

Sanitary Sewer Overflow Monthly Report

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

1-Mar

X No Sanitary Sewer Overflows This Monitoring Period

Summary Report Code Descriptions

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

Location	Manhole#	Start Date of SSO	End Date Of SSO	Estimated Volume (Gal)	Cause of SSO	Environmental Impact	Action Taken to Address SSO	Ultimate Discharge Location
444 Hwy 62 East		3/27/2017	3/28/2017	60000	R	NEAH	HC	Shawnee town branch
511 Estes		3/27/2017	3/28/2017	25000	R	NEAH	HC	Shawnee town branch
330 West 8th Street		3/27/2017	3/28/2017	20000	R	NEAH	HC	Shawnee town branch

Signature of Cognizant or Ranking Official

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 persons 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 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.



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