Sanitary Sewer Overflow (SSO) Monthly Report

Facility Name:	City of Siloam Springs	NPDES Permit No.: AR0020273	Monitoring Period (Month/Year): 10 / 2016
Facility Name:		111 DES 1 CIMIC 110	, , , , , , , , , , , , , , , , , , , ,

☐ No Sanitary Sewer Overflows This Monitoring Period

		THE OR THE	DE DESCRIPTION	, -		
Cause(s) of SSO		Environmental Impact	Action(s) Taken		Ultimate Discharge Location	
C - Construction	D - Debris	EFK - Evidence of Fish Kill	EC - Environmental Cleanup	JV - Jet Vac	GR - Ground	
EF - Equipment Failure	G - Grease	OEHC - Evidence of Human Contact	HC - Hydro Cleaned	SL - Spread Lime	CR - Creek / Stream / River (specify)	
LF - Line Failure	R - Rainfall (I&I)	OEEI - Evidence of Environmental Impact	HR - Hand Rodded	DD - Disinfected and	DI - Ditch	
PF - Power Failure	RO - Roots	NEAH - No Evidence of Adverse Health or	MR - Machine Rodded	Deodorized	DR - Drop Inlet	
V - Vandalism		Environmental Impact	PN - Public Notification	GP - Used Generator to	PA - Paved Area	
			EN - Referred to Engineering	Power Equipment	CB - Contained in Building	

10/16/2016	40/46/0046	A STATE OF THE PARTY OF THE PAR	of SSO	Impact	Taken	Discharge Location
of SSO 10/16/2016	10/16/2016	50	EF	NEAH	EC-SL	GR
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Signature of Cognizant or Ranking Official

1/23/16 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."