Sanitary Sewer Overflow Monthly Report

Facility Name: <u>City of Texarkana - North WWTP</u>	Permit Number:	AR0048691	Reporting Period (Month/Year): _	July 2012
□ No Sanitary	Sewer Overflo	ws This Mo	nitoring Period	

Date	Starting Time	Ending Time	Location	Estimated Volume (Gals)	Cause of Overflow	Environmental Impact	Action Taken	Ultimate Discharge Location
07/05/2012	3:00 pm	7:00 pm	2500 ft. west of Hwy 108, North of I-30, Texarkana	1200 to 1500	LB	NEAH	WO, TR	GR
07/12/2012	8:30 pm	9:45 pm	611 E. 43 rd , Texarkana	200	G	NEAH	WO, TR	GR

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					
RO - Roots	V - Vandalism	EFK - Evidence of Fish Kill	HC - Hydro Cleaned	DR - Drop Inlet					
LB - Line Break	U - Unknown		TR - Treated with Enzymes	GR - Ground Surface					
			EN - Referred to Engineering	PA - Paved Area					
			PN - Public Notification	CB - Contained in Building					

Signature of Cognizant or Ranking Official

Date <u>08/10/12</u> "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 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".

CERTIFIED MAII



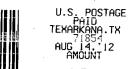
7010 0780 0000 3560 6722



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72118



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Texarkana Water Utilities

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