

Sanitary Sewer Overflow (SSO) Monthly Report

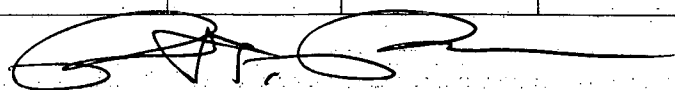
Utility Name: Hot Springs Wastewater NPDES Permit No.: AR0033880 Monitoring Period (Month/Year) January / 2013

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
Carpenter Dam Rd.	Manhole # 5260	01/02/2013	01/02/2013	3000	LF	NEAH	HC & EC	CR-Unknown
Albert Pike Rd	Manhole # 9451	01/13/2013	01/14/2013	12000	R	NEAH	HC & EC	CR-Lake Hamilton
Carpenter Dam Rd.	Manhole # 5259	01/13/2013	01/13/2013	5000	R	NEAH	HC & EC	CR-Unknown
Catherine Heights Rd	Manhole # 1750	01/14/2013		Still Overflowing at this time.	R	NEAH		CR-Gulpha
Carpenter Dam & Grand Point Rd	Gravity/Force Main	01/14/2013		Still overflowing at this time.	R	NEAH		CR-Unknown
Catherine Heights Rd	Manhole # 1750	01/14/2013	01/14/2013	8000	R	NEAH	HC & EC	CR--Gulpha
McLeod St	Manhole# 991	01/13/2013	01/14/2013	10000	R	NEAH	HC & EC	CR--Stokes
McLeod St	Manhole# 993	01/13/2013	01/14/2013	8000	R	NEAH	HC & EC	CR--Stokes
McLeod St	Manhole# 998	01/13/2013	01/14/2013	6000	R	NEAH	HC & EC	CR--Stokes



2/8/13

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.

CONFIRMATION NUMBER

FBA8E826-4547-44B1-A8F4-C5AF8537B3FA

(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#: FBA8E826-4547-44B1-A8F4-C5AF8537B3FA

Date Sent: 1/3/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	01/02/2013	Time:	3:30 pm
Date Overflow Ended:	01/02/2013	Time:	4:30 pm

Location: **Manhole # 5260, Carpenter Dam Rd, Ran over in unknown stream**

(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 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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | raked up |

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 **Chris Gordon**

Title

Maintenance controller

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

01CA1E83-2EF3-46F8-A5F4-093AF76CA8A7

(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#: 01CA1E83-2EF3-46F8-A5F4-093AF76CA8A7

Date Sent: 1/14/2013

SSO Bypass Upset

Facility Permit Number: **AR0033880**
Date Overflow Began: **1/13/2013**
Date Overflow Ended: **1/14/2013**
Location:

Facility name:
Time:
Time:

Hot Springs Wastewater
7:00 am
9:00 am

MH # 9451, ALBERT PIKE RD, RAN OVER IN STREAM OF LAKE HAMILTON

(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:

12000

(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 **RAKED UP**

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 **Chris Gordon**

Title

Maintenance Controller

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

CE9D73E9-1C88-43BE-89D1-F9358DD20CF9

(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#: CE9D73E9-1C88-43BE-89D1-F9358DD20CF9

Date Sent: 1/14/2013

SSO Bypass Upset

Facility Permit Number:	AR00338800	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/13/2013	Time:	7:00 am
Date Overflow Ended:	1/13/2013	Time:	1:00 pm

Location: **MH # 5259, Carpenter Dam Rd, ran over in unkown stream**

(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:

5000

(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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | raked up |

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 **Chris Gordon**

Title

Mintenance controller

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

3CBAA9D2-E22B-4BA5-B7C8-E7589DB670D8

(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#: 3CBAA9D2-E22B-4BA5-B7C8-E7589DB670D8

Date Sent: 1/14/2013

SSO Bypass Upset

Facility Permit Number: **AR0033880**

Facility name:

Hot Springs Wastewater

Date Overflow Began: **1/14/2013**

Time:

7:00 am

Date Overflow Ended:

Time:

Location:

MH # 1750, Catherine Heights Rd, run over in Gulpha 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:

(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 **Chris Gordon**

Title **Maintenance Controller**

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

Manhole is still running over at this time.

CONFIRMATION NUMBER

004472D7-CD05-4B45-B75F-4B796D67F162

(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#: 004472D7-CD05-4B45-B75F-4B796D67F162

Date Sent: 1/14/2013

SSO Bypass Upset

Facility Permit Number: **AR0033880**

Facility name:

Hot Springs Wastewater

Date Overflow Began: **1/14/2013**

Time:

10:00 am

Date Overflow Ended:

Time:

Location:

Gravity/force main, Carpenter Dam and Grandpoint Dr, run over in unknown stream

(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 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 **Chris Gordon**

Title

Maintenance controller

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

Line Still running over from I & I.

CONFIRMATION NUMBER

0E05CF24-9BAC-49E0-A2E0-F3203857FAC7

(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#: 0E05CF24-9BAC-49E0-A2E0-F3203857FAC7

Date Sent: 1/14/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/14/2013	Time:	7:00 am
Date Overflow Ended:	1/14/2013	Time:	1:00 pm
Location:	MH # 1750, Catherine Heights, Ran over in gulpha 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:

8000

(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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | |

Raked up

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 **Chris Gordon**

Title

MAintenance Controller

Telephone Number **(501) 623-7963**

Additional
Comments
if Needed:

CONFIRMATION NUMBER

085F55AB-E62C-4A81-8036-C390E9AC86B5

(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#: 085F55AB-E62C-4A81-8036-C390E9AC86B5

Date Sent: 1/15/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/13/2013	Time:	9:00 am
Date Overflow Ended:	1/14/2013	Time:	8:00 am
Location:	MH # 991, MCleod Rd, Ran over in Stokes 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: **10000**

(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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | Raked up |

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 **Chris Gordon** Title **MAintenance Controller** Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

C37FC07E-1F21-4D1C-B022-CE03192CA6BE

(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#: C37FC07E-1F21-4D1C-B022-CE03192CA6BE

Date Sent: 1/15/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/13/2013	Time:	8:00 am
Date Overflow Ended:	1/14/2013	Time:	8:00 am
Location:	MH # 993, Mccleod Rd, Ran over in Stokes 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: **8000**

(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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | Raked up |

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 **Chris Gordon** Title **Maintenance Controller** Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

F1E2050B-6E73-4574-A862-38902AAA1240

(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#: F1E2050B-6E73-4574-A862-38902AAA1240

Date Sent: 1/15/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/13/2013	Time:	8:00 am
Date Overflow Ended:	1/14/2013	Time:	8:00 am
Location:	MH # 998, McCleod Rd, Ran over in Stokes 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:

6000

(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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | Raked up |

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 **Chris Gordon**

Title

Maintenance Controller

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

Sanitary Sewer Overflow (SSO) Monthly Report

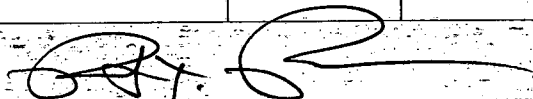
Utility Name: Hot Springs Wastewater NPDES Permit No.: AR0033880 Monitoring Period (Month/Year) January / 2013

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
Spring St	MH# 4117	01/13/2013	01/14/2013	10000	R	NEAH	HC & EC	CR--Gulpha
Spring St	MH# 4118	01/13/2013	01/14/2013	10000	R	NEAH	HC & EC	CR--Gulpha
Carpenter Dam & Grand Point Rd	Gravity/Force Main	01/14/2013	01/14/2013	Unknown	R	NEAH	HC & EC	CR--Unknown
Albert Pike Rd.	MH# 9451	01/30/2013	01/30/2013	12,000	R	NEAH	HC & EC	CR-Lake Hamilton


 Signature of Cognizant or Ranking Official

2/8/13
 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

1BEE3687-35DB-40CD-B12D-7455182427C6

(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#: 1BEE3687-35DB-40CD-B12D-7455182427C6

Date Sent: 1/15/2013

SSO Bypass Upset

Facility Permit Number: **AR0033880**

Facility name:

Hot Springs Wastewater

Date Overflow Began: **1/13/2013**

Time:

7:00 am

Date Overflow Ended: **1/14/2013**

Time:

7:00 am

Location:

MH # 4117, Spring St, Ran over in Guipha 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: 10000

(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 **Raked Up**

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 **Chris Gordon**

Title **Maintenance Controller**

Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

231A2E39-DE69-4C2C-9845-2CCD018FD304

(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#: 231A2E39-DE69-4C2C-9845-2CCD018FD304

Date Sent: 1/15/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/13/2013	Time:	7:00 am
Date Overflow Ended:	1/14/2013	Time:	7:00 am
Location:	MH 4118, Spring St, Ran over in Gulpha 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: **10000**

(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 type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | Raked Up |

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 **Chris Gordon** Title **Maintenance Controller** Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

8E4BD2DC-2824-4FC6-9C09-6F267362C0EA

(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#: 8E4BD2DC-2824-4FC6-9C09-6F267362C0EA

Date Sent: 1/15/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/14/2013	Time:	10:00 am
Date Overflow Ended:	1/14/2013	Time:	6:00 pm
Location:	Gravity/Force Main, Carpenter Dam and Grandpoint, Ran over in Unknown Stream		

(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).

- | | |
|--|--|
| <input type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | Raked up |

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 **Chris Gordon** Title **Maintnenace Controller** Telephone Number **(501) 623-7963**

Additional Comments if Needed:

CONFIRMATION NUMBER

C15BF4B3-9619-4A7D-923E-BB0DC5CED7D8

(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#: C15BF4B3-9619-4A7D-923E-BB0DC5CED7D8

Date Sent: 1/31/2013

SSO Bypass Upset

Facility Permit Number:	AR0033880	Facility name:	Hot Springs Wastewater
Date Overflow Began:	1/30/2013	Time:	8:00 am
Date Overflow Ended:	1/30/2013	Time:	6:00 pm
Location:	MH # 9451, Albert Pike Rd, Ran over in stream of Lake Hamilton		

(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).

- | | |
|--|--|
| <input type="checkbox"/> Machine rodded | <input type="checkbox"/> Disinfected and Deodorized |
| <input 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 | Raked up |

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 **Chris Gordon** Title **Maintenance Controller** Telephone Number **(501) 623-7963**

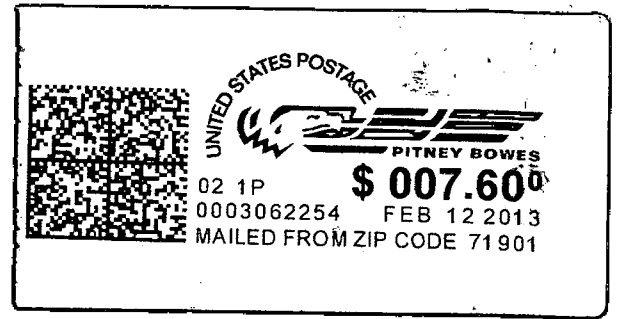
Additional Comments if Needed:

City of Hot Springs Wastewater
Treatment Plant
320 Davidson Dr.
Hot Springs, AR 71901

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ADEQ
NPDES Enforcement Section
Attn: Mo Shafii
5301 Northshore Dr.
North Little Rock, AR 72118-5317