

Illinois Environmental Protection Agency

Bureau of Water • 1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276

Sanitary Sewer Overflow or Bypass Notification Summary Report

- Within 24 hours of the occurrence, notify the Illinois EPA regional wastewater staff by telephone, FAX, email or voice mail, if staff are unavailable.
- Within 5 days of the occurrence, provide a written report describing the overflow or bypass, including all information requested on this form. The permittee is required to submit this form or other equivalent written notification to the Illinois EPA at:

Bureau of Water/Compliance Assurance Section - MC #19 1021 North Grand Avenue East P.O. Box 19276 Springfield, IL 62794-9276

NOTE: You may complete this form online, save a copy locally, print, sign and submit it to the BOW/CAS MC #19, at the above address. You may also print the form before completing it by hand, signing and submitting it.

Failure to notify the Illinois EPA as specified may result in fines up to \$10,000 for each day of violation.

Instructions: Use this form to report all unscheduled sanitary sewer overflow or bypass occurrences. Attach additional information as necessary to explain or document the overflow or bypass. For the purpose of this report, an overflow or bypass is defined as the discharge of untreated sewage from the sanitary sewer collection system to a surface water and/or ground due to circumstances such as those identified by the check boxes in the overflow or bypass details section of this form.

Use one form per occurrence. A single occurrence may be more than one day if the circumstances causing the overflow or bypass results in a discharge duration of more than 24 hours. If there is a stop and restart of the overflow or bypass within 24 hours, but it is caused by the same circumstances, report it as one occurrence. If the discharges are separated by more than 24 hours, they should be reported as separate occurrences.

24 Hour Notification Information

Permittee (M City of Decat	A CONTRACTOR OF THE PARTY OF TH	or Facil	ity Nar	me): 	Permit Numbe ILR400181	er: Person Representing Permittee Who Contacted IEPA: Matt Newell			
Date: 02-04-16	Time: 4:14	AM	PM ×	IEPA Office Champaign	Contacted:	Name of IEPA Employee Contacted: Holly Hirchert & Jeffrey Holste			
The state of the s	ewer Ove	erflow	or E	ypass Det	ails				
Date and Dur	ation of Ov	erflow	or Byp	ass Occurren	ce (complete a	separate form for each occurrence):			
				Duration of 48 hours	n of the overflow or bypass (hours and minutes):				
Estimated Volume Wastewater Discharged (gallons):	V M	/WTP (IGD): I	Not ap	uring bypass plicable for a	collection	ocation of the Overflow or Bypass:			
20,000 gallons N/A				near Country Club Road / Lynnwood - See map					
Circumsta	nces Ca	using	the (Overflow o	r Bypass (cl	neck all that apply)			
WPC 733 11/2011	Rain			☐ Power C	outage X Eq	ipment Failure			
	Snow Melt			☐ Broken Sewer ☐ Widespread Flooding					
failed. What	caused the	power	outag	e, or what plu	igged the sewe	or bypass occurred. For example, describe what equipment r. Flooding should only be indicated, as a cause if there is ter levels, not just localized high water in the street.			
The influent salarm float w					blocked with w	pes and other debris causing the overflow. The high water			

Wet Weathe	r (if appli	icable)									
Date(s) and I	Duration of	of Rainfall:									
Start Date:	Time:	AM PM	End Date:	Time:	AM PM	Amount o	f Rainfall (inches)	Amoun (inches	t of Snow Melt		
. 111, 1111		11	urated, frozen								
Where Dic	the Di	scharge	from the O	verflow	or Bypas	ss Go? (check all that a	ipply)			
If discharge of storm sewer	does not o	enter direct e receiving	ly into surface water.	hat the was water, but	stewater e t indirectly	nters, which by way of a	n could be a nearby ditch or storm sew	stream, er, trace	river, lake, or wetland. the path of the ditch or		
Runs on				Lates Dans							
			r it drains to: face water it o								
The state of the s				irairis to.							
		ect discharg		residential	commerci	ial) of buildi	ngs affected):				
	AND THE PERSON AND THE PERSON AND THE										
Other, d	escribe:_										
Actions to	Corre	et This O	ccurrence	and Prev	vent Fut	ure Ower	flows or Bypas	ses			
this form. A permits prob may be the	Iso descr hibit overf subject of	ibe what ac lows or byp f enforceme	ctions are plan basses, unless ent action.	ned to pre-	vent or mir ecified cor	nditions are	met. Samilary sew	er overflo	ows and bypasses		
Report Co			eu away nom				chance of it getting				
Report Co	inpiete	ч Бу									
Contact Pers	THE RESERVE THE PROPERTY OF THE PARTY OF THE						: Richard G. Marley	, P.E.			
Street Addre	ess: #1 G	ary K. Ande	erson Plaza			Name and Address of the Owner, when the Owner, which	orks Director #1 Gary K. Anders	son Plaza			
PO Box: City:	Deca	itur	State:	: IL	POI						
Zip Code:	6252		Phone: 217-4		City:		Decatur		State: IL		
County:	Maco				Zip (Code:	62523	Phone:	217-424-2747		
S STANDARD PARTY CONTRACTOR					Cou	nty:	Macon				
Any person Illinois EPA ILCS 5/44(h	commit	owingly ma s a Class 4	akes a false, I felony. A se	fictitious, econd or s	or fraudul subsequer	ent materia nt offense a	al statement, orali after conviction is	y or in w a Class	riting, to the 3 felony. (415		
Authorized I	Represen	tative Nam	e (Print)		Title						
Richard G. I	.E.			Public Works Director							
Richard Gr. Marley					2-8-2016						
Auti	norized R	epresentati	ive Signature			Date					

