

Sanitary Sewer Overflow (SSO) Monthly Report

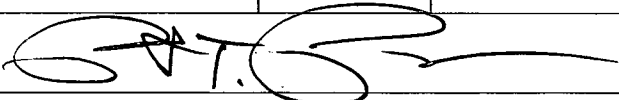
Utility Name: Hot Springs Wastewater NPDES Permit No.: AR0033880 Monitoring Period (Month/Year) June / 2012

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 Adverse Health/Environmental Impact	CR -Creek/Stream/River (specify)
E -Equipment Failure	G -Grease	OEHC -Observed or Evidence of Human Contact	DI -Ditch
HC -Hydro Clean	LF -Line Failure	EFK -Evidence of Fish Kill	DR -Drop Inlet
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 SSO	End Date of SSO	Estimated Volume (in gallons)	Cause of SSO	Environmental Impact	Action(s) Taken to Address SSO	Discharge Location
Oakcliff Aly	MH# 5411	06/28/2012	06/28/2012	1500	RG & G	NEAH	HC & EC	GR



Signature of Cognizant or Ranking Official

7/19/12
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 of knowing violations.

CONFIRMATION NUMBER

F6756A0D-9C9C-47EC-820C-D36BCAA7DE51

(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#: F6756A0D-9C9C-47EC-820C-D36BCAA7DE51
Date Sent: 6/28/2012

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	06/28/2012	Time:	1:00 pm
Date Overflow Ended:	06/28/2012	Time:	2:30 pm
Location:	Manhole # 5411 in Oakcliff Aly overflowed into ditch & 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: **1,500**

(Give an estimate in gallons)

Impact of SSO Event: **SSO Reached Public Land Only (ground)**

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 type="checkbox"/> Disinfected and Deodorized |
| <input checked="" type="checkbox"/> Jet-Vac | <input checked="" type="checkbox"/> Hydro Cleaned |
| <input type="checkbox"/> Hand rodded | <input checked="" 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

- | | |
|--|---|
| <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"/> OEEI - Observed or Evidence of Environmental Impact | <input type="checkbox"/> EFK - Evidence of Fish Kill |

Reported By **Shawn Davis** Title **Sewer Collection Manager** Telephone Number **(501) 623-6981**

Additional Comments if Needed: