## **Sanitary Sewer Overflow Monthly Report**

Facility Name: Batesville Water Utilities		ilities Permit Number:	AR0020702	Reporting Period(Month	/Year):	November 2020
		No Sanitary Sewer Overflo	ws This Monit	toring Period		
		Summery Re	port Code Descrip	tions		
Cause(s) of SSO		SSO Impact		Action(s) Taken	Ultimate Discharge Location	
CO-Construction	D-Debris	NEAH-No Evidence of Adverse of Environment	vironmental	WO-Work Order	CR-Creek	/Stream/River (please specify)
E-Equipment Failure	G-Grease	OEHC-Observed or Evidence of Hum	an Contact	EC-Environmental Cleanup		DI-Ditch
HC-Hydro Clean	LF-Line Failure/Break	EFK-Evidence of Fish Kill	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

Location	Manhole #	State Date of SSO	End Date of SSO	Estimated Volume (in gallons)	Cause of SSO	Environmental Impact	Action(s) Taken to Address SSO	Ultimate Discharge Location
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Signature of Cognizant or Ranking Official

Date

PN-Public Notification

CB-Contained in Building

"I certify under penalty of law that this document and all attachments were prepared under my direction of 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."