# Sanitary Sewer Overflow Monthly Report

**Facility Name:** Batesville Water Utilities **Permit Number:** AR0020702 **Reporting Period(Month/Year):** August 2017

☐ No Sanitary Sewer Overflows This Monitoring Period

| Summery Report Code Descriptions | | | | |
|---|---|---|---|---|
| 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 |
|---|---|---|---|---|---|---|---|---|
| 2501 Case St. | 5-37 | 08/11/2017 | 08/11/2017 | 200 | R,G | NEAH | HC | GR |
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Rick Chandler 9-10-17

Signature of Cognizant or Ranking Official Date

"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."