Sanitary Sewer Overflow Monthly Report

Facility Nan	ne: Paragould Light, Water	r & Cable - WWTP		Permit Number:ARG	0033766		Reporting Period	(Month/Year):	May 2017	
		X	No Sanitary	Sewer Overflows This Mo	onitoring Period	I				
			S	ummary Report Code Descri	ptions					
Cause(s)	Cause(s) of SSO		SSO Impact				Action(s) Taken		Ultimate Discharge Location	
CO-Construction	D-Debris	NEAH-No Evidence of Adverse Health of Environmental Impact				WO-Work Order		CR-Creek/Stream/River (please specify)		
E-Equipment Failure	G-Grease						EC-Environmental Cleanup		DI-Ditch	
HC-Hydro Clean	LF-Line Failure/Break	OEHC-Observed or Evidence of Human Contact				HC-Hydro Cleaned		DR-Drop Inlet		
R-Rainfall	RG-Roots & Grease					HR-Hand Rodded		GR-Ground Surface		
RO-Roots	V-Vandalism	EFK-Evidence of Fish Kill				EN-Referred to Engineering		PA-Paved Area		
						PN-Public Notification		CB-Contained in Building		
		Ctord Date	Full Data	Estimated Volume	Cause	-6660	Environmental	Action(s) Taken	Ultimate Discharge	
• s ssa•z»	1 34-3-1-4	Start Date	End Date of SSO	(in Gallons)	Cause	01 330	Impact	to Address SSO	Location	
Location	Manhole #	of SSO	01 550	(iii Gailolis)			Impact	to Address 550	Location	
				2"						
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gnature of Cognizant or Rank	ing Official	V		A STATE OF THE STA				Date		

"I certify under penalty of law that this document and all attachements 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."