Facility Name: CALE City

Sanitary Sewer Overflow Monthly Report

Permit Number: <u>HR0022110</u> Reporting Period(Month/Year): OCt 2012

Cause(s) of SSO		Summary Report Code Description	Summary Report Code Descriptions					
CO-Construction	D-Debris	SSO Impact	Action(s) Taken	Ultimate Discharge Location				
E-Equipment Failure HC-Hydro Clean	- Orcasc	NEAH-No Evidence of Adverse Health or Environmental Impact OEHC-Observed or Evidence of Human Contact	WO-Work Order	CR-Creek/Stream/River (please specify)				
P.D. C.U	LF-Line Failure/Break	Erk-Evidence of Fish Kill	EC-Environmental Cleanup HC-Hydro Cleaned	DI-Ditch				
RO-Roots	RG-Roots & Grease V-Vandalism	0	HR-Hand Rodded	DR-Drop Inlet				
· · · · · · · · · · · · · · · · · · ·	L		EN-Referred to Engineering	GR-Ground Surface				

Location	Manhole #				PN	-Public Notification	CB-Co	A-Paved Area	
	· · · · · · · · · · · · · · · · · · ·	Start Date of SSO	Date ofEnd Date ofSSOSSO	Estimated Caus Volume (in	Cause of SSO	se of SSO Environmental A		CB-Contained in Building	
				gallons)	· · · · · · · · · · · · · · · · · · ·	Impact	to Address SSO	Ultimate Discharg Location	
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Signature of Cognizant or Ranking Official

"I certify under penalty of taw that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that gualified 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."

CAVE CITY WATER PO BOX 69 CAVE CITY, AR. 72521



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