

Sanitary Sewer Overflow (SSO) Monthly Report

Facility Name: Hot Springs Wastewater NPDES Permit No.: AR0033880 Monitoring Period (Month/Year) October / 2015

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	EC -Environmental Cleanup
HC -Hydro Clean	LF -Line Failure	EFK -Evidence of Fish Kill	DI -Ditch
R -Rainfall	RG -Roots/Grease		DR -Drop Inlet
RO -Roots	V -Vandalism		HR -Hand Rodded
		EN -Referred to Engineering	GR -Ground Surface
		PN -Public Notification	PA -Paved Area
			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
100 Meacon Terrace	Main Break	10/02/2015		Still Overflowing	LF	NEAH		PA & DR
100 Meancon Terrace	Main Break	10/02/2015	10/03/2015	150	LF	NEAH	HC	PA & DR
441 Leawood St.	MH# 4480	10/12/2015	10/12/2015	50	G	NEAH	HC	GR

11-15-2015

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 of knowing violations.