Sanitary Sewer Overflow (SSO) Monthly Report

Downit N	Jumbon AD0022070 Monitoring D	ried (Ma/Veer)	2015
Facility Name: City of Corning Permit N	Number: AR0033979 Monitoring P	eriod (Mo/Year): $\frac{1}{2}$	<u> </u>

No Sanitary Sewer Overflows This Monitoring Period

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

Location	tion Manhole # St		Start Date of SSO SSO		Cause of SSO	Environmental Impact	Action (s) Taken to Address SSO	Ultimate Discharge Location	
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Signature of Cognizant or Ranking Official

12-19-2013

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."

REPORT OF NON COMPLIANCE

NAME OF FACILITY	CORNING	G, CITY	OF					
PERMIT NUMBER	AR00339	79	001-A					
PERIOD ENDING	Novembe	r 2013						
PARAMETER VIOLATED	DO CONC INST MIN							
REPORTED VIOLATIONS	1.6			****				
PERMIT CONDITION	2.0							
WEEK OF	Nov 20 13	-				<u> </u>		<u>L</u>
				•			•	*
AUSE OF VIOLATION	Heavy	4	the following	ng informa	tion			
	·			- N				
JRATION OF VIOLATION	3 w	eeks						
DRRECTIVE ACTION	Pump	-time	es Lo	nger	and w	are of	Yen-	-
PECTED COMPLIANCE DATE	Dec 18	7 - 2	013					
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City of Corning P.O. Box 538 Corning, Ar 72422



HDEQ NPDES Enforcement 5301 Northshore Drive North Little Rock, AR 72118

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