

September 25, 2012

#### VIA OVERNIGHT DELIVERY

Chief Water Enforcement and Compliance Assurance Branch Water Division U.S. Environmental Protection Agency, Region 5 77 West Jackson Boulevard Chicago, IL 60604 Re: DJ# 90-5-1-1-07653

Chief, Compliance Branch Office of Water Quality Indiana Department of Environmental Management 100 North Senate Avenue P.O. Box 6015 Indianapolis, IN 46206 Chief, Enforcement Branch Enforcement Section Office of Legal Counsel Indiana Department of Environmental Management 100 North Senate Avenue P.O. Box 6015 Indianapolis, IN 46206

#### Re: Consent Decree, Case # 2:07 cv 00445 Status Report 9

Dear Sir/Madam:

The City of Fort Wayne (the "City") is pleased to submit the enclosed Six-Month Status Report ("Status Report") pursuant to Section XII, Paragraph 33 of the Consent Decree (Case # 2:07 cv 00445) entered on April 1, 2008. The Status Report concerns the period from March 1 – August 31, 2012 (the "Reporting Period"). As you will see, the City is on schedule to meet all Consent Decree milestone deadlines.

The City believes the enclosed Status Report is consistent with, and fulfills, the reporting requirements of the Consent Decree. Should you have any questions or concerns regarding the Status Report, kindly contact me at (260) 427-1381 or Brandi Wallace at (260) 427-5582.

Very truly yours,

un

Kumar Menon, Director of City Utilities

Enclosures

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## City of Fort Wayne Six-Month Status Report

Consent Decree Case # 2:07 cv 00445

Report #9 (March 1, 2012 – August 31, 2012)



Report Submitted to the following:	
U.S. EPA	Chief Water Enforcement and Compliance Assurance Branch Water Division U.S. Environmental Protection Agency, Region 5 77 West Jackson Boulevard Chicago, IL 60604
IDEM	<ul> <li>Chief, Compliance Branch</li> <li>Office of Water Quality</li> <li>Indiana Department of Environmental Management</li> <li>100 North Senate Avenue</li> <li>P.O. Box 6015</li> <li>Indianapolis, IN 46206</li> <li>Chief, Enforcement Section</li> <li>Office of Legal Counsel</li> <li>Indiana Department of Environmental Management</li> <li>100 North Senate Avenue</li> <li>P.O. Box 6015</li> <li>Indianapolis, IN 46206</li> </ul>
From:	
City of Fort Wayne	City of Fort Wayne Fort Wayne City Utilities, Suite 270 Citizens Square 200 East Berry Street Fort Wayne, IN 46802

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#### **APPENDIX 1**

Summary to include the following: 1. Consent Decree Requirements for Reporting Period (03/01/12 - 08/31/12)

2. General Description of Work Completed during the Reporting Period (03/01/12 - 08/31/12)

3. Description of Projected Work to be Performed in the Next Six-Months (09/01/12 - 02/28/13)

APPENDIX 2 – Reports submitted to IDEM during the Reporting Period

APPENDIX 3 – Operations and Maintenance Report on Collection System Activity

#### 1. CONSENT DECREE COMPLIANCE (Section XII, Paragraph 34 (a))

A statement setting forth (i) the deadlines and other terms that Fort Wayne has been required by this Consent Decree to meet since the date of the last statement; (ii) whether and to what extent Fort Wayne has met those requirements; and (iii) the reasons for any noncompliance.

The attached Appendix 1 includes a summary of the City of Fort Wayne's (the "City's") compliance with applicable Consent Decree deadlines and terms from March 1, 2012 – August 31, 2012 (the "Reporting Period"). The City believes that it has met all Consent Decree deadlines during the Reporting Period. The City believes that it also met other terms required by the Consent Decree, but did experience the discharges described at item 6 below during the Reporting Period. Explanations for those discharges are provided at item 6.

#### 2. GENERAL DESCRIPTION OF WORK (Section XII, Paragraph 34 (b))

(i) A general description of the work completed within the prior six-month period;
(ii) to the extent known, a statement as to whether the work completed in that period meets applicable Design Criteria; and (iii) a projection of work to be performed pursuant to this Consent Decree during the next six-month period.

The attached Appendix 1 includes a general description of work completed during the Reporting Period and statements as to whether the completed work met applicable Design Criteria.

Appendix 1 also includes a description of the projected work to be performed in the next six-month period. The described activities are, of course, in addition to the continuing activities of the City under its NPDES permit, CMOM and CSSOP.

## 3. REQUEST FOR WATER QUALITY STANDARDS REVISION (Section XII, Paragraph 34 (c))

A statement as to Fort Wayne's understanding regarding the status of IDEM's response to the City's request for a revision to water quality standards in accordance with Section 5 of the City's Long-Term Control Plan.

As previously reported, the City held two public participation meetings on February 17, 2010. A 30-day public comment period followed and concluded March 17, 2010. The only written comment received was from a Fort Wayne citizen in support of the proposed UAA.

Subsequently, on May 6, 2010, a final version of the UAA proposal was submitted to IDEM. The submittal was followed by a meeting on June 8, 2010 between the City and

IDEM to discuss future steps in the rule change process. On August 30, 2010 IDEM issued the City a letter stating, in relevant part:

"Based on the information contained in the City's UAA, IDEM finds that Fort Wayne has provided sufficient information to propose changing the designated recreational use for the above mentioned waters from 'full body contact' to the 'Combined Sewer Overflow (CSO) Wet Weather Limited Use' subcategory of Indiana's recreational use designation as provided in IC 13-18-3-2.5 during storm events that exceed the level of control in the City's approved Long-Term Control Plan (LTCP)."

The City met with IDEM again on August 31, 2010 to discuss a schedule to complete the UAA rule change process in 2010. A draft fact sheet is currently under review by both IDEM and the City. The City understands that IDEM has provided EPA Region V with a draft proposed rule and that EPA is currently evaluating the same.

Notwithstanding EPA's involvement in the UAA throughout its development, EPA posed new questions regarding the City's UAA in late 2010 requesting additional information. The City, IDEM and EPA met to discuss EPA's request on January 11, 2011. Additional meetings and dialog with EPA have followed, including on January 26, 2012, February 21, 2012 and June 13, 2012. IDEM participated in the February 21, 2012 meeting. Further dialog is anticipated during the next reporting period.

## 4. CSO CONTROL MEASURES NOTICE TO PROCEED (Section XII, Paragraph 34 (d))

A description of any notices to proceed for any CSO Control Measure or measures specified in Appendix 3 that Fort Wayne has revoked in the prior six-month period, and a description of the status of Fort Wayne's compliance with Section XXI.F with regard to issuance of a new notice to proceed.

The City did not revoke a notice to proceed during this reporting period.

## 5. POST-CONSTRUCTION MONITORING PROGRAM (Section XII, Paragraph 34 (e))

Information generated in accordance with the Post-Construction Monitoring Program.

Ongoing monitoring programs have continued as outlined at Appendix 4 of the Consent Decree.

6. REPORTS SUBMITTED TO IDEM IN PREVIOUS SIX MONTHS (Section XII, Paragraph 35)

## Fort Wayne shall also submit, with each written status report, copies (to EPA only) of all Monthly Monitoring Reports and other reports pertaining to CSOs, SSDs, and bypasses that Fort Wayne submitted to IDEM in the previous six months.

The attached Appendix 2 contains numbered copies of monthly monitoring and other reports submitted to IDEM concerning the Reporting Period pertaining to CSOs, discharges from the City's separate sanitary sewer system, and bypasses. Additional information regarding the discharges described on the reports included within Appendix 2 follows.

Reports 2, 4, 5, 7, 13 and 15 regard discharges which did not reach or affect a regulated waterbody. Additionally, report 7 was reported to IDEM prior to the City knowing it was an overflow from a private sewer line. The City flushed and opened the line prior to knowing it was a private issue. Similarly, report 4 concerned an incident that occurred from a homeowner's cleanout. These reports were provided to IDEM, and are now being provided to EPA, for informational purposes only. Similarly, reports 11 and 12 concern events which did not involve or affect a regulated waterbody. Such reports were, however, submitted to IDEM at the agency's request concerning the reporting of basement backup events.

Discharges from sanitary sewer system locations other than those listed on Consent Decree Appendix 5 are described in reports 1, 3, 9, 10 and 18. Most of those discharges were very low in volume and/or were caused by system blockages. All occurred notwithstanding the City's timely accomplishment of all CSSOP and CMOM requirements, compliance with applicable NPDES permit provisions, and customary best efforts. In addition to responsive activities identified in the submitted reports, the City continues to distribute numerous grease control kits to residents in areas proximate to identified blockages, college residence halls, apartment complexes and neighborhood associations. The kits include educational materials (translated when appropriate) and lids to facilitate home grease collection.

Reports 6, 16 and 17 concern discharges from a sanitary sewer force main which malfunctioned. The City accomplished the necessary repairs and continues to implement its approved CMOM and CSSOP programs. Further assessment and evaluation of an appropriate plan for further action is currently underway.

Report 8 regards an overflow from Morton Street Pump Station which occurred due to an apparent electrical malfunction (the level indicator that controls the pumps on/off switch malfunctioned and sent an erroneous signal to the pumps to turn on). The malfunction caused the pumps to run for 10 seconds. The level indicators were cleaned and inspected. No additional issues were found.

Report 14 describes an extreme storm event that occurred on June 29, 2012 which knocked out power to over 100,000 residents and businesses. Winds gusted to 91mph (equal to that of a category 1 hurricane). During this upset, the pump station at Coverdale lost power precluding its ability to move the flow to the City sewer. Additionally,

regulator K11 009 lost power and failed to the closed position thus diverting flow to the St. Mary's River. The City utilized its best efforts to prevent, minimize and mitigate damages throughout this event and fully accomplished all activities required by its NPDES permit, CMOM and CSSOP.

Lastly, exceptional conditions during July and August resulted in unintentional and temporary non-compliance with certain E. Coli criteria from its Water Pollution Control Plant (WPCP) due to conditions well outside the City's reasonable control. More specifically, sustained record high temperatures and extraordinary drought conditions led to E.Coli upset incidents for said months. With respect to July, three daily maximum and one geometric mean exceedences occurred with respect to discharges from WPCP Pond 3 (Outfall 001). The highest July values from the contact tank effluent which discharges to the 40-acre Pond 3 were 77cfu (daily) and 3.93cfu (monthly geometric mean average). For August, the monthly average geometric mean for E.Coli was 132.7cfu, slightly in excess of the 125cfu permit limit. The highest August E.Coli results taken with respect to contact tank effluent prior to entering the Pond 3 were 2cfu (daily) and 0.57cfu (monthly geometric mean average). All other permit parameters were met during these months and all operations and maintenance tasks, including algae control procedures, were timely and fully accomplished.

## 7. OPERATIONS AND MAINTENANCE REPORT ON COLLECTION SYSTEM ACTIVITY

Although not required by the Consent Decree, the City is pleased to include tables at Appendix 3 respectively depicting the City's general progress towards its operations and maintenance activities goals as well as a listing of completed regulator and lift station inspections March 1, 2012 – August 31, 2012.

#### 8. CERTIFICATION STATEMENT (Section XII, Paragraph 38)

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 ensure that qualified personnel properly gathered and evaluated 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.

Kumar Menon, Director of City Utilities

-22-19

# APPENDIX 1

#### APPENDIX 1 Six-Month Status Report #9 (03/01/12 – 08/31/12)

#### **APPENDIX 1**

Below are general descriptions of the following (I) Consent Decree compliance requirements for Reporting Period; (II) work completed during the Reporting Period; and (III) work anticipated to be performed during the next Reporting Period.

#### I. CONSENT DECREE COMPLIANCE FOR THIS REPORTING PERIOD

No critical milestone dates of Appendix 3 or Appendix 5 of the Consent Decree occurred during this Reporting Period. A summary of work completed during this Reporting Period to achieve forthcoming critical milestone dates is provided at part II below.

#### II. WORK CONTEMPLATED BY CONSENT DECREE APPENDIX 3 AND APPENDIX 5 COMPLETED DURING THIS REPORTING PERIOD

<u>**CSO Control Measure 2**</u> – **Plant Phase III** (when combined with other WPCP improvements, this control measure is to provide peak primary treatment capacity of 85 mgd and firm capacity of 74 mgd)

- Completed construction of the Raw Waste Water Pumps and Secondary Clarifier Improvement Project.
- Completed facility planning of remaining projects to attain 85 mgd peak (74 mgd firm).
- Notice to Proceeds (NTPs) were issued for preliminary engineering and design of additional projects needed to attain 85 mgd peak (74 mgd firm).

<u>CSO Control Measure 4</u> – CSSCIP - Basins with Planned Satellite Storage/Disinfection Technologies (to be designed per Fort Wayne Stormwater and Sanitary Standards as well as Ten States Standards)

- CSO Outfall 061 Final design was completed, construction bids were received and a NTP for construction was issued.
- CSO Outfall 054 Design of next phase of work continued.

<u>CSO Control Measure 5</u> – Pond Storage & Dewatering (provide storage capacity of approximately 95 mg)

- Continued with construction of Combined Sewer Pump Station (CSPS) improvement project.
- Continued with construction of CS Pond Improvements (Pond Storage & Dewatering Improvements).

<u>CSO Control Measure 6</u> – CSSCIP – Basins Tributary to Parallel Interceptor – (partial separation projects identified as cost-effective components of the Combined Sewer System Capacity Improvements Program). Note: The below listing includes one or more outfalls which the City is voluntarily working to improve in connection with this CSO Control Measure although such is not required by the Consent Decree.

• CSO Outfalls 004, 007 & 056, and 023– Preliminary engineering studies were completed.

#### APPENDIX 1 Six-Month Status Report #9 (03/01/12 – 08/31/12)

- CSO Outfall 020 Began and completed an assessment of preliminary engineering report.
- CSO Outfalls 005, 011/012, 013 (K06 290B portion), and 060– Preliminary engineering studies continued.
- CSO Outfalls 018, 019 and 021 (phase i) Construction bids were received and NTPs were issued.
- CSO Outfalls 024 (phase ii), 025 (phase ii) and 032 (phase ii) Final design continued.
- CSO Outfall 007 (phase i) & 056 (phase i), 013 (K06 290A portion), 024 (phase iii), 025 (phase iii), and 032 (phase iii) Began final designs.

<u>CSO Control Measure 8 – Satellite Disinfection at St. Joseph River CSOs</u> – (Satellite disinfection facility)

- CSO Outfall 052 An engineering report was completed on disinfection technologies.
- Selected engineering firm to design disinfection facility and preliminary design began during the reporting period.

<u>CSO Control Measure 11 – Wayne Street Parallel Interceptor – (Parallel interceptor to capture combined sewer overflows for conveyance to WPCP/CSO Ponds)</u>

• A preliminary engineering routing study continued.

<u>CSO Control Measure 12</u> – St. Mary's Parallel Interceptor – (Parallel interceptor to capture combined sewer overflows for conveyance to WPCP/CSO Ponds)

• A preliminary engineering routing study continued.

<u>CSO Control Measure 13</u> – Late Floatables Control – (Overflow-specific solids and floatables controls)

• Outfalls 002, 003 and 057 - Construction began on a screening facility in connection with the CSPS project (CSO Control Measure 5).

<u>North Maumee SSD System</u> – Outfalls 077 & 078 (criteria to be met on or before December 31, 2020)

- Completed construction of a cured-in-place pipe project for I&I reduction.
- Bid 2012 general cured-in-place package #2 for further I&I reduction.

#### III. WORK CONTEMPLATED BY CONSENT DECREE APPENDIX 3 AND APPENDIX 5 ANTICIPATED FOR COMPLETION DURING THE NEXT REPORTING PERIOD

<u>**CSO Control Measure 2**</u> – **Plant Phase III** (when combined with the rest of the WPCP improvements, provide peak secondary treatment capacity of 85 mgd and firm capacity of 74 mgd)

• Continue engineering and design of projects to attain 85 mgd peak (74 mgd firm).

#### **APPENDIX 1**

#### Six-Month Status Report #9 (03/01/12 – 08/31/12)

<u>CSO Control Measure 4</u> – CSSCIP Basins with Planned Satellite Storage/Disinfection Technologies (partial sewer separation designed to Fort Wayne Stormwater and Sanitary Standards as well as the Ten States Standards to reduce local CSOs)

- CSO Outfall 061 Construction is to continue.
- CSO Outfall 054 Final design is to be completed and construction bids are to be received.

<u>CSO Control Measure 5</u> - Pond Storage & Dewatering (improvements to CSO Pond 1 to allow storage of combined sewer overflow with subsequent dewatering to WPCP)

- Continue construction of Combined Sewer Pump Station (CSPS).
- Continue construction of Pond Storage & Dewatering Improvements (First Flush Basin and Bleedback Project).

<u>CSO Control Measure 6</u> – <u>CSSCIP</u> – <u>Basins Tributary to Parallel Interceptor</u> - (Partial separation projects identified as cost-effective components of the Combined Sewer System Capacity Improvement Program) Note: The below listing includes one or more outfalls which the City is voluntarily working to improve in connection with this CSO Control Measure although such is not required by the Consent Decree.

- CSO Outfalls 005, 011/012, 013 (K06 290 B portion), and 060 Preliminary engineering studies will be completed.
- CSO Outfalls 018, 019 and 021 (phase i) Construction will be completed.
- CSO Outfalls 024 (phase ii), 025 (phase ii) and 032 (phase ii) Final design will be completed.
- CSO Outfall 007 (phase i) & 056 (phase I), 024 (phase iii), 025 (phase iii), and 032 (phase iii) Final design is to continue.
- CSO Outfalls 007 (phase ii) & 056 (phase ii), 021 (Phase ii), and 050 Final design is to begin.

<u>CSO Control Measure 8</u> – Satellite Disinfection at St. Joseph River CSO's – (Satellite storage facilities)

• CSO Outfall 052 – Design of a disinfection facility is to be completed.

<u>CSO Control Measure 10</u> – Morton Street/O10101 Reroute – (Re-reroute overflow pumps station discharge to CSO Pond 1)

• CSO Outfall 048 – Work anticipated in future reporting periods.

<u>**CSO Control Measure 11</u>** – Wayne Street Parallel Interceptor – (Parallel interceptor to capture combined sewer overflows for conveyance to WPCP/CSO Ponds)</u>

• Preliminary engineering routing study is to be completed.

<u>CSO Control Measure 12</u> – St. Mary's Parallel Interceptor – (Parallel interceptor to capture combined sewer overflow for conveyance to WPCP/CSO Ponds)

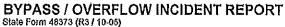
#### APPENDIX 1 Six-Month Status Report #9 (03/01/12 – 08/31/12)

• Preliminary engineering routing study is to be completed.

#### North Maumee SSD System – Outfalls 077 & 078

- Continue construction of CIPP projects.
- Begin design of next projects for I/I reduction

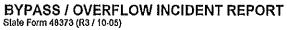
# APPENDIX 2





INSTRUCTIONS: Complete all parts of this form and fex it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

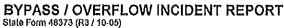
			GENE	RAL INFORMATION			
Facility Name:			County:				Permit Number:
Vvater Pollutio	on Control Mainte	nance	Allen			N0032	
Individual Making		Phone Number:					me IDEM Notified
Joe E. Johns	on		(260) 427-6047			March 3	3, 2012 10:00 am
Date & Time	Date & Time	L cootion D		ASE INFORMATION Address & Description			
Release Began:	Release Slopped:		, Lift Station, For			ng Area: I, Stream	Name, Storm Sewer, etc.)
03/02/2012	03/02/2012	V22 032 8	& V22 037			St. M	ary's River
5:00 pm	6:55 pm		6530 WINNE	BAGO DR			
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Check One: 🛛 E	stimated 🛛 Actua	1		68.92 MGD			60.00 MGD
	Bypass or Overflow:		hat Apply)				
X Untreated Ref	ease 🗌 Parlia	lly Treated Re	elease 📋 Bypa	ss of a Treatment Process	B	ended W	ith Final Effluent & Sampled
Describe any dam	age to aquatic life or i	eceiving strea	am:				
None							
Reason for Bypas		Power Fa	allura				recipitation 0.600 Inches
Additional Informa				Equipment Failure			recipitation 0.000 Inclies
An overflow occurred from the above mentioned seperate sanitary sewer line. The line was plugged with root and other sanitary debris. The City flushed the line to remove the blockage and the overflow was cleaned up. The section of plpe that had the blockage has been added to the City's scheduled maintenence program.							
Actions Taken to Prevent, Minimize, or Mitigate Damage: The City flushed the seperate sanitary line and the oveflow was cleaned up. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.							
Actions Taken or F	lanned to Prevent Re	currence:	· ·	· · · · · · · · · · · · · · · · · · ·			
Actions Taken or Planned to Prevent Recurrence: The City flushed the seperate line and added it to regular scheduled maintenence. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.							
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designed to assure	ally of law that this do that qualified person n, or those persons di	nei properly g	il attachments we ather and evaluation	ere prepared under my dire ite the information submitte	ection or s ed. Based	l on my fr	n in accordance with a system aquiry of the person or persons who





INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

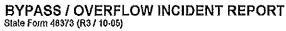
Facility Name:       County:       NPDES Permit Number:         Water Pollution Control Maintenance       Allen       IN0032191         Individual Making Report:       Phone Number:       Date & Time IDEM Notified         Joe E. Johnson       (260) 427-6047       March 10, 2012 · 4:00 pm         RELEASE INFORMATION         Date & Time       Date & Time         Release Begán:       Pate & Time         Release Stopped:       of Manholo, Lift Station, Force Main, etc.)         03/09/2012       W30 046         6:00 pm       9:40 pm         4838 BELVIDERE DR         Amount of Flow Released:       1000 GAL			GENER	RAL INFORMATION			
Individual Making Report:     Phone Number:     Date & Time IDEM Notified       Joe E. Johnson     (260) 427-6047     March 10, 2012 4:00 pm       Date & Time Release Begán:     Date & Time Release Stopped:     Location Released From: (Address & Description of Manholo, Lift Station, Force Main, etc.)     Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)       03/09/2012     03/09/2012     W30 046     Ground       6:00 pm     9:40 pm     4838 BELVIDERE DR	Facility Name:					NPDES P	ermit Number:
Individual Making Report:     Phone Number:     Date & Time IDEM Notified       Joe E. Johnson     (260) 427-6047     March 10, 2012 4:00 pm       Date & Time Release Begán:     Date & Time Release Stopped:     Location Released From: (Address & Description of Manholo, Lift Station, Force Main, etc.)     Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)       03/09/2012     03/09/2012     W30 046     Ground       6:00 pm     9:40 pm     4838 BELVIDERE DR	Water Pollution Control Mainte	enance	Allen		IN0032191		
Joe E. Johnson     (260) 427-6047     March 10, 2012 4:00 pm       Date & Time Release Began:     Date & Time Release Stopped:     Location Released From: (Address & Description of Manholo, Lift Station, Force Main, etc.)     Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)       03/09/2012     03/09/2012     W30 046     Ground       6:00 pm     9:40 pm     4838 BELVIDERE DR							
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6:00 pm         9:40 pm         4838 BELVIDERE DR					Receiv (Groun	ing Area: id, Stream	Name, Storm Sewer, etc.)
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Describe any damage to aquatic life or receiving stream:	Describe any damage to aquatic life or	receiving stream	am:				
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			andre	KI Equipment Panole			ecipitation croco inclies
Additional Information:				O function front suprature and			In this case with a matter of
The 6 inch force main that pumps into manhole W30 046 broke just upstream of the manhole in this separate sanitary							
sewer area. The City pumped flow to an adjacent manhole (W30 045) until the break was able to be repaired. The					e preak	was abi	e to be repaired. The
overflow was to the ground only and did not reach a waterbody.	overflow was to the ground only	y and did no	et reach a wate	erbody.			
·							
Actions Taken to Prevent, Minimize, or Miligate Damage:					• •		
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City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance	City continues to implement its a	approved Ci	MOM and CS	SOP programs, which	n includ	e many	preventative maintenance
activilies designed to prevent and/or minimize overflows in the sewer collection system.	activilies designed to prevent an	nd/or minimi	ize overflows i	in the sewer collectior	n syster	n. 👘	
					·		
Actions Taken or Planned to Prevent Recurrence:							
The force main was reparied. The City continues to implement its approved CMOM and CSSOP programs, which include	The force main was reparied. T	he City con	itinues to impl	ement its approved C	MOM a	and CSS	OP programs, which include
many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.	many preventative maintenance	e activities d	esigned to pre	event and/or minimize	e overflo	ows in th	e sewer collection system.
				······································			
(ATTACH ADDITIONAL SHEETS IF NECESSARY)		(A)					
CERTIFICATION AND SIGNATURE			CERTIFICATI	ION AND SIGNATURE			
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 the accuracity accuracity of the person of the person of persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief the accuracity of the person of the	designed to assure that qualified persor manage the system, or those persons d	nnel properly g firectly respon	ather and evalua sible for gathering	te the information submitte g the information, the inforr	ed. Base mation su	d on my in Ibmitted is	quiry of the person or persons who 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.	imprisonment for knowing violations	an avaie that		ant pertaines for submitting	ធ្វារតនេម ហៅ	ormation	
SIGNATURE: DATE: 3/12/12	· •	Alle	A John	not 2	DATE	:: ,3/	12/12
		1	1			<u>`</u>	patronia fan fan Kartika, annañ 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 19





INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

			GENER	RALINFORMATION			
Facility Name:			County:			Permit Number:	
Water Pollutio	n Control Maintei	nance	Allen		IN0032	191	
Individual Making	Report:		Phone Number:		Date & TI	me IDEM Notified	
Joe E. Johnso	m	(260) 427-6047			March 1	3, 2012 2:00 pm	
				ASE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (A b, Lift Station, Ford	Address & Description ce Main, etc.)	Receiving Area: (Ground, Stream	Name, Storm Sewer, etc.)	
03/13/2012	03/13/2012	X18 020			Bulle	rman Drain	
11:39 am	1:00 pm	LOI	NG RD And N	EWFIELD DR			
Amount of Flow Re	leased: 405 GAL		•	WWTP Flow During Rel	lease:	WWTP Peak Design Flow:	
Check One: 🗵 Es	llmotod 🛛 🗖 Astusi			49.24 MGD		60.00 MGD	
	Bypass or Overflow:				El Dieuded M	Ille Flored Fiftured & Operated	
	age to aquatic life or r	•		ss of a Treatment Process		Ith Final Effluent & Sampled	
None						:	
Reason for Bypass		📋 Power F	allure	🔲 Equipment Failure	P	recipitation 0.000 Inches	
Additional Informat							
An oveflow occurred from the above listed manhole within the separate sanitary sewer system. The City flushed the line.							
				The City televised th	e line and foun	d no ostructions. The cause	
of the blockage is therefore undetermined.							
	revent, Minimize, or i						
						is approved CMOM and	
USSOP program	ns, which include	e many pre	ventative mair	ntenance activities de	signed to preve	nt or/minimize overflows in	
the sewer collect	cuon system.						
A sting a Training on Di							
	anned to Prevent Re-		una ta inanlana	ant the environment OMC			
many preventat	ive maintenance	ony contri activitiae c	les to implem lesioned to pro	ent ils appioved GMC	rflowe in the ee	Programs, which include wer collection system.	
many provontat	no municonunos	dollallog c	looigned to pre		HIGAD III (IIG 90	wer concount system.	
		·····		•			
		(A		NAL SHEETS IF NECESS			
Loodlerund	The of Source Colors			<u>ON/ANDISIGNATURE</u>		· · · · · · · · · · · · · · · · · · ·	
designed to assure	that qualified person	cument and a nel properiy d	ul attachments we	ere prepared under my dire te the information submitte	ction of supervisio	n in accordance with a system iquiry of the person or persons who	
manage the system	i, or those persons di	reclív respon	sible for gathering	a the information, the inform	mation submitted is	to the best of my knowledge and	
belief, true, accurat imprisonment for kr	e, and complete. I ar	n aware that	there are signific	ant penalties for submitting	false information,	including the possibility of fine and	
SIGNATURE;		2.1	JF		DATE. 2	1 1/17	
OIGINATURE;			X		DATE: 3/	17/16	





INSTRUCTIONS: Complete all parts of this form and fax II to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

			GENE	RAL INFORMATION				
Facility Name:			County:			ermit Number:		
Water Pollutio	n Control Maintei	nance	Allen		IN0032	191		
Individual Making I	Report:		Phone Number:	· · · · · · · · · · · · · · · · · · ·	Date & Time IDEM Notified			
Joe E. Johnso	ท่		(260) 427-6047			March 26, 2012 3:15 pm		
				SEINFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:	Location R of Manhole	eleased From: (A , Lift Station, Ford	Address & Description ce Main, etc.)	Receiving Area: (Ground, Stream	Name, Storm Sewer, etc.)		
03/26/2012	03/26/2012	Homeow	ner's Clean ou	t	Grou	nd		
10:30 am	11:45 am		6010 KEN	IT RD				
	leased: 10.00 GA		1	WWTP Flow During Rel 63.93 MGD	ease:	WWTP Peak Design Flow: 60.00 MGD		
Check One: 🛛 Es Description of the f	Bypass or Overflow:	(Check All Ti	hat Apply)	<u> </u>				
Intreated Rele Describe any dama	ase D Partial ige to aquatic life or r			ss of a Treatment Process	Elended W	ith Final Effluent & Sampled		
None	-	~						
	Reason for Bypass/Overflow:							
Additional information: An overflow was reported from the above listed homeowner's private cleanout. The homeowner's private lateral was blocked with roots. The City flushed the separate sanitary sewer line in this area to also relieve a partial blockage downstream. This overflow did not reach or affect a regulated waterbody. This is report is being provided for informational purposes only.								
Actions Taken to Prevent, Minimize, or Mitigate Damage: The City flushed the separate sanitary sewer line. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflow in the sewer collection system.								
Actions Taken or Planned to Prevent Recurrence: The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflow in the sewer collection system.								
		(A						
(ATTACH ADDITIONAL SHEETS IF NECESSARY) CERTIFICATION AND SIGNATURE 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 bellef, 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. SIGNATURE: DATE: 3/37//7								



BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05)

Indiana Department of Environmental Management

Office of Water Quality

INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

				RALINFORMATION			
Facility Name:			County:			Permit Number:	
Water Pollutio	n Control Mainter	nance	Allen		IN0032		
Individual Making	Report:		Phone Number:		Date & Time IDEM Notified		
Joe E. Johnso	n j		(260) 427-60	47	April 7,	2012 3:30 pm	
				SE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (A , Lift Station, Ford	ddress & Description ce Main, etc.)	Receiving Area: (Ground, Stream	Name, Storm Sewer, etc.)	
04/07/2012	04/07/2012	L39 043			Grou	nd	
11:15 am	12:15 pm		8905 HEMP	HILL DR			
Amount of Flow Re				WWTP Flow During Rel 35.16 MGD	lease:	WWTP Peak Design Flow: 60.00 MGD	
Check One: X Es			had Annta				
🛛 Untreated Rele		ly Treated R	elease 📋 Bypa	ss of a Treatment Process	🗌 Blended W	lith Final Effluent & Sampled	
Describe any dama	age to aquatic life or r	eceiving stre	am:				
None							
Reason for Bypass		Power F	ailure	Equipment Failure	DP	recipitation 0.000 Inches	
An overflow occurred in this separate sanitary sewer line. The City flushed the line and the overflow as cleaned up. The City televised the line and a partial root blockage was discovered. This small volume of overflow occurred to the ground only and did not reach or impact a regulated waterbody.							
Actions Taken to Prevent, Minimize, or Mitigate Damage: The City flushed the line and the overflow was cleaned up. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize oveflows in the sewer collection system.							
Actions Taken or Pi	anned to Prevent Re	currence:					
						OP programs, which include e sewer collection system	
			TTACH ADDITIO	NAL SHEETS IF NECESS	SARY)		
				ON AND SIGNATURE			
designed to assure manage the system belief, true, accurat imprisonment for kr	that qualified person n, or those persons di e, and complete. I a	cument and a nel property rectly respon m aware that	all atlachments we gather and evalua isible for gathering there are significa-	ere prepared under my dire te the information submitte the information, the information ant penalties for submitting	ed. Based on my li mation submitted is g false information,	n in accordance with a system noulry of the person or persons who s, to the best of my knowledge and including the possibility of fine and	
SIGNATURE:	<u>`</u> `	1 - 1	THE		DATE: $4$	-10-12	



INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

To report a spill or if the release is resulting in a fish kill or other severe environmental damage, immediately report the release to the Emergency Response Section spill response line at: (317) 233-7745 or toll free within indiana at (888) 233-7745.

				RALINFORMATION			
Facility Name:			County:			Permit Number:	
Vvater Pollutio	n Control Mainte	nance	Allen		IN003	/	
Individual Making I			Phone Number			Time IDEM Nolified	
Joe E. Johnso	n		(260) 427-6047			17, 2012 2:30 pm	
				SEINFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:	Location R	eleased From: (A , Lift Station, For	Address & Description ce Main, etc.)	Receiving Are (Ground, Stree	a: am Name, Storm Sewer, etc.)	
04/17/2012	04/17/2012	G15 010			Gro	bund	
2:36 pm	7:30 pm		4405 ENG	LE RD			
Amount of Flow Re	leased: 20 GAL	I	• • • •	WWTP Flow During Rei	ease:	WWTP Peak Design Flow:	
Check One: 🗵 Es				33.16 MGD		60.00 MGD	
	timated DActual Bypass or Overflow:		hat Anoly)				
X Untreated Rele	ase 🗌 Partia	lly Treated R	elease 🗍 Bypa	ss of a Treatment Process	🗋 Blended	With Final Effluent & Sampled	
Describe any dama	ige to aquatic life or i	receiving stre	am:				
None							
Reason for Bypass		Power F	ailure	🗵 Equipment Failure		Precipitation 0.000 Inches	
Additional Informat							
						llowed water to escape the	
pipe and and rise to the surface. The City had to shut down the pump station and pump and haul the flow until the repair							
was made. The small volume released occurred to the ground only and did not reach or impact a regulated waterbody.							
A - 11			· · · · · · · · · · · · · · · · · · ·				
	revent, Minimize, or i			be Cilu confinues to i	mplomont ito	approved CMOM and CSSOP	
						approved CMOM and CSSOP /or minimize overflows in the	
sewer collection		ICAOIIGUAG		avanias designed a	prevent and		
	oyotonn.						
Actions Taken or Pl	anned to Prevent Re	currence:		•		······	
			ues to implem	ent its approved CMC	DM and CSS	DP programs, which include	
						the sewer collection system.	
•••			•			· · · ·	
					4		
		A) ا		NAL SHEETS IF NECESS			
L certify under nena	ity of law that this do	cument and a				sion in accordance with a system	
designed to assure	that qualified person	nel properly (	pather and evalua	te the information submitte	d. Based on m	r inquiry of the person or persons who	
manage the system	or those persons di	recily respon	sible for gathering	g the information, the inform	nation submitted	I is, to the best of my knowledge and n, locluding the possibility of fine and	
imprisonment for kr	e, and complete. I an lowing violations.	m awate that		ant penalties for submitting	i alse informatio	an, meruding the possibility of line and	
SIGNATURE:		. \/M		120-	DATE:	4-18-12	

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Office of Water Quality

BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05) Indiana Department of Environmental Management

INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

				RALINFORMATION				
Facility Name:			County:			Permit Number:		
Vvater Poliutio	n Control Mainter	nance	Allen		IN0032			
Individual Making			Phone Number		1	Ime IDEM Notified		
Joe E. Johnso	ิท		(260) 427-60		April 24	, 2012 <u>2:05 pm</u>		
				SEINFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (A b, Lift Station, Ford	Address & Description ce Main, etc.)	Receiving Area: (Ground, Stream	n Name, Storm Sewer, etc.)		
04/28/2012	04/28/2012	N03 099	& N03 104		Ground			
1:20 pm	2:30 pm		901 BUCHA	NAN ST		· · · · ·		
Amount of Flow Re	leased: 20 GAL	,		WWTP Flow During Re	ease:	WWTP Peak Design Flow:		
		,		0.00 MGD		• 60.00 MGD		
Check One: X Es	stimated [] Actual Bypass or Overflow:		hot Apply		· · · ·			
X Untreated Rele	ase 🗌 Partia	lly Treated R	elease 🔲 Bypa	ss of a Treatment Process	🗆 Blended W	/ith Final Effluent & Sampled		
Describe any dama	age to aquatic life or r	ecolving stre	am:					
None						•		
Reason for Bypass		Power F	allure	Equipment Failure	ПР	recipitation 0.000 Inches		
Additional Informat				D odebutent tuete				
The City originally notified IDEM of a possible overflow on 4/24/2012 at 1405. After notifying IDEM, the City discovered this was on a private line and the overflow was not a result of the City's main sewer line. Nonetheless, the City flushed								
and opened the	e line prior to kno	e overnow wing this v	was not a resi vas a private is	uit of the City's main s ssue.	sewer line. Nor	tetheless, the City llushed		
	•	-	·					
						caused by a private issue and		
within a private	sewer line. At IL	JEM's requ	lest, the City is	s submitting this repoi	rt as a follow up	o to that conversation.		
	Prevent, Minimize, or i	Mitigale Dam	nage:			uummusinin		
The overflow wa	as cleaned up.							
Actions Taken or Pl	anned to Prevent Re	currence:	· · ·					
	d the property ow		as a private iss	aia '				
The end norm	a allo proporty of		ao a pritato ioc			•		
				,				
	· · · · · · · · · · · · · · · · · · ·			· · · · ·				
(ATTACH ADDITIONAL SHEET'S IF NECESSARY) CERTIFICATION AND SIGNATURE								
1	the effect of the state of a							
designed to assure	that qualified person	vinent anu a viregorg len	an attachments we gather and evalua	te the information submitte	d. Based on my l	on in accordance with a system . nquiry of the person or persons who		
manage the system	n, or those persons di	irectly respor	isible for gathering	g the Information, the Infor	mation submitted l	s, to the best of my knowledge and Including the possibility of fine and		
bellef, true, accurat imprisonment for kr	e, and complete. I al	m aware lijal	t there are signific	any penalties for submitting	y false information,	including the possibility of fine and		
SIGNATURE:	towing violations.	L	PYLAF	TATT	DATE: 4	71-17		
SIGNATURE:		<del>/</del> ¢	re ff	<u>j'Vb</u>	$DATE: \gamma$	cop 1 c		
	•	(/	V		1	· · ·		



BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05) Indiana Department of Environmental Management Office of Water Quality

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			GENE	RAL INFORMATION				
Facility Name:		Coun		9+04+05406465-0641845668604665686868695	NPDES I	Permit Number:		
	n Control Mainter		•		IN0032			
Individual Making I	Report:	Phon	e Number		Dale & T	ime IDEM Nolified		
Joe E. Johnso	ก่	(260	) 427-60	47	June 2	7, 2012 9:30 am		
			RELE/	ASE INFORMATION				
Dale & Time Release Began:	Date & Time Release Stopped:	Location Released of Manhole, Lift Si	d From: (/	ddress & Description	Receiving Area: (Ground, Strean	1 Name, Storm Sewer, etc.)		
05/05/2012	05/05/2012	Morton St Pum	p Statior	n O10 251	Mau	mee River		
4:49 am	4:49 am	1614 1	EDGEW	ATER AVE				
Amount of Flow Re	leased: 4800 GAI	-		WWTP Flow During Rel	ease:	WWTP Peak Design Flow: 60,00 MGD		
Check One: 🛛 Es				34.70 MGD				
Description of the E	Bypass or Overflow; ase	(Check All That App ly Treated Release	oly) □ Bypa	ss of a Treatment Process	🗌 Blended W	vith Final Effluent & Sampled		
Describe any dama	ige to aquatic life or r	ecelving stream:		<b></b>		•		
None								
Reason for Bypass		Power Failure		🛛 Equipment Failure	[] F	Precipitation 0.000 Inches		
Additional Information: It was discovered upon reviewing DMR data that an overflow appears to have occurred during dry weather at the above listed outfall. The level indicator that controls the pumps on /off switch malfunctioned and sent an erroneous signal to the pumps to turn on. Pumps 1 & 2 turned on and ran for approximately 10 seconds resulting in a discharge of approximately 4800 gallons. The City cleaned and inspected the level indicator. No issues were found.								
The City cleaned and inspected the level indicator and no issues were found. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.								
Actions Taken or Planned to Prevent Recurrence: The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.								
				NAL SHEETS IF NECESS				
designed to assure manage the system	that qualified personi i, or those persons di e, and complete: Lar	cument end all attac nel properly gather a rectly responsible fg	and evaluation of the second s	ere prepared under my dire the information submitte g the information, the inform	ection or supervision ed. Based on my i mation submitted i	on in accordance with a system inquiry of the person or persons who s, to the best of my knowledge and , including the possibility of fine and n/28/12		

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Office of Water Quality

BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10.05) Indiana Department of Environmental Management

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			GENER	RAL INFORMATION				
Facility Name:			County:			ermit Number:		
Water Pollutio	n Control Mainter	nance	Allen		IN0032	191		
Individual Making			Phone Number:		Date & Ti	me IDEM Notified		
Joe E. Johnso	n		(260) 427-60		May 8, 2	2012 9:10 am		
				SEINFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: <i>(A</i> 9, <i>Liit Station, Ford</i>	ddress & Description ce Main, etc.)	Receiving Area: (Ground, Stream	Name, Storm Sewer, etc.)		
05/07/2012	05/07/2012	L39 079			Storn	n Inlet		
6:00 pm	7:50 pm		715 PINET	REE DR				
	leased: 330 GAL			WWTP Flow During Rel 43.38 MGD	lease:	WWTP Peak Design Flow: 60.00 MGD		
Check One: X Es			( ( A ( A	10.00 1100				
X Untreated Rele		ly Treated R	elease 📋 Bypa	ss of a Treatment Process	Blended W	ith Final Effluent & Sampled		
Describe any dama	age to aquatic life or r	eceiving stre	am:					
None								
Reason for Bypass/Overflow:						recipitation 0.380 Inches		
Additional Information: An overflow occurred from the above listed separate sanitary sewer line. The City flushed the line and removed the blockage. The cause of the blockage could not be determined. The overflow was cleaned up.								
	Ç							
Actions Taken to P	revent, Minimize, or i	Millaste Dem	1908'					
				o. The City continues	to implement its	s approved CMOM and		
CSSOP program	ns, which include					nt and/or minimize overflows		
in the sewer col	lection system.							
		•						
Actions Taken or Pl	anned to Prevent Re	currence:	• • • • • • • • • • • • • • • • • • •					
			inues to imple	ment its approved CM	IOM and CSSC	)P programs, which include		
many preventat	ive maintenance	activities o	lesigned to pre	event and/or minimize	overflows in th	e sewer collection system.		
			· · · · · ·	•				
		(A		NAL SHEETS IF NECESS				
	line of laws the statistical state			ON AND SIGNATURE				
designed to assure	that qualified person	nel properiv d	an attachments we gather and evalua	ae prepared under my dire te the information submitte	ection of supervisioned. Based on my in	n in accordance with a system iquiry of the person or persons who		
manage the system	n, or those persons di	rectly respon	sible for gathering	the information, the inform	mation submitted is	, to the best of my knowledge and including the possibility of fine and		
imprisonment for kr	e, and complete. I al nowing violations.	n nware that	there are signified	ant penalities for submitting	g raise information,	including the possibility of line and		
SIGNATURE:	÷ ·····	toler	6-JIK	2	DATE: 5	19/12		

#### BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05)



Indiana Department of Environmental Management Office of Water Quality

INSTRUCTIONS: Complete all parts of this form and fax It to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

				RAL INFORMATION			
Facility Name:			County:			Permit Number:	
Water Pollutio	n Control Mainter	nance	Allen		IN0032	191	
Individual Making I	Report:		Phone Number:		Date & T	ime IDEM Notified	
Joe E. Johnso	n		(260) 427-60	47	May 11	, 2012 3:00 pm	
				SEINFORMATION			
Dale & Time Release Began:	Date & Time Release Stopped:	Location R of Manhole	eleased From: (A , Lift Stallon, Ford	ddress & Description be Main, etc.)	Receiving Area: (Ground, Stream	n Name, Storm Sewer, etc.)	
11/09/2012	02/19/2012	U 42 033	Salge & And	orra	Salg	e Ditch	
10:38 am	1:50 pm	AND	OORRA DR A	nd SALGE DR			
	leased: 460 GAL			WWTP Flow During Rel 33.42 MGD	ease:	WWTP Peak Design Flow: 60.00 MGD	
Check One: X Es				0012 1100			
I Untreated Rele		ly Treated R	elease 🔲 Bypa	ss of a Treatment Process	🗌 Blended V	ith Final Effluent & Sampled	
Describe any dama	ige to aquatic life or r	eceiving stre	am:				
None						·	
Reason for Bypass		Power F	allure	Equipment Failure	[] F	recipitation 0.000 Inches	
Additional Information: An overflow occurred from this separate sanitary sewer line. The City flushed the line and removed the grease blockage. This line will be televised and added to the preventative maintenance schedule. The overflow was cleaned up.							
Actions Taken to Prevent, Minimize, or Mitigate Damage: The line was flushed and the overflow was cleaned up. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.							
Actions Taken or Planned to Prevent Recurrence: The City will televise the line. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.							
		<u>(A</u>		NAL SHEETS IF NECESS			
				ON AND SIGNATURE			
designed to assure	that qualified perseq a, or those persons di e, and complete. I ar	o vhecora len	ather-and evalua	te the information submitte	ed. Based on my i	on in accordance with a system nquiry of the person or persons who s, to the best of my knowledge and , including the possibility of fine and	

Revised; Wrong date



State Form 48373 (R3 / 10-05) Indiana Department of Environmental Management Office of Water Quality

**BYPASS / OVERFLOW INCIDENT REPORT** 

INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speek with someone in OWQ, call (317) 232-8670.

			GENER	RAL INFORMATION			
Facility Name:			County:		NPDES F	Permit Number:	
Water Pollutio	n Control Mainter	nance	Allen		IN0032	191	
Individual Making I	Report:		Phone Number:		Date & Ti	me IDEM Notified	
Joe E. Johnso			(260) 427-60		May 11, 2012 3:00 pm		
				SEINFORMATION		2012 0.00 pm	
Date & Time	Date & Time	Location R		ddress & Description	Receiving Area:		
Release Began:	Release Stopped:		, Lift Station, Ford		Ground, Stream	Name, Storm Sewer, etc.)	
05/11/2012	05/11/2012	U 42 033	Salge & And	orra	Salge	e Ditch	
10:38 am	1:50 pm	ANE	ANDORRA DR And SALGE DR				
Amount of Flow Re	leased: 460 GAL	·	· · ·	WWTP Flow During Rel	ease;	WWTP Peak Design Flow:	
				33.42 MGD		60.00 MGD	
Check One: X Es			hal Analy				
X Untreated Rele	Bypass or Overflow: ase DPartial			ss of a Treatment Process	🗌 Blended W	ilh Final Effluent & Sampled	
Describe any dama	ige to aquatic life or r	eceiving stre	am:				
None							
Reason for Bypass		Power P	allure	🗌 Equipment Fallure	 a m	recipitation 0.000 inches	
Additional Informat						Toolpitation Stood IIIGNes	
		onarata e	anitany sowar l	ing The City flushed	the line and re	moved the grease blockage.	
This line will be televised and added to the preventative maintenance schedule. The overflow was cleaned up.							
Actions Taken to P	revent, Minimize, or	Mitigate Dan	lage:				
The line was flu	shed and the ove	orflow was	cleaned up. T	he City continues to it	nplement its a	proved CMOM and CSSOP	
programs, which	h include many p	reventative	e maintenance	activities designed to	prevent and/o	r minimize overflows in the	
sewer collection				•	•		
Actions Taken or Pl	anned to Prevent Re	currence:	·····				
			inues to Imple	ment its approved CN	AOM and CSSC	DP programs, which include	
						ie sewer collection system.	
<b>7</b>						,	
		• • • • • • •				······	
		(A		NAL SHEETS IF NECESS ION AND SIGNATURE			
الممتلفة بمطلعه بمنا	live and large that this are					n in conscioned with a system	
destaned to assure	ay or raw (nat this do that qualified nereon	nel property (	an anacriments We	ere prepared ander my diff de the information submitte	ed. Based on my f	n in accordance with a system nguiry of the person or persons who	
manage the system	), or those persons d	rectly respor	sible for gathering	g file information, the inform	mation submitted b	s, to the best of my knowledge and	
belief, true, accurat	e, and complete. I a	m aware that	Niero are signific	ant penalties for submitting	g false information,	including the possibility of fine and	
imprisonment for kr	nowing violations.	(	JOP M	it an		<u>-11/10</u>	
SIGNATURE: _			- KAS-K	MANYO	DATE:	DIIYIIC	
				77		/	
			V	$\vee$			

#### BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10.05)



Indiana Department of Environmental Management Office of Water Quality

INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

To report a spill or if the release is resulting in a fish kill or other severe environmental damage, immediately report the release to the Emergency Response Section spill response line at: (317) 233-7745 or toll free within Indiana at (888) 233-7745.

			GENE	RAL INFORMATION				
Facility Name:			County:		NPDES Permit Number:			
Water Pollutio	n Control Maintei	nance	Allen		IN0032	191		
Individual Making	Report:		Phone Number		Date & T	me IDEM Notified		
Joe E. Johnso	ิท		(260) 427-60	47	May 22	2012 2:45 pm		
				SEINFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (A , Lift Station, Ford	ddress & Description ce Main, etc.)	Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)			
05/21/2012	05/21/2012	2403 Euc	lid	,	2403 Euclid			
5:52 pm	7:16 pm		2403 EUCL	ID AVE				
ł	leased: Unknown			WWTP Flow During Rel 0.00 MGD	lease:	WWTP Peak Design Flow: 60.00 MGD		
Check One: Sector Es Description of the E Contracted Rele	Bypass or Overflow:		hat Apply) elease	ss of a Treatment Process	□ Blended W	lith Final Effluent & Sampled		
I —	ige to aquatic life or r	•		······································		··· • • ···		
None		·						
Reason for Bypass	elated	Power F	allure	Equipment Fallure	[] P	recipitation 0.000 Inches		
Additional Informat The above liste	d addressed rep	orted a ba	sement backu	p. The City removed	a partial blocks	ge in the combined sewer		
line. It cannot l	be determined if	lhe backup	o was also due	to the homeowner's	private lateral.			
						•		
Actions Taken to P	revent, Minimize, or	Mitigate Dam	age:					
				combined sewer line.	The City conti	nues to implement its		
approved CMO	M and CSSOP p	rograms, v	/hich include n	nany preventative ma		ities designed to prevent		
and/or minimize	overflows in the	sewer col	lection system					
		•						
	lanned to Prevent Re							
The line was flu	ished and televis	ed. The Cl	ty continues to	implement its approv	ed CMOM and	CSSOP programs, which		
system.	reventative maint	enance ac	and the second	ed to prevent and/or n	ninimize overni	ows in the sewer collection		
oyotonn.	•							
·								
		(A)		NAL SHEETS IF NECESS				
Land Court	the set land to state the			ON AND SIGNATURE				
designed to assure	ity of law that this do	cument and a net properly a	all attachments We bather and evalua	are prepared under my dire	ection of supervisions of a supervision of supervisions of the supervision of the supervi	n in accordance with a system nquiry of the person or persons who		
manage the system	n, or those persons d	irectly respon	sible for gathering	g the information, the inform	mation submitted i	s, to the best of my knowledge and		
belief, true, accurat imprisonment for kr	e, and complete. I a	m aware that	there dre signific	anyperfaillies for submilling	g-false information,	including the possibility of fine and		
SIGNATURE:	ionaly notalions.	b	PRAL	this	DATE: 3	723/17		
			<u>~~</u>	F F F		100/100		

U



SIGNATURE:

BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10.05) Indiana Department of Environmental Management

Office of Water Quality

Resubmittel: Add the plant Flow: JGP

123/12

DATE:

IĮ.

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				RAL INFORMATION			
Facility Name:	n Control Mainton		County:		NPDES Permit Number: IN0032191		
	n Control Maintei	nance	Allen				
Individual Making I Joe E. Johnso			Phone Number:			me IDEM Notified	
106 E' 1011190			(260) 427-60 PEUE	47 SEINFORMATION	May 22	, 2012 2:45 pm	
Date & Time	Date & Time	Location R		ddress & Description	Receiving Area:		
Release Began:	Release Stopped:		, Lift Station, Ford			Name, Storm Sewer, etc.)	
05/21/2012	05/21/2012	2403 Euc	lid		2403 Euclid		
5:52 pm	7:15 pm		2403 EUCL	ID AVE			
Amount of Flow Re	leased: Unknown	GAL		WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check One: 🗍 Es	itimated 🔲 Actual	l		31.02 MGD		60.00 MGD	
IX Untreated Rele		ly Treated Re	elease 🔲 Bypa	ss of a Treatment Process	Blended W	ilh Final Effluent & Sampled	
Describe any dama	ige to aquatic life or r	eceiving stre	am:				
None							
Reason for Bypass		🔲 Power F	oilure			recipitation 0.000 Inches	
Additional Informat			anuto	Equipment Failure		Technadori 0.000 mcnes	
		orted a bas	sement backu	b. The City removed	a partial blocka	ge in the combined sewer	
				to the homeowner's			
				,			
•							
					·	•	
	revent, Minimize, or i				The Olive senth	eres to be also set to	
				combined sewer line.		ilies designed to prevent	
	overflows in the				Internative avita	mes designed to prevent	
	anned to Prevent Re						
The line was flu	shed and televise	ed. The Cli	ty continues to	implement its approv	ed CMOM and	CSSOP programs, which	
	reventative maint	enance ac	tivities designe	ed to prevent and/or n	ninimize overfic	ows in the sewer collection	
system.							
	·····						
		<u>(A</u>		NAL SHEETS IF NECESS			
l and for some	Des of Jacobia distant			ON AND SIGNATURE			
designed to assure	that gualified person	cument and a nel properiy c	ul allachments we tather and evaluat	ere prepared under my dire te the information submitte	ction of supervisiond. Based on my in	n in accordance with a system iquiry of the person or persons who	
manage the system	i, or those persons di	recily respon	sible for gathering	) the Information, the inform	nation submitted is	, to the best of my knowledge and	
imprisonment for kr	e, and complete. Tai lowing violations.	n aware that	there are significa	ant panalities for submitting	i faise information,	including the possibility of fine and	

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Office of Water Quailty

**BYPASS / OVERFLOW INCIDENT REPORT** State Form 48373 (R3 / 10-05) Indiana Department of Environmental Management

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			COMPARED AND ADDRESS TO MARKED AND ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDR	RALINFORMATION				
Facility Name:			County:				Permit Number:	
Water Pollutio	n Control Mainte	nance	Allen			IN00321		
Individual Making	•		Phone Number:		1		me IDEM Notified	
Joe E. Johnso	)N		(260) 427-60			May 29,	, 2012 9:00 am	
Date & Time	Date & Time			SEINFORMATION Address & Description	Develo	1 A		
Release Began:	Release Stopped:		o, Lift Station, Ford			Ing Area: id, Stream	Name, Storm Sewer, etc.)	
05/29/2012	05/29/2012	2909 Cla	ra Ave			Base	ment	
1:10 am	3:50 am		2909 CLAF	RA AVE				
Amount of Flow Re	eleased: Unknown	GAL.		WWTP Flow During Rel	lease:		WWTP Peak Design Flow: 60.00 MGD	
Check One: 🛛 Es				42.54 MGD			00.00 MBD	
I Untreated Rele		ly Treated R	elease 📋 Bypa	ss of a Treatment Process		Blended W	ith Final Effluent & Sampled	
Describe any dama	age to aquatic life or r	eceiving stre	am:					
None								
Reason for Bypass		Power F	allure	🗌 Equipment Failure		🗌 Pi	recipitation 0.000 Inches	
Additional Informal								
A basement ba	ickup within the s	eparate sa	anitary sewer s	system was reported a bident did not reach or	at the al	bove me	entioned address. The City	
nusiteu tite iitte	and removed a	Jartiar Dioc	skage. The inc	suent du not reach o	aneot	a legula	led waterbody.	
					•			
					-			
	Prevent, Minimize, or					• •		
							plement its approved CMOM	
			y preventative	maintenance activitie	is desig	ned to p	revent and/or minimize	
overnows in the	sewer collection	system.						
Actions Taken or P	lanned to Prevent Re	currence:						
			ise the line. Th	e City continues to im	iemelar	nt its app	proved CMOM and CSSOP	
programs, whic	h include many p	reventative	e maintenance	e activities designed to	o preve	nt and/or	r minimize overflows in the	
sewer collection	n system.			-	-			
		(A	TTACH ADDITIO	NAL SHEETS IF NECESS	SARY)		1	
				ION AND SIGNATURE	encounter enclositations ad-			
I certify under pena	ilty of law that this do	cument and a	all attachments we	ere prepared under my dire	ection or	supervisio	n in accordance with a system	
designed to assure manage the system	that qualified person	nel properly ( rectiv respon	gather and evalua wibie for gathering	te the information submitte	ed, Base mation si	a on my ir ubmilted is	nquiry of the person or persons who s, to the best of my knowledge and	
bellef, true, accurat	ie, and complete. I a	m aware that	there are signific	ant penalties for submitting	g false ini	formation,	Including the possibility of fine and	
imprisonment for ki	nowing violations.	Jah	e de to	TAL A			-120/10 1	
SIGNATURE:	~~~	$\leq v$	LK 1	VM82	DATE	E: (	5/30/12	

BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05)

Indiana Department of Environmental Management

Office of Water Quality

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			GENER	RAL INFORMATION			
Facility Name:			County:		· · · · = = - ·	Permit Number:	
Water Pollutio	n Control Mainter	nance	Allen		IN0032		
Individual Making	•		Phone Number			ime IDEM Notified	
Joe E. Johnso	n		(260) 427-60	47 SEINFORMATION	June 28	5, 2012 2:45 pm	
Date & Time Release Began:	Date & Time Release Stopped:			ddress & Description	Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)		
06/25/2012	06/25/2012	X30 061			Grou		
1:02 pm	3:07 pm	4(	619 ARLINGT	ON PKWY S	· · · · · · · · · · · ·		
Amount of Flow Re	leased: 10 GAL	<b>.</b>		WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check One: 🛛 Es	timated 🛛 🖂 Actual			29.27 MGD	-	60.00 MGD	
	Bypass or Overflow:	(Check All Ti	hat Apply) elease 🔲 Bypa	ss of a Trealment Process	🗌 Blended W	lith Final Effluent & Sampled	
Describe any dama	age to aquatic life or r	ecelving stre	am:				
None					•		
Reason for Bypass	elated	📋 Power F	allure	🗌 Equipment Fallure		recipitation 0.000 inches	
An overflow oc discovered, Th	Additional information: An overflow occurred from the seperate sanitary 8 inch line that serves this area. A blockage wth sanitary debris was discovered. The City flushed the line and removed the debris that was causing the blockage. This overflow was to the ground only and did not reach or Impair a regulated waterbody.						
The line was flu	h include many pi	orflow was	cleaned up. T	he City continues to ir activities designed to	nplement its ap prevent and/o	pproved CMOM and CSSOP r minimize overflows in the	
	anned to Prevent Re avise the line The		linues to imple	ment its approved CM	10M and CSS	OP programs, which include	
The City will televise the line The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.							
		<u>(</u> A		NAL SHEETS IF NECESS			
designed to assure manage the system	that qualified person a, or those persons di e, and complete, l ar	nel properly ( rectly respon	all attachments we gather and evalua isible for gathering	te the information submitte whe information, the inform	ection or supervisio ed. Based on my fi nation submitted is I false information,	in in accordance with a system inquiry of the person or persons who is, to the best of my knowledge and including the possibility of fine and 26/2	

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#### BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05)



Indiana Department of Environmental Management Office of Water Quality

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			GENEI	RALINFORMATION				
Facility Name:	<b>.</b>		County:			Permit Number:		
Vater Pollutio	n Control Maintei	nance	Allen	********	IN003	·····		
Individual Making			Phone Number			Time IDEM Notified		
Joe E. Johnso	n		(260) 427-60		July 1,	2012 9:26 am		
				ASE INFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (A o, Lift Station, For	Address & Description ce Main, etc.)	Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)			
06/29/2012	07/01/2012	4704 Cov	704 Coverdale Rd D43 006 & 4704 Hartman Rd K15 @@@ Below					
4:00 pm	4:18 pm		9661 COVER	DALE RD		· ·		
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:		
Check One: 🗵 Es	stimated 🔲 Actual	Į		40.79 MGD		. 60.00 MGD		
	Bypass or Overflow:	(Check All T	hat Apply) elease 🗖 Bypa	ss of a Treatment Process	☐ Blended <sup>1</sup>	I With Final Effluent & Sampled		
	age to aquatic life or r	-			<u> </u>			
None		·			,			
Reason for Bypass		X Power F	allure	Equipment Failure		Precipitation 0.400 Inches		
Additional Informat								
		telv 3:00 n	m the City of F	Fort Wayne was hit wit	ih a violent ste	orm. Winds gusted to 91 mph		
						0,000 residents and business.		
						e the flow from the pump		
station into the	City sewer. The	City notifie	ed a local indu	stry that contributes a	large amount	of flow to this lift station and		
						was operational. The City had		
						y 6:45 pm on 6/29/12) the		
station was abl	e to function until	the power	was restored	. Despite the City's be	est efforts, this	s discharge reached the		
Actions Taken to P	Prevent, Minimize, or i	Miliaate Dam	1208:					
				i miligate damages lhi	roughout the	above described event and		
fully accomplish	ned all activities re	equired by	Its NPDES pe	rmit, CMOM and CSS	OP. The City	continuous to implement its		
approved CMO	M and CSSOP pr	rograms, v	hich include n	nany preventative mai	ntenance act	vities designed to prevent		
and/or minimize	overflows in the	sewer col	lection system	•				
				•				
	lanned to Prevent Re			100000				
The City continu	uous to implement	it its appro	ved CMOM a	nd CSSOP programs,	which include	e many preventative		
maintenance at	suvines designed	to prevent	and/or minim	ize overflows in the se	wer collection	i system,		
				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · ·			
		(A	The second se	NAL SHEETS IF NECESS				
l contificant de co	the of fair to a state of		·	ION AND SIGNATURE				
						ion in accordance with a system inquiry of the person or persons who		
manage the system	n, or those persons di	rectly respor	sible for gatherin	g the information, the inform	nation submitted	Is, to the best of my knowledge and		
belief, true, accurat	e, and complete. I a	nî aliyare that	there prevsignilio	an) penalties for submitting	false informatio	n, including the possibility of fine and		
imprisonment for ki	nowing violations. (	INP	11 Int	Y N	5 A T C	7-3-12		
SIGNATURE:		<u></u>	sex per	$ms_{1}$	DATE:			
		· []						

Revised Copy



BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05) Indiana Department of Environmental Management Office of Water Quality

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				AL INFORMATION			
Facility Name: Water Pollution	Control Maintena	ance	County: Allen			ES Permit Number: 032191	
Individual Making F Joe E. Johnson			Phone Number: 260-427-125			& Time IDEM Notified: 2012 @ 0926	
			Reliev	SE INFORMATION			
Dale & Time Release Began:	Dale & Time Release Stopped:	of Manhole	eleased From: (Ac , Lift Station, Forc	ldress & Description e Main, etc.)	Receiving Area: (Ground, Slream Name, Slorm Sewer, etc.)		
See Below	See Below		le Pump Statio or K11 009	n	See Below	,	
See Below	See Below						
Amount of Flow Re	leased: See Additio	onal Inform	nation Below	WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check one: 🛛 Est	Imated 🗌 Actual			6/29/12 - 40.789 M 6/30/12 - 35.134 M 7/1/12 - 29.701 M 7/2/12 - 33.580 M	GD GD	60 MGD	
	Description of the Bypass or Overflow: (Check All That Apply) Surfreated Release Bypass of a Treatment Process Blended With Final Effluent & Sampled						
Describe any dama None	ge to aquatic life or re	celving strea	m:				
Reason for Bypass/	laled	🛛 Power Fai	llure	Equipment Failure		⊠ Precipitation 0.4 Inches	
On June 29, 20 (equal to that of During this upse station into the requested they to setup an alter station was able Robinson Brind	Construction Related       Power Failure       Equipment Failure       Precipitation 0.4 Inches         Additional Information:       On June 29, 2012 at approximately 3:00 pm the City of Fort Wayne was hit with a violent storm. Winds gusted to 91 mph (equal to that of a category 1 hurricane) through Fort Wayne knocking out power to over 100,000 residents and business. During this upset, the pump station at Coverdale lost power thus precluding its ability to move the flow from the pump station into the City sewer. The City notified a local industry that contributes a large amount of flow to this lift station and requested they hold their discharge until the power could be restored and the pump station was operational. The City had to setup an alternative source of power at the station. Once this was done (at approximately 6:45 pm on 6/29/12) the station was able to function until the power was restored. Despite the City's best efforts, this discharge reached the Robinson Brindle Ditch in an amount of approximately 50,000 gallons.         Additionally, the regulator (K11 009) at Hartman Road lost power and failed to the closed position on Friday June 29, at						
4:18pm on 7/2/1		vas back to	o normal opera	ation. Despite the Cil		orts, approximately >100,000 of	
fully accomplish 30,000 residents Actions Taken to Pro The City utilized fully accomplish approved CMOM	ed all activities re s and business wi event, Minimize, or Mi its bests efforts t ed all activities re	quired by i ithout power ligate Damag o prevent, quired by i ograms, wi	its NPDES per er. pe: minimize and its NPDES per hich include m	mit, CMOM and CSS mitigate damages th mit, CMOM and CSS any preventative mai	SOP. As of roughout th SOP. The C	e above described event and July 3, 2012 there are still nearly e above described event and ity continuous to implement its ctivities designed to prevent	

Actions Taken or Planned to Prevent Recurrence: The City continuous to implement its approved CMOM and CSSOP programs, which include many prevent maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.	ventative
(ATTACH ADDITIONAL SHEETS IF NECESSARY)	
Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the p manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best or bellef, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the imprisonment for knowing violations.	erson or persons who of my knowledge and

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BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10-05)

Indiana Department of Environmental Management

Office of Water Quality

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			CENE:	RALINFORMATION			
Facility Name:			County:			NPDES P	ermit Number:
	n Control Mainte	nance	Allen			N00321	
Individual Making	Report:		Phone Number:		(	Date & Ti	me IDEM Notified
Joe E. Johnso			(260) 427-60	47		July 25,	2012 2:25 pm
				SEINFORMATION			
Date & Time	Date & Time		eleased From: (A	ddress & Description		ng Area:	
Reloase Began:	Release Stopped:		, Lift Station, Ford		(Ground		Name, Storn Sewer, etc.)
07/24/2012	07/24/2012	5810 Mea	adows Dr E03	014	Ground		
5:30 pm	7:11 pm		5810 MEADOWS DR				
Amount of Flow Re	leased: 200 GAL		· · · · ·	WWTP Flow During Rel			WWTP Peak Design Flow:
Check One: 🔀 Es	stimated 🔲 Actua	Ī		49,98 MGD			60.00 MGD
Description of the I	Bypass or Overflow: ase ⊡ Partia	(Check All Ti Ily Treated R	<i>hat Apply)</i> elease 🔲 Bypa	ss of a Treatment Process	⊨ ∏Bi	lended W	ith Final Effluent & Sampled
Describe any dama	age to aquatic life or i	eceiving stre	an:				
None							
Reason for Bypass		Power F	oilure	Equipment Failure			recipitation 0.910 inches
Additional Informal	A		anure				teophation ere re menes
		arala aanii	any couver line	A blockego of group	no and r	oofa wa	a discovered. The City
fluched and rec	curred in the sep	arate samt	ary sewer line.	A DIOCKAGE OF Great	v ibo Ci	tu talavi	s discovered. The City sed the line on 7/25/12 to
	r potential obstru			aneu up. Auunonanj		ty televi	
			e hiesein.				
					•		
Actions Taken to F	Prevent, Minimize, or	Miligale Darr	nage:	, E			
The City flushed	d and root sawed	the line a	nd the overflow	was cleaned up. Th	ne City w	/ill add t	his section to its regular
scheduled mair	ntenance progran	n. The City	continues to i	mplement its approve	ed CMOI	M and C	CSSOP programs, which
include many p	reventative maint	enance ac	tivities designe	ed to prevent and/or n	ninimize	overflo	ws in the sewer collection
system.			ŭ	•			
*							
Actions Taken or P	lanned to Prevent Re	currence:					
The City televis	ed the line. The	City contin	ues to implem	ent its approved CMC	OM and	CSSOF	programs, which include
many prevental	live maintenance	activities of	designed to pre	event and/or minimize	e overflo	ws in th	e sewer collection system.
<i>,</i> .			• ·				•
					04010		
(ATTACH ADDITIONAL SHEETS IF NECESSARY) CERTIFICATION AND SIGNATURE							
Loodify under home	why of low that this da	cument and				unaniaia	n in accordance with a system
designed to assure	that qualified person	vine menoration	cather and evalua	te the information submitte	ed. Based	d on my li	nguiry of the person or persons who
manage the system	n, or those persons d	irectly respor	sible for gathering	a the information, the infor	mation su	bmitted is	s, to the best of my knowledge and
belief, true, accurat	ie, and complete. Ta	m aware that	t there are signific	ant penalties for submitting	ý false info	ormation,	including the possibility of fine and
Imprisonment for k	nowing violations.	1 1 1	AL I	Hank.	<b></b> • • • • •	, <i>t</i>	7/7//10
SIGNATURE:		UK2	$\underline{k}$	XIVAN	DATE		1/20/10
	1	1	T				· ( )
	1	1	1				

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BYPASS / OVERFLOW INCIDENT REPORT State Form 48373 (R3 / 10.05)

Indiana Department of Environmental Management

Office of Water Quality INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

			<b>GENE</b>	RALINFORMATION		
Facility Name:			County:		I NPDES I	Permit Number:
1 f	n Control Mainter	nance	Allen		IN0032	
J						me IDEM Notified
Individual Making Joe E. Johnso			Phone Number			
JOB C. JOHNSO	11		(260) 427-60		July 30,	2012 3:05 pm
Date 9 Thus	Dela A Time	L L A A L'AND ID		SEINFORMATION		
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (A b, Lift Station, For	Address & Description ce Main, etc.)	Receiving Area: (Ground, Stream	i Name, Storm Sewer, etc.)
07/30/2012	07/30/2012	G15 010	4405 Eangle	Rd	· Tren	iman Drain
2:21 pm	4:30 pm	an kalennen son kan dan dan dan dan dan dan dan dan dan d	4300 ENG	ILE RD		
Amount of Flow Re	leased: 6000 GA	· · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	WWTP Flow During Re	lease:	WWTP Peak Design Flow:
			·	39.13 MGD		60.00 MGD
Check One: 🛛 Es						
Description of the I	Bypass or Overflow; ase	(Check All Ti ly Treated Ri	<i>hat Apply)</i> elease 🔲 Bypa	ss of a Treatment Process	🗌 Blended W	lith Final Effluent & Sampled
Describe any dama	ige to aquatic life or r	eceiving stre	am:			
None						
Reason for Bypass		📋 Power F	ailure	🛛 Equipment Failure	<b>q</b> [] ,	recipitation 0.000 Inches
Additional Informat	ion:					
An overflow oc	curred from the 8	- inch ford	ce main at the	Engle Road pump sta	ation (G15 010)	within the seperate sanitary
sewer area. A	hole was discove	red in the	top of the pipe	e which resulted in pai	rtial flow to esc	ape and reach a nearby ditch.
The City had to	shut down the p	ump statio	n and pump a	nd haul the flow until t	the repair to the	ə pipe was made. The
overflow was cl	leaned up.					
Actions Taken to P	revent, Minimize, or i	Vitigate Dam	lage:			
				ed the flow until the re	enair was made	e. The overflow was cleaned
un. The Cilv wi	Il continue to mor	nitor this se	ewer line and i	numn station. The Ci	ty continues to	implement its approved
						ned to prevent and/or
	ows in the sewer					
		*****	-,			
	anned to Prevent Re			<u>den men ann de ann de adarem este men ann en de de històrit est de la de la de</u>	·····	,
						/ continues to implement its
						ities designed to prevent
and/or minimize	overflows in the	sewer col	lection system	L.		
		. <u>(</u> A		NAL SHEETS IF NECESS		
I certify under pena	ity of law that this do	cument and a				n in accordance with a system
designed to assure	that qualified person	nei properly g	gather and evalua	te the information submitte	ed. Based on my l	nquiry of the person or persons who
manage the system	n, or those persons di	rectly respon	sible for gatherin	g the information, the infor	mation submitted i	s, to the best of my knowledge and
imprisonment for kr	e, and complete. I al	n aware that	inere are signific	ant penallies for submitting	g raise information,	including the possibility of fine and
SIGNATURE:		PIN	\ cta	Da-		12/17
OUDIVATURE:	<u> </u>	A it	XXX	Whene	DATE: X	12110

**BYPASS / OVERFLOW INCIDENT REPORT** State Form 48373 (R3 / 10-05)



State Form 48373 (R3 / 10-05) Indiana Department of Environmental Management Office of Water Quality

INSTRUCTIONS: Complete all parts of this form and fax It to <u>Office of Water Qualirty</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

			Gener	RAL INFORMATION		
Facility Name:	~		County:			Permit Number:
	n Control Mainter	nance	Allen		IN0032	191
Individual Making	Report:		Phone Number:			Ime IDEM Notified
Susan Beck			(260) 427-60		August	15, 2012 2:00 pm
Date & Time	Dale & Time	Location R		SEINFORMATION	Receiving Area:	
Release Began:	Release Stopped:	of Manhole				n Name, Storm Sewer, etc.)
08/14/2012	08/14/2012	Force ma	in G15 041H1	5 001	Tren	tman Drain
4:00 pm	4:45 pm		4400 ENG	LE RD		
Amount of Flow Re	leased: 15000 G/	AL.		WWTP Flow During Rel	lease:	WWTP Peak Design Flow:
Check One: 🛛 Es	timated 🛛 🖂 Actual			52.21 MGD		60.00 MGD
I Untreated Rele		ly Treated R	elease 📋 Bypa	ss of a Treatment Process	[]] Blended V	/ith Final Effluent & Sampled
Describe any dama	ige to aquatic life or r	eceiving stre	am:			
None						
Reason for Bypass	elated	Power F	ailure	🛛 Equlpment Failure	[] F	Precipitation 0.000 Inches
Additional Information: A break occurred in the above listed 8-inch force main. The pump station was shut down and flow was pumped and hauled until the break could be fixed. Evaluation of this force main is underway. Manholes are being set to allow for televising of the line to determine the pipe condition.						
The overflow wa implement its ap	revent, Minimize, or f as cleaned up and oproved CMOM a or minimize overfi	d the flow ind CSSO	was pumped a P programs, w	hich include many pro	eak was fixed. eventative mai	The City continues to ntenance activities designed
Actions Taken or Pl	anned to Prevent Red	currence:				
The City will televise the line and evaluation to repair this force main is underway. The City continues to implement its approved CMOM and CSSOP programs, which include many preventative maintenance activities designed to prevent and/or minimize overflows in the sewer collection system.						
		<u>(A</u>		NAL SHEETS IF NECESS		
				ON AND SIGNATURE		
designed to assure manage the system bellef, true, accurate imprisonment for kn	that qualified personr , or those persons di e, and complete. I an	nel properly g rectly respon	ather and evaluat sible for gathering	te the information submitte the information, the inform	d. Based on my i nation submitted i false information	on in accordance with a system nquiry of the person or persons who s, to the best of my knowledge and including the possibility of fine and
SIGNATURE:	<u></u>	277	5		DATE: 8	-17-12

BYPASS / OVERFLOW INCIDENT REPORT Stale Form 48373 (R3 / 10-05)

Indiana Department of Environmental Management Office of Water Quality INSTRUCTIONS: Complete all parts of this form and fax it to <u>Office of Water Quality</u>, <u>Compliance Evaluation Section</u> at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

To report a spill or if the release is resulting in a fish kill or other severe environmental damage, immediately report the release to the Emergency Response Section spill response line at: (317) 233-7745 or toll free within Indiana at (868) 233-7745.

			GENEI	RALINFORMATION			
Facility Name:			County:			Permit Number:	
Water Pollutio	n Control Maintei	nance	Allen		IN003	2191	
Individual Making I			Phone Number		Date &	Time IDEM Notified	
Joe E. Johnso	n		(260) 427-60		Augus	t 28, 2012 2:00 pm	
			RELEA	SEINFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:	Location Re of Manhole	eleased From: (A n, Lift Station, Ford	Addross & Doscription co Main, otc.)	Receiving Area (Ground, Strea	: m Name, Storm Sewer, etc.)	
08/28/2012	08/28/2012	R19 005	& R19 008		Schaper Ditch		
11:45 am	2:00 pm	3318 SEQUAYAH PASS			. <u>1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 19</u>		
Amount of Flow Re		L	· .	WWTP Flow During Re 38.92 MGD	léase:	WWTP Peak Design Flow: 60.00 MGD	
Check One: X Es Description of the E X Untreated Rele	Bypass or Overflow:	(Check All Ti	het Apply) elease	ss of a Trealment Process	Blended	I With Final Effluent & Sampled	
Describe any dama	age to aquatic life or r	-	• •				
None		· · · · · · · · · · · · · · · · · · ·					
Reason for Bypass		Dewer F	allure	🔲 Equipment Failure	X	Precipitation 0.800 Inches	
Additional Informat	and the second se				<u>н</u>		
An overflow oc	curred from the a	bove listed	i 8-inch sepera	ate sanitary line. The	line was fluse	d and removed tree roots and	
other sanitary c	lebris. The overf	low was cl	eaned up.	·			
		•					
	revent, Minimize, or I						
The overflow wa	as cleaned up. T	he City will	I televise the I	ne to verify no other p	otential obstru	uctions are present. The City	
continues to imp	plement its appro	ved CMON	A and CSSOP	programs, which incl	lude many pre	ventative maintenance	
activities design	ied to prevent and	i/or minim	ize overflows i	n the sewer collection	n system.		
	anned to Prevent Re					,	
The City continu	tes to implement	its approv	ed CMOM and	I CSSOP programs, v	which include	many preventative	
maintenance ac	cuvides designed	to prevent	and/or minimi	ze overflows in the se	ewer collection	system.	
3/1		(۸	TTACH ADDITIO	NAL SHEETS IF NECESS	ARY)		
				ON AND SIGNATURE			
I certify under penal	ity of law that this doc	ument and a	all altachments we	ere prepared under my dire	ction or supervisi	on in accordance with a system	
manade the system	that qualified personi , or those persons di	iel property g rectiv réspon	jatner and evalua sible for datherind	te the information submitte The information, the inform	ed. Based on my mation submitted	inquiry of the person or persons who is, to the best of my knowledge and	
bellef, true, accurate	e, and complete. I ar	n a vare that	there are significa	ant penalties for submitting	false information	a, including the possibility of fine and	
Imprisonment for kn	iowing violations.	the b	K.	. /			
SIGNATURE:	ACEL	<u>&gt;</u>	Ant 8-0	2	DATE:	8-30-12	
	V		• •				

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# APPENDIX 3

#### O&M Activities (WPCM) - Collection System Activities (March 1, 2012 - August 31, 2012)

	Annual Goal	Completed in Current Report Period	2012 YTD	2012 Percent complete
Degreased Sewer Mains(LF)	520,000	710,497	936,855	180.2%
Deroot sewer mains (LF)	210,000	247,258	277,189	132.0%
Clean CB/Inlet Structures (LF)	5,600	4,106	5,935	106.0%
Televise Sewer Mains (LF)	135,000	200,099	250,942	185.9%
Clean Sewer Mains (LF)	95,220	76,329	96,913	101.8%
Flush Sewer Mains (LF)	130,000	97,206	127,411	98.0%
Inspect Manholes	450	304	476	105.8%

\*Note: data for Televising comes from Flexidata, data for Manhole Inspections comes from PDS, and all else comes from Hansen

#### REGULATOR ROUTE INSPECTIONS

	Visit	
	Frequency	Entries
Anthony	6	
Brentwood	6	
Clinton - Jackson	6	
Clinton - Superior	7	
Clinton - Van Buren	6	
Coombs	6	
Dalgren	6	
Edsall	6	
Fairfield	4	
Foster Park	7	1
Glasgow	6	
Glenwood	6	
Hanna	6	
Indian Village	7	
Mount Vernon	6	
North Anthony	4	
Nelson	8	3
Penn	6	
Pontiac	5	
Rolling Mill	6	
Rudisill	6	
Superior - Barr	6	
Superior - Fairfield - East	6	
Superior - Harrison	6	
Superior - Fairfield - West	6	
Theime Drive	6	
Third Street	6	
Warfield	7	
Wayne Pump	6	
Westbrook	7	
Wildwood	6	
Woodhurst	6	
Woodrow	6	
Brown St.	6	
Total Visits	206	4

### **Lift Station Inspections**

Aboite Lift S	tation					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	5	4	4	5	4
Mechanical	3	5	4	4	5	4

Bradbury Lit	ft Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	5	4
Mechanical	3	4	5	4	5	4

Brown Street Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	5	4
Mechanical	3	4	5	4	5	4

Coverdale Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	5	4
Mechanical	3	4	5	4	5	4

Engle Road	Lift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	5	4	4	4	5
Mechanical	3	5	4	4	4	5

Fairmount L	ift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	5	4
Mechanical	3	4	5	4	5	4

Flaugh Ditch Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	5	4	4	4	5
Mechanical	3	5	4	4	4	5

Gathings Lif	Gathings Lift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	5	4	4	4	5
Mechanical	3	5	4	4	4	5

<b>Golfview Lif</b>	t Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

Hessen Cassel Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	5	4	4	4	5
Mechanical	3	5	4	4	4	5

Lawton Place Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	4	5
Mechanical	3	4	5	4	4	5

Morton Street Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

Nebraska Li	ft Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	5	4
Mechanical	3	4	5	4	5	4

Pemberton I	Lift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

Steeplechase Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

CITY OF FORT WAYNE, IN SIX-MONTH STATUS REPORT #9

<b>Third Street</b>	Third Street Lift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	5	4	5	4
Mechanical	3	4	5	4	5	4

Tillman/Calhoun Lift Station						
MAR APR		MAY	JUN	JUL	AUG	
Electrical	3	5	4	4	4	5
Mechanical				4	4	5

Bellshire Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

Brandenwood Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	4
Mechanical 3 4			3	5	4	4

Chapel Creek Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	5
Mechanical 3 4		4	4	4	5	

Cherry Hill Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	4
Mechanical	3	4	3	5	4	4

Dupont Roa	Dupont Road Lift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	5
Mechanical	3	4	4	4	4	5

Evard Road Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	4
Mechanical	3	4	3	5	4	4

CITY OF FORT WAYNE, IN SIX-MONTH STATUS REPORT #9

Foxwood Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	4
Mechanical	3	4	3	5	4	4

Hawthorne I	_ift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	0	0	0	0	0	0
Mechanical	0	0	0	0	0	0

Lake Forest Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

Maplewood Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	4
Mechanical	3	4	4	4	4	4

Maumee Valley Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	5
Mechanical	3	4	3	5	4	5

Oak Pointe I	_ift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	5
Mechanical	3	4	4	4	4	5

Old Lantern Tr. Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	5
Mechanical	3	4	4	4	4	5

Parkerdale Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	3	5	4	4
Mechanical	3	4	3	5	4	4

CITY OF FORT WAYNE, IN SIX-MONTH STATUS REPORT #9

Perry Lakes Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	5
Mechanical	3	4	4	4	4	5

River Bend Bluffs Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	3	4	4	4	4	5
Mechanical	3	4	4	4	4	5

River Bend	River Bend Woods Lift Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	5	4	3	5	4	4
Mechanical	5	4	3	5	4	4

Rebecca Lif	t Station					
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	5	4	3	5	4	4
Mechanical	5	4	3	5	4	4

Redwood Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	5	4	4	4	4	5
Mechanical	5	4	4	4	4	5

Rothman Road Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	5	4	3	5	5	3
Mechanical	5	4	3	5	5	3

St. Joe Lift Station						
	MAR	APR	MAY	JUN	JUL	AUG
Electrical	5	4	3	5	4	5
Mechanical	5	4	3	5	4	5