Sanitary Sewer Overflow Monthly Report

Facility Name: <u>Pine Bluff Wastewater Utility</u> Permit Number: <u>AR0033316</u> Reporting Period(Month/Year) November <u>2020</u>

X No Sanitary Sewer Overflows This Monitoring Period

Summary Report Code Descriptions										
Cause(s) of SSO		SSO Impact	Action(s) Taken	Ultimate Discharge Location						
CO-Construction	D-Debris	NEAH-No Evidence of Adverse Health or Environmental	WO-Work Order	CR-Creek/Stream/River (please specify)						
		Impact								
E-Equipment Failure	G-Grease	OEHC-Observed or Evidence of Human Contact	EC-Environmental Cleanup	DI-Ditch						
HC-Hydro Clean	LF-Line	EFK-Evidence of Fish Kill	HC-Hydro Cleaned	DR-Drop Inlet						
	Failure/Break									
R-Rainfall	RG-Roots & Grease		HR-Hand Rodded	GR-Ground Surface						
RO-Roots	V-Vandalism		EN-Referred to Engineering	PA-Paved Area						
			PN-Public Notification	CB-Contained in Building						

Location	Manhole #	Start Date of	End Date of SSO	Estimated Volume (in gallons)	Cause of	Environmental Impost	Action (s) Taken to Address SSO	Ultimate Discharge Location
		SSO	01 550	(in gamons)	SSO	Impact	Address 550	Offinate Discharge Location

12/22/2020

Signature of Cognizant or Ranking Official

Date

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."