

BYPASS/OVERFLOW REPORT

Send Overflow Report to: Greg Hurley – ADEQ Enforcement Section
Phone: 501-682-0638
FAX: 501-682-0880

Name of Facility: MOUNTAIN HOME WWTP Permit No : AR0021211

Date SSO Began: 5-24-16 Date SSO Ended: 5-24-16

Address of SSO: 915 TIFTON Place

Name of Person Reporting Overflow: Terry Sanders Phone No.: 870-425-6510

Description of SSO: Manhole Overflow Manhole # 155-025 - 155-035
 Lift Station Overflow
 Main Line Overflow
 Service Line overflow
 Other: Describe _____

Estimated Volume: 60,000 Gal

Ultimate Discharge Location: Creek
(Name or location of receiving stream/creek if applicable, ditch, pavement, ground, storm drain)

Cause of SSO – Check all that apply

- I and I - Rainfall
- Roots
- Grease
- Debris
- Equipment Failure
- Construction
- Vandalism
- Power Failure
- Other – Describe _____

Action Taken – Check all that apply

- Machine rodded
- Jet-Vac
- Hydro Cleaned
- Hand rodded