

The following information has been sent.

CONFIRMATION NUMBER

00196050-2d6d-4deb-9d82-2cd256f0034d

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report)

Date/Time Overflow Range

*Date Overflow Began:

8/3/2023

*Time:

11:30 am

Date Overflow Ended:

8/3/2023

Time:

1:30 pm

Facility/Permit Information

*Facility Name:

City of Bentonville

*Permit Number:

AR0022403

Location Information

Provide address and manhole number if numbered. Include where the overflow went into a yard, ditch, stream, storm sewer, building, or other. Be specific as possible.

The overflow occurred at 2404 Trails End Dr on the south side of property out of manhole# 363-2827. Sewer matter collected around manhole with some flowing into a wet weather creek. (dry at the time of overflow) Our flush truck pulled back a piece of lumber and a tennis ball while freeing the blockage. Spread lime on affected area .

Description of Problem (check all items that apply)

Type of Overflow

Manhole Overflow Lift Station Overflow Main Line Overflow Service Line Overflow

Other:

Cause of Overflow

I & I - Rainfall Roots Grease Debris Equipment Failure

Construction Vandalism Power Failure Line Failure/Break Other:

Volume of Overflow:

500

Impact of SSO Overflow Incident

SSO Affected Private Property (ground)

Environmental Damage (check all items that apply)

- OEHC - Observed or Evidence of Human Contact
- OEEI - Observed or Evidence of Environmental Impact
- EFK - Evidence of Fish Kill Manhole
- NEAH - No Evidence of Adverse Health/Environmental Impact

Action Taken (check all items that apply)

Short term and long-term action, including clean-up and any plans to remediate I & I.

- Machine Rodded
- Jet-Vac
- Hand Rodded
- Used Generator to Power Pumps/Equipment
- Disinfected and Deodorized
- Hydro Cleaned
- Spread Lime on Affected Area
- Public Notification
- Other:

Reported By

"I certify" under penalty of law that this document and all attachments were prepared under my direction or 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.

Name:

Loran Shipman

Title:

Wastewater Collection Supervisor

Phone:

4792713140

Email a Copy of This Report to the Email Address:

lshipman@bentonvillear.com

Additional Comments: