Sanitary Sewer Overflow Monthly Report

Facility Name: Malvern Water Works Permit Number: AR0034126 Reporting Period (Month/Year): May 2012

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						
R-Raintan RO-Roots	V-Vandalism		EN-Referred to Engineering	PA-Paved Area						
			PN-Public Notification	CB-Contained in Building						

Description Ultimate Discharge Estimated Volume Action(s) Taken Cause of SSO Environmental Start Date of End Date of Location Manhole # to Address SSO Location Impact SSO (in gallons) SSO

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Signature of Cognizant or Ranking Official

Date

Signature of Cognizant of Ranking Official (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 "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 violation."

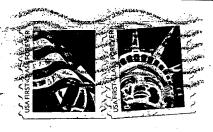
Doing Our Best

malvern water works

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ANDRON ZOOZ PWI-9-3.



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