

LOCATION	TYPE	Start Date & Time	End Date & Time	Est. Vol. in gallons	CAUSE	Environmental Impact	ACTIONS TAKEN	Discharge Location
October 2017								
Collin Raye Dr & 3 <sup>rd</sup>	MH	10/10/17 08:00 AM	10/10/17 02:30 PM	1500	RO	NEAH	HC,LR,EC	

**SUMMARY REPORT CODE DESCRIPTIONS**

**CAUSE(S) of Overflow**

**Overflow IMPACT**

**Action(s) Taken**

**Ultimate Discharge Location**

**Type of Overflow**

- |                      |   |                                      |   |   |
|----------------------|---|--------------------------------------|---|---|
| E- Equipment Failure | <b>NEAH</b> - No Evidence of Adverse Health | <b>WO</b> - Work Order               | <b>CR</b> - Creek/Stream/River (specify)<br>or Environmental Impact | <b>MH</b> - Manhole                     |
| C- Construction      | <b>OEHC</b> - Observed or Evidence of HC    | <b>EC</b> - Enviromental Cleanup     | <b>DI</b> -Ditch  | <b>LS</b> - L ift Station               |
| HC- Hydro cleaning   | <b>EFK</b> - Evidence of Fish Kill          | <b>HC</b> - Hydro Cleaned            | <b>DR</b> - Drop Inlet  | <b>ML</b> - Main line                   |
| P- Power Failure     | <b>OEEI</b> - Observed or Evidence of       | <b>HR</b> - Hand Rodded              | <b>GR</b> - Ground Surface  | <b>SL</b> - Servic                      |
| R- Rainfall          |   | <b>REN</b> - Referred to Engineering | <b>PA</b> -Paved Area   | <b>SSO</b> - Sanitary Sewer<br>Overflow |
| RO- Roots            |   | <b>PN</b> - Public Notification      | <b>CB</b> - Cotained in Building                                    | <b>BP</b> - Bypass                      |
|                      |   | <b>LF</b> - Line Failure / Break     |   |   |