## Sanitary Sewer Overflow Monthly Report

Facility Name: City of Newfort Permit Number: AR0045225 Reporting Period (Month/Year): May 2012

Aispert Industrial Park Monitoring Period

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|--|---------------------------------------|--|----------------------------|--|--|
| Cause(s) of SSO  |                                       | SSO Impact   | Action(s) Taken            | Ultimate Discharge Location                      |  |
|  |                                       |  | ·                          |  |  |
| CO-Construction D-Debris  E-Equipment Failure G-Grease |                                       | NEAH-No Evidence of Adverse Health or Environmental Impact | WO-Work Order              | CR-Creek/Stream/River (please specify)  DI-Ditch |  |
|  |                                       | OEHC-Observed or Evidence of Human Contact                 | EC-Environmental Cleanup   |  |  |
| HC-Hydro Clean   | LF-Line<br>Failure/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                         |  |

| Location | Manhole#     | Start Date of<br>SSO | End Date of<br>SSO | Estimated Volume (in gallons) | Cause of SSO | Environmental<br>Impact               | Action (s) Taken<br>to Address SSO | Ultimate Discharge<br>Location |
|----------|--------------|----------------------|--------------------|-------------------------------|--------------|---------------------------------------|------------------------------------|--------------------------------|
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|          | M/1 A        | W/ L                 | 4110               |                               |              | 6-1-1                                 |                                    |                                |

Signature of Cognizant of 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."

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