Sanitary Sewer Overflow Monthly Report

Facility Name: Malvern Water Works Permit Number: AR0034126 Reporting Period (Month/Year): 2015

_							
	1 - 7	~ •.	~	~ ~	mns ·	Monitoring	** *
	1 NA	Nonitow.	CATTION	f larantlassic	hio	MANHITARINA	PATION
		TALLILAL V	MEWEL	OVELLIOWS	1 1113	MINITURE	LUIUU
_		~~~~~	~ • • • • • •	O . U.L.O			

Summary Report Code Descriptions						
Cause(s	s) of SSO	SSO Impact	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 Fallure 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		

Description

				Describuon		45		
Location	Manhole #	Start Date of SSO	End Date of SSO	Estimated Volume (in gallons)	Cause of SSO	Environmental Impact	Action(s) Taken to Address SSO	Ultimate Discharge Location
Hwy 675, DEAR E.M. 1151.	NA	5/6/15	5/7/15	500	LF	Neah	MO	DI,GR
5. Oate/Brianwood	2611	3/9/15	5/9/15	500	G	NEAH	JETROD	GR
Laurel (DAVIS INT.	0155	511/15	5/11/15	2000	R	NEAH	EN	GR, PA
Laurel/DAVIS	0154	5/20/15	5/21/15	/300	R	NEAH	EA	GR, PA
Morzeti / Kally Int.	००४८	5 20 15	5/21/15	3000	R	NEAH	EN	DI, CR, PA
		ļ, .	· · · · · · · · · · · · · · · · · · ·					
tst street	0258	3/20/15	5/20/15	3325	2	NEAH	EN	GR, PA
1st Street	0232	1	i					GR, PA
Sectionline	0371			;				PA CR
Sullenberger	0406	<u>, , , , , , , , , , , , , , , , , , , </u>					·	PA
Leural/Dayis	0115		1				}	PA, GR
								40.40
Laurel / Davis	0154	5/24/15	3/24/15	6.000	R	NEAH	EN	GR, CR
			· 					
	<u> </u>	<u> </u>						***************************************
				<u> </u>		L.,,,,,,,,	<u> </u>	<u></u>

Signature of Cognizant or Ranking Official

"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."

Stool

Doing Our Best

MAVERN WAVER WORKS

506 Overman Street
P.O. Box 638
Malvern, Arkansas 72104



ADEQ

WATER DIVISION-ENFORCEMENT BRANCH 5301 NORTHSHORE DRIVE NORTH LITTLE ROCK, AR 72118-5317

իլիվիականությանիրինինի կոսիկիաբիրի