

Sanitary Sewer Overflow Monthly Report

Facility Name: Batesville Water Utilities Permit Number: AR0020702 Reporting Period(Month/Year): June 2020

No Sanitary Sewer Overflows This Monitoring Period

Cause(s) of SSO		SSO Impact		Action(s) Taken		Ultimate Discharge Location
CO-Construction	D-Debris	NEAH-No Evidence of Adverse of Environmental Impact		WO-Work Order		CR-Creek/Stream/River (please specify)
E-Equipment Failure	G-Grease	OEHC-Observed or Evidence of Human Contact		EC-Environmental Cleanup		DI-Ditch
HC-Hydro Clean	LF-Line Failure/Break	EFK-Evidence of Fish Kill		HC-Hydro Cleaned		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 #	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
423 Bates St.	Mainline	6/2/2020	6/2/2020	200	RG,D	NEAH	HC,EC	GR
851 Broad St	2-159B	6/9/2020	6/9/2020	20	RG	NEAH	HC,EC	GR


 Date July 7, 2020

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