Sanitary Sewer Overflow Monthly Report

Facility Name: The City of Yellville Permit Number: AR0034037 Reporting Period (Month/Year):

X No Sanitary Sewer Overflows This Monitoring Period

Summary Report Code Descriptions

Cause(s) of SSO				Er	nvironmenta	Il Impact	Action(s)	Τŧ
CO- Construction E-Equipment Failure HC-HydroCleaned R-Rainfall RO-Roots	D-Debris G-Grease LF-Line failure/ break RG-Roots & Grease V-Vandalism			Н О Н	ealth or Env		WO- Wor EC-Enviro HC-Hydro HR-Hand EN-Refer PN-Publio	oni o C Ro re
Location	Manhole#	Start D			nd Date f SSO	Estimated Volume (Gal)	Cause of SSO	
1001 college Street 904 north panther ba	rk field		1/23/2017 1/25/2017			500 gallons 10,000 gallons	D D	
516 West 6th Street east field			1/24/2017			10,000 gallons	D	

Signature of Cognizant or Ranking Official

I certify under penalty of law that this document and all attachments were prepared under my direc properly gather and evaluate the information submitted. Based on my inquiry of the person or pers information, the information submitted is, to the best of my knowledge and belief, true, accurate, a information, including the possibility of fine and imprisonment for knowing violations.

1-Jan

aken Ultimate Discharge Location

Order CR-Creek/Stream/River (Please Specify)

mental Cleanup DI-Ditch
leaned DR-Drop Inlet
odded GR-Ground Surface
d to Engineering PA-Paved Area

Votification CB-Contained in Building

Environmental Action Taken Ultimate Discharge

Impactto Address SSOLocationNEAHHCGR

NEAH HC Town Branch
NEAH HC Town Branch

Date

tion or supervision in accordance with a system designed to assure that qualified personnel sons who manage the system, or those persons directly responsible for gathering the nd complete. I am aware that there are significant penalties for submitting false