



## Department of Public Works

---

July 13, 2012

Jason Bolenbaugh  
ADEQ  
5301 Northshore Drive  
North Little Rock, AR 72118-5317

RE: Permit No. AR034321 Monthly DMR

Dear Mr. Bolenbaugh;

Attached please find the completed June 2012 DMR for Permit No. AR034321 and the Sanitary Sewer Overflow Monthly Report. There were no permit exceedances in this month.

If you have any questions or require any additional information please feel free to contact me by phone at 870-741-5527 or by email at [Kathryn.catlin@cityofharrison.com](mailto:Kathryn.catlin@cityofharrison.com).

Sincerely,

Kathryn Catlin  
Wastewater Systems Manager

Wastewater Department

Kathryn Catlin  
Wastewater Systems Manager  
1508 Silver Valley Road  
Harrison, Arkansas 72601  
Office: 870.741.5527  
Fax: 870.741.0318  
[www.cityofharrison.com](http://www.cityofharrison.com)  
[kathryn.catlin@cityofharrison.com](mailto:kathryn.catlin@cityofharrison.com)

## Sanitary Sewer Overflow (SSO) Monthly Report

Facility Name: City of Harrison NPDES Permit No.: AR0034321 Monitoring Period (Month/Year): 06 / 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 Adverse Health/ Environmental Impact		CR-Creek/Stream/River (specify)
E-Equipment Failure	G-Grease	OEHC-Observed or Evidence of Human Contact	EC-Environmental Cleanup	DI-Ditch
HC-Hydro Clean	LF-Line Failure	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	Manhole #	Start Date of SSO	End Date of SSO	Estimated Volume (in gallons)	Cause of SSO	Environmental Impact	Action (s) Taken to Address SSO	Discharge Location

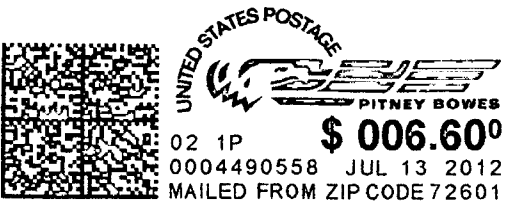
Kathryn Collier
July 12, 2012

---

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 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."

Kathryn Catlin  
Wastewater Systems Manager  
City of Harrison  
PO Box 1715  
Harrison, AR 72602



RETURN RECEIPT  
REQUESTED

NPDES Enforcement Section ADEQ  
5301 Northshore Drive  
North Little Rock, AR 72118-5317