

West PLANT


Sanitary Sewer Overflow Monthly Report

Facility Name: Blytheville Wastewater Permit Number: PR0022560 Reporting Period (Month/Year): October 2015

No Sanitary Sewer Overflows This Monitoring Period

| Summary Report Code Descriptions | | | |
|----------------------------------|-----------------------|--|--|
| Cause(s) of SSO | | SSO Impact | Ultimate Discharge Location |
| CO-Construction | D-Debris | NEAH-No Evidence of Adverse Health or Environmental Impact | WO-Work Order |
| E-Equipment Failure | G-Grease | OEHC-Observed or Evidence of Human Contact | EC-Environmental Cleanup |
| HC-Hydro Clean | LF-Line Failure/Break | EFK-Evidence of Fish Kill | HC-Hydro Cleaned |
| R-Rainfall | RG-Roots & Grease | | HR-Hand Rodded |
| RO-Roots | V-Vandalism | | EN-Referred to Engineering |
| | | | PN-Public Notification |
| | | | CR-Creek/Stream/River (please specify) |
| | | | DI-Ditch |
| | | | DR-Drop Inlet |
| | | | GR-Ground Surface |
| | | | PA-Paved Area |
| | | | CB-Contained in Building |

| Location | Manhole # | Start Date of SSO | End Date of SSO | Estimated Volume (in gallons) | Cause of SSO | Environmental Impact | Action (s) Taken to Address SSO | Ultimate Discharge Location |
|----------|-----------|-------------------|-----------------|-------------------------------|--------------|----------------------|---------------------------------|-----------------------------|
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Signature of Cognizant or Ranking Official

11/20/2015
Date

"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."

NON-COMPLIANCE REPORT

Arkansas Department of Environmental Quality
NPDES Enforcement Section
5301 Northshore Drive
North Little Rock, AR 72118

RE: NPDES Permit No: AR0022560 Discharge Number: 001-A
Facility: City of Blytheville - West WWTF
Address: 4951 N.C.R. 635
City: Blytheville State: AR Zip: 72315
Contact: Thomas Jones Phone: (870) 763-4961

| Date of Non-Compliance | Parameter Exceeded | Quantity or Loading | Quality or Concentration | Permit Limits |
|------------------------|--------------------|---------------------|--------------------------|---------------|
| 10-21-2015 | Mercury | | 0.174 ug/L | 0.0657 ug/L |
| | | | | |
| | | | | |

We feel this problem was due to:

Sampling error - field blank contaminated also

We plan on correcting the problem in this manner:

Retraining + stronger supervision

Time estimated that it will take to correct problem:

Sincerely,



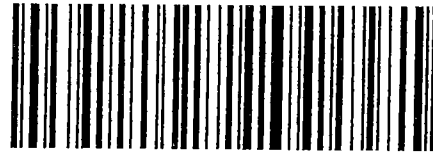
Authorized Signature

11-20-2015

Date

Blytheville Wastewater Dept
PO Box 1784
Blytheville, AR 72315

CERTIFIED MAIL®

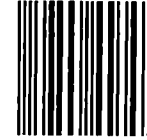


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ADEQ NPDES Enforcement
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North Little Rock, AR 72118