

05/19/2016

Transmittal Letter

Arkansas Department of Environmental Quality 5301 North Shore Dr. North Little Rock, AR 72118-5317 ATTN: Michael Greenway-District 3 Field Inspector-Water Division

Please find Enclosed for your distribution the following:

April 2016 - COPPER

April 2016 - DMR

April 2016 - SSO

Munde Sincerely,

Forrest City Water Utility W.H. Calvin Murdock, Manager (870)633-2921 – Office (870)261-2849 Cell WHCM2@Forrestcitywater.com

FORREST CITY WATER UTILITY 303 NORTH ROSSER STREET P.O.		Sanitary Sewer Overflow (SSO) Month NPDES Permit No.: <u>AR0020087</u>				Ny Report Monitoring Period (Month/Year): April-2016					
BOX 816 FORREST CITY,   AR 72335 AFIN 62-00070			No Sanitary Sewer Overflows This Monitoring Period								
				Summa	ry Report Code De	script	ion				
Cause(s) of SSO			SSO Impact				Action(s) Taken		Ultimate	Ultimate Discharge Location	
CO-Construction D-Debris		NEAH - No Evidence of Adverse health/ Environmental Impact				MR	-Machine Roddeo		CR-Creek/Stream/Rever (specify)		
E-Equipment Failure	G-Grease		OEHC - Observed or Evidence of Human Contact				EC-Environmental Cleanup		nup	DI-Ditch	
HC-Hydro Clean	LF-Line Failure		EFK - Evidence of Fish Kill				HC-Hydro Cleaned			DR-Drop Inlet	
R-Rainfall	RG-Roots/Grease		OEEI - Observed or Evidence of Environmental Impact				HR-Hand Rodded		GI	GR-Ground Surface	
RÖ-Roots	V-Vandalism					EN-Referred to Engineering		ring	PA-Paved Area		
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Location	Man	hole #	Start Date of SSO	End Date of SSO	Estimated Volume (in gallons)	Caus	e of SSO	Environmental Impact	Action (s) Taken to Address SSO	Discharge Location	
1500 bock of Albert St.		<u> </u>	4/12/2016	4/12/2016	100gals or less	D		NEAH	HC	GR	
620 Upper Lake Rd.			4/12/2016	4/12/2016	50gals or less	Powe	er Failure	NEAH	Other	ĠR	
Fed. Prison lift station			4/20/2016	4/20/2016	500gals or less	E	E,D,V	NEAH	HC, Other	ĜR	
500 Block Old Madison Rd,			4/21/2016	4/21/2016	100gals or less	D		NEAH	HC,Jet Vac		
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Fed. Prison lift station		بىي مۇنلىمىن بىرى بىر مۇنلىمىن بىرى	4/25/2016	4/25/2016	100gals or less	·····	D	NEAH	Other	ĠR	
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Signature of Principal	Executive (	)ffice o	r Authorized As	zent (	VI. H. CALV	the way	Mur	Ann h		Date 5/19/16	

## Signature of Principal Executive Office or Authorized Agent

I certify under penaltyh 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.



Forrest City Water Utility 303 N. Rosser Street P.O. Box 816 Forrest City, AR 72336 870.633.2921 Off. / 870.633.5921 Fax





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