# Sanitary Sewer Overflow Monthly Report

Permit # AR0022403 Reporting period May 1-31

Facility Name: City of Bentonville

Pictures in Water Drive/Sewer Overflows

Cause(s	Cause(s) of SSO	SSO Impact	Action(s) Taken	Ultimate Discharge Location
				>
C0-Construction	D-Debris	NEAH-No Evidence of Adverse Health	WO-Work Order	CR-Creek/Stream/River
		or Environmental Impact		
Equipment Failure	G-Grease	OEHC-Observed or Evidence of Human	EC-Environmental	DI-Ditch
		Contact	Cleanup	
HC-Hydro Clean	LF-Line	EFK-Evidence of Fish Kill	HC-Hydro Cleaned	DR-Drop Inlet
	Failure/Break			,
Rainfall	RG-Roots & Grease		HR-Hand Rodded	GR-Ground Surface
RO-Roots	Vandalism		EN-Referenced to Engineer	PA-Paved Area
			PN-Public Notification	CB-Contained in Building

Location	Manhole	Manhole Start Date	End Date	Estimated	Cause	Cause Environmental	Action(s)	Ultimate Discharge
	Number	of SSO	of SSO	Volume in	of SSO	Impact		Location
				Gallons			Address SSO	
3608 SE Riviera Rd	486-5073	486-5073 5/5/2022	5/5/2022	78,000	Rainfall	NEAH	EC	CR
3001 SW Featherston St	483-5594	483-5594 5/5/2022	5/5/2022	20,000	Rainfall	NEAH	EC	CR

# Signature of Cognizant or Ranking Official

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 "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 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."

Date

The following information has been sent.

### **CONFIRMATION NUMBER**

### bf32f0da-8d23-41aa-bf67-c2212a23e8dd

-Environmental Damage (check all items that apply)

(NOTE: You will need this number should you ever need to contact ADEQ concerning this report) -Date/Time Overflow Range-\*Date Overflow Began: 5/5/2022 \*Time: 3:00 am Date Overflow Ended: 5/5/2022 Time: 1:00 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 3608 SE Riviera Rd. The City of Bentonville experienced a nearly 6" rain event. The overflow was a direct result of I & I and our Lift Station #2 could not keep up with the flow. Overflow occurred at manhole #486-5073 beside a walking trail and flowed into a nearby stream (Osage tributary 1.) 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: 78000 Impact of SSO Overflow Incident SSO Reached Receiving Water (river, stream)

☐ OEHC - Observed or Evidence of Human Contact ☐ Impact	OEEI - Observed or Evidence of Environmental
☐ EFK - Evidence of Fish Kill Manhole ☑ NEAH - N Impact	o Evidence of Adverse Health/Environmental
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 ☐ U☐ Disinfected and Deodorized ☑ Hydro Cleaned ☑ S Notification ☐ Other:	
Reported By	
"I certify" under penalty of law that this document and all or supervision in accordance with a system designed to a evaluate the information submitted. Based on my inquiry system, or those persons directly responsible for gathering to the best of my knowledge and belief, true, accurate, and penalties for submitting false information, including the violations.	ssure that qualified personnel properly gather and of the person or persons who manage the ag the information, the information submitted is, and complete. I am aware that there are significant
Name: Loran Shipman Title: Wastewater Collection Supervisor Phone: 4792713140 Email a Copy of This Report to the Email Address:	
lshipman@bentonvillear.com	
—Additional Comments:	

The following information has been sent.

## **CONFIRMATION NUMBER**

# ebdd121d-d06d-4cbf-9b0d-bb45e42fd2fb

Date/Time Overflow Range
*Date Overflow Began: 5/5/2022
*Time:
7:00 am
Date Overflow Ended:
5/5/2022
Time:
12:00 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.
Overflow occurred at 3001 SW Featherston St out of manhole #483-5594. (South side of property) It is
estimated that 20,000 gallons of sewer flowed into Little Osage Creek Tributary 2. Cleaned up what was
left of the overflow and spread lime on the 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:
Other.
Cause of Overflow
☑ I & I - Rainfall ☐ Roots ☐ Grease ☐ Debris ☐ Equipment Failure
☐ Construction ☐ Vandalism ☐ Power Failure ☐ Line Failure/Break ☐ Other:
Volume of Overflow:
20000 Impact of SSO Overflow Incident
SSO Reached Receiving Water (river, stream)

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: