# Sanitary Sewer Overflow (SSO) Monthly Report

**Facility Name:** City of Rogers **NPDES Permit No.:** AR0043397 **Monitoring Period (Month/Year):** 03 / 2020

☐ **No Sanitary Sewer Overflows This Monitoring Period**

## REPORT CODE DESCRIPTIONS

| Cause(s) of SSO | | Environmental Impact | Action(s) Taken | | Ultimate Discharge Location |
|---|---|---|---|---|---|
| **C** - Construction | **D** - Debris | **EFK** - Evidence of Fish Kill | **EC** - Environmental Cleanup | **JV** - Jet Vac | **GR** - Ground |
| **EF** - Equipment Failure | **G** - Grease | **OEHC** - Evidence of Human Contact | **HC** - Hydro Cleaned | **SL** - Spread Lime | **CR** - Creek / Stream / River (specify) |
| **LF** - Line Failure | **R** - Rainfall (I&I) | **OEEI** - Evidence of Environmental Impact | **HR** - Hand Rodded | **DD** - Disinfected and Deodorized | **DI** - Ditch |
| **PF** - Power Failure | **RO** - Roots | **NEAH** - No Evidence of Adverse Health or Environmental Impact | **MR** - Machine Rodded | | **DR** - Drop Inlet |
| **V** - Vandalism | | | **PN** - Public Notification | **GP** - Used Generator to Power Equipment | **PA** - Paved Area |
| | | | **EN** - Referred to Engineering | | **CB** - Contained in Building |

| Starting Location (Address, Intersection, or Manhole #) | Start Date of SSO | End Date of SSO | Estim. Volume (in gallons) | Cause(s) of SSO | Environmental Impact | Action(s) Taken | Discharge Location |
|---|---|---|---|---|---|---|---|
| MH #18-149, 3905 W. Pleasant Dr. | 03/19/20 | 03/19/20 | 24000 | R | NEAH | DD, EN | Ground on private pro |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

**Signature of Cognizant or Ranking Official**

04/13/20
**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."

Mail together with DMR submission **NO LATER THAN THE 25th OF THE MONTH FOLLOWING THE MONITORING PERIOD** to:
ADEQ Office of Water Quality ❖ 5301 Northshore Drive ❖ North Little Rock, AR 72118