278	FL02-0524 to 0522	4510 North 6th Street	creek					5/20/2015				
AR0033278	FL02-0524 to 0522	4510 North 6th Street	creek	5190	I & I - Rainfall, line failure	519000	Main Line	5/20/2015	5/22/2015	4:00 PM	2:30 PM	repair line
AR0033278	P005-1510	1013 North 18th Street	storm drain	640	I & I - Rainfall	64000	Manhole	5/20/2015	5/20/2015	9:15 AM	7:55 PM	
AR0033278	Z001-2330 to 2320	5100 South 29th Street	yard	1200	I & I - Rainfall	12000	Main Line	5/20/2015	5/21/2015	12:20 PM	8:16 AM	Disinfected and Deodorized
AR0033278	Z002-0860 to 0850	2312 Ingersol Circle	creek	185	I & I - Rainfall	11100	Main Line	5/20/2015	5/20/2015	10:40 AM	2:15 PM	repaired line
AR0033278	Nearest Manhole P005-2290	2321 Rogers Avenue	Storm Drain	87 days	Service Tied to Storm Drain	2784	Service	2/9/2015	5/7/2015	9:30 AM	8:00 AM	This is close out to Confirmation Number 715871EA-0841-4919-B49D-A96CAB4B9FB9. New line has been constructed and service tied to sanitary sewer.
AR0033278	P005-1860	420 North 20th Street	storm drain	676	I & I - Rainfall	50700	Manhole	5/20/2015	5/20/2015	3:10 AM	2:16 PM	Disinfected and Deodorized
AR0033278	P007-1750	4110 Kindead Avenue	storm drain	610	I & I - Rainfall	76250	Manhole	5/20/2015	5/21/2015	9:25 AM	9:35 AM	Machine Rodded
AR0033278	P005-3030	3200 North M Street	creek	1080	I & I - Rainfall	270000	Manhole	5/20/2015	5/20/2015	3:30 AM	9:28 PM	Disinfected and Deodorized
AR0033278	P005-1920	400 North 20th Street	strom drain	674	I & I - Rainfall	101100	Manhole	5/20/2015	5/20/2015	3:00 AM	2:14 PM	Disinfected and Deodorized
AR0033278	Z005-0450	2900 Brooken Hill	storm drain	312	I & I - Rainfall	7800	Manhole	5/20/2015	5/20/2015	8:46 AM	1:58 PM	
AR0033278	P005-1869	North 20th and North E Street	paved area	1380	I & I - Rainfall	276000	Manhole	5/24/2015	5/25/2015	3:00 PM	2:00 PM	Disinfected and Deodorized
AR0033278	P004-1015	3100 Kelley Highway	paved area	660	I & I - Rainfall	66000	Manhole	5/24/2015	5/25/2015	12:30 PM	11:30 PM	Disinfected and Deodorized
AR0033278	Z001-0550 to 0551	1806 Zero Street	building	1395	I & I - Rainfall	13950	Mainline	5/24/2015	5/25/2015	12:00 PM	11:15 AM	
AR0033278	MC02-1150 to 1140	1600 South W Street	yard	465	Grease	4650	Mainline	5/24/2015	5/24/2015	12:30 PM	7:46 PM	Jet-Vac, Disinfected and Deodorized
AR0033278	P011-2690 to 2680	1010 South 19th Street	yard	30	Grease	300	Mainline	5/24/2015	5/25/2015	1:00 PM	1:30 PM	Jet-Vac, Disinfected and Deodorized
AR0033278	P007-0482	3700 Kindead Avenue	yard	1355	I & I - Rainfall	271000	Manhole	5/24/2015	5/25/2015	3:45 PM	2:20 PM	Disinfected and Deodorized

AR0033278	P005-1840	722 North 20th St.	Paved area	1440	I & I - Rainfall	144000	Manhole	5/24/2015	5/25/2015	7:15 PM	7:15 PM	
AR0033278	S008-0660 to 0650	4109 Bradley Drive	yard	1425	I & I - Rainfall	14250	Mainline	5/24/2015	5/25/2015	2:05 PM	1:45 PM	Disinfected and Deodorized
AR0033278	P005-3030	3200 North M Street	ditch	1360	I & I - Rainfall	340000	Manhole	5/24/2015	5/25/2015	3:30 PM	2:10 PM	Disinfected and Deodorized
AR0033278	P005-1920	400 North 20th Street	paved area	1370	I & I - Rainfall	342500	Manhole	5/24/2015	5/25/2015	3:15 PM	2:05 PM	Disinfected and Deodorized
AR0033278	S008-2180 to 2170	2910 Midland Blvd	building	1380	I & I - Rainfall	6900	Mainline	5/24/2015	5/25/2015	2:30 PM	1:30 PM	
AR0033278	P009-0165	1801 Old Greenwood Road	ditch	985	I & I - Rainfall	98500	Manhole	5/24/2015	5/25/2015	10:15 PM	2:40 PM	
AR0033278	MH P009-0660	2700 South Y St.	river/stream	81	I & I - Rainfall	2835	Manhole	5/26/2015	5/26/2015	10:39 AM	12:00 PM	Machine Rodded
AR0033278	Z001-0758	2000 Zero Street	creek	545	I & I - Rainfall	40875	Manhole	5/26/2015	5/26/2015	9:15 AM	6:20 PM	
AR0033278	MC01 0106	300 South U Street	Creek					5/26/2015		12:15 AM		
AR0033278	MC01-0106	300 South U Street	creek	4080	I & I - Rainfall	102000	Manhole	5/26/2015	5/29/2015	12:15 AM	8:15 AM	
AR0033278	MC01 0100	300 South U Street	Creek					5/26/2015		12:15 AM		
AR0033278	MC01-0100	300 South U Street	creek	4080	I & I - Rainfall	408000	Manhole	5/26/2015	5/29/2015	12:15 AM	8:15 AM	
AR0033278	Z006-1250	8006 Hermitage Drive	yard	105	Grease	105	Manhole	5/28/2015	5/28/2015	4:45 PM	6:30 PM	Jet-Vac, Disinfected and Deodorized
AR0033278	FL01-1820 to 1810	3633 Fischer Avenue	river/stream	135	Construction	1350	Mainline	5/28/2015	5/28/2015	9:30 AM	11:45 AM	Contractor broke the sewer installing a fiber optic line with a boring machine. Repaired line.

From: (479) 784-2330  
Steve Floyd  
City of Fort Smith  
3900 Kelley Highway  
  
Fort Smith, AR 72904

Origin ID: FSMA



Ship Date: 22 JUN 15  
ActWgt: 1.0 LB  
CAD: 1731127/INET3610

Delivery Address Bar Code



SHIP TO: (501) 682-0638

BILL SENDER

**NPDES Enforcement Section, Water  
ADEQ  
5301 Northshore Drive**

**North Little Rock, AR 72118**

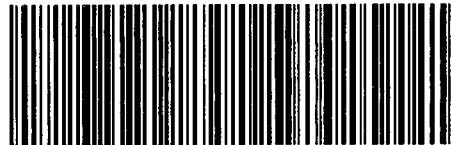
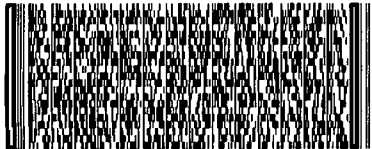
Ref #  
Invoice #  
PO #  
Dept #

**WED - 24 JUN AA  
\*\* 2DAY \*\***

TRK# 7738 8318 4719  
0201

**SA LITA**

**72118  
AR-US  
LIT**



537J1R40E/EE4B

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on [fedex.com](http://fedex.com). FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our ServiceGuide. Written claims must be filed within strict time limits—see current FedEx Service Guide.