



National Pollutant Discharge Elimination System (NPDES)
CSO Monthly Report of Operation (CSO MRO)

State Form 50546 (R2 / 5-13)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

| City: City of Noblesville | | Page 1 of 4 | | Permit Number: IN0020168 | | | | | | | | | | | | | | | |
|--|--------------------------|--|----------------------------|--------------------------|------------------------------|--------------------------|---------------------------------------|----------------------|--------|------------------------|--------|----------------------|---------------------|----------------------|--------|------------------------|--------|----------------------|--------|
| Facility: Noblesville Wastewater Utility | | Public Notification Requirements Met? Y | | | | | | | | | | | | | | | | | |
| Monitoring Period: April 2016 | | Check box if no CSO discharge occurred for the month: <input type="checkbox"/> | | | | | | | | | | | | | | | | | |
| Design Peak Hourly Flow (MGD): 20 | | Design Average Flow (MGD): 10.0 | | | | | | | | | | | | | | | | | |
| WWTP Influent Data | | | Precipitation Data | | | | | CSO Outfall No. 002 | | | | | CSO Outfall No. 003 | | | | | | |
| Day of Month | Average Daily Flow (MGD) | Peak Hourly Flow (MGD) | Time Precip. Began (am/pm) | Precip. Duration (Hours) | Total Daily Precip. (Inches) | Peak Intensity (Inch/hr) | Measurement Interval (hr, 30 m, 15 m) | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E |
| 1 | 8.190 | 14.07 | | | 0.00 | | | | | | | | | | | | | | |
| 2 | 7.070 | 13.74 | | | 0.00 | | | | | | | | | | | | | | |
| 3 | 7.100 | 13.43 | | | 0.00 | | | | | | | | | | | | | | |
| 4 | 6.680 | 13.33 | | | 0.00 | | | | | | | | | | | | | | |
| 5 | 6.670 | 13.73 | | | 0.00 | | | | | | | | | | | | | | |
| 6 | 7.050 | 13.73 | 5:45 PM | 1.66 | 0.21 | 0.09 | 15 min | | | | | | | | | | | | |
| 7 | 8.620 | 13.86 | 3:45 AM | 0.33 | 0.04 | 0.03 | 15 min | | | | | | | | | | | | |
| 8 | 5.590 | 13.24 | 1:05 PM | 0.58 | 0.08 | 0.03 | 15 min | | | | | | | | | | | | |
| 9 | 6.800 | 14.41 | | | 0.00 | | | | | | | | | | | | | | |
| 10 | 8.500 | 13.77 | 5:15 PM | 2.42 | 0.32 | 0.10 | 15 min | | | | | | | | | | | | |
| 11 | 10.870 | 20.55 | 12:00 AM | 7.42 | 1.12 | 0.20 | 15 min | 7:00 AM | M | 0.25 | M | 0.001 | M | | | | | | |
| 12 | 9.890 | 14.27 | | | 0.00 | | | | | | | | | | | | | | |
| 13 | 8.360 | 14.27 | | | 0.00 | | | | | | | | | | | | | | |
| 14 | 8.140 | 14.20 | | | 0.00 | | | | | | | | | | | | | | |
| 15 | 7.840 | 13.79 | | | 0.00 | | | | | | | | | | | | | | |
| 16 | 8.040 | 18.59 | | | 0.00 | | | | | | | | | | | | | | |
| 17 | 7.880 | 13.83 | | | 0.00 | | | | | | | | | | | | | | |
| 18 | 6.850 | 14.45 | | | 0.00 | | | | | | | | | | | | | | |
| 19 | 8.300 | 13.99 | | | 0.00 | | | | | | | | | | | | | | |
| 20 | 6.990 | 13.21 | | | 0.00 | | | | | | | | | | | | | | |
| 21 | 8.130 | 14.30 | 2:05 AM | 1.92 | 0.45 | 0.27 | 15 min | 5:40 PM | M | 0.50 | M | 0.016 | M | | | | | | |
| 22 | 9.450 | 19.93 | 12:00 AM | 3.00 | 0.68 | 0.31 | 15 min | 5:30 PM | M | 1.00 | M | 0.059 | M | 5:30 PM | M | 1.08 | M | 0.189 | M |
| 23 | 9.630 | 19.27 | | | 0.00 | | | | | | | | | | | | | | |
| 24 | 7.720 | 18.96 | | | 0.00 | | | | | | | | | | | | | | |
| 25 | 7.530 | 14.26 | | | 0.00 | | | | | | | | | | | | | | |
| 26 | 7.150 | 13.77 | 8:40 PM | 0.66 | 0.13 | 0.12 | 15 min | | | | | | | | | | | | |
| 27 | 7.740 | 13.95 | 5:00 PM | 1.58 | 0.25 | 0.18 | 15 min | | | | | | | | | | | | |
| 28 | 10.110 | 19.47 | 12:00 AM | 2.33 | 0.81 | 0.42 | 15 min | 12:10 AM | M | 1.00 | M | 0.054 | M | 6:20 AM | M | 0.58 | M | 0.011 | M |
| 29 | 7.920 | 13.63 | | | 0.00 | | | | | | | | | | | | | | |
| 30 | 10.460 | 19.43 | 9:25 AM | 4.00 | 0.76 | 0.29 | 15 min | 3:20 PM | M | 0.92 | M | 0.019 | M | 3:25 PM | M | 0.75 | M | 0.096 | M |
| 31 | | | | | | | | | | | | | | | | | | | |
| Totals: | 241.27 | | | 25.90 | 4.85 | | | 5 | Days | 3.67 | | 0.149 | | 3 | Days | 2.41 | | 0.296 | |
| Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent | | | | | | | | | | | | | | Telephone | | | | | |
| Michael Hendricks, Controller | | | | | | | | | | | | | | 317-776-6353 | | | | | |
| 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 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. | | | | | | | | | | | | | | | | | | | |
| Signature of Principal Executive Officer or Authorized Agent | | | | | | | | | | | | | | Date (mm/dd/yy) | | | | | |
| | | | | | | | | | | | | | | 05/17/16 | | | | | |



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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

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|--|----------------------|--------|------------------------|--------|----------------------|---------------------|----------------------|--------|------------------------|--|----------------------|---------------------|----------------------|--------|--------------------------|--------|----------------------|---------------------|----------------------|--------|------------------------|--------|----------------------|--------|
| City: City of Noblesville | | | | | | | | | | Page 2 of 4 | | | | | Permit Number: IN0020168 | | | | | | | | | |
| Facility: Noblesville Wastewater Utility | | | | | | | | | | Public Notification Requirements Met? Y | | | | | | | | | | | | | | |
| Monitoring Period: April 2016 | | | | | | | | | | Check box if no CSO discharge occurred for the month: <input type="checkbox"/> | | | | | | | | | | | | | | |
| Design Peak Flow (Hourly) (MGD): 20 | | | | | | | | | | Design Flow (MGD): 10 | | | | | | | | | | | | | | |
| CSO Outfall No. 004 | | | | | | CSO Outfall No. 005 | | | | | | CSO Outfall No. 007 | | | | | | CSO Outfall No. 008 | | | | | | |
| Day of Month | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E |
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| 21 | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | 5:30 PM | E | 0.50 | E | 0.0025 | E | | | | | | | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | | | | | | | | | | | |
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| 26 | | | | | | | | | | | | | | | | | | | | | | | | |
| 27 | | | | | | | | | | | | | | | | | | | | | | | | |
| 28 | 12:05 AM | M | 1.66 | M | 0.014 | M | | | | | | | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 | 3:15 PM | M | 0.83 | M | 0.017 | M | | | | | | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | |
| Totals: | 3 | Days | 2.99 | | 0.0335 | | 0 | Days | 0.00 | | 0 | | 0 | Days | 0 | | 0 | | 0 | Days | 0.00 | | 0 | |



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|--|----------------------|--------|------------------------|--------|----------------------|--------|----------------------|--------|------------------------|---|----------------------|--------|----------------------|--------|--------------------------|--------|----------------------|--------|----------------------|-----------------|------------------------|--------|----------------------|--------|
| City: City of Noblesville | | | | | | | | | | Page 3 of 4 | | | | | Permit Number: IN0020168 | | | | | | | | | |
| Facility: Noblesville Wastewater Utility | | | | | | | | | | Public Notification Requirements Met? Y | | | | | | | | | | | | | | |
| Monitoring Period: April 2016 | | | | | | | | | | Check box if no CSO discharge occurred for the month: <input checked="" type="checkbox"/> | | | | | | | | | | | | | | |
| Design Peak Flow (Hourly) (MGD): 20 | | | | | | | | | | Design Flow (MGD): 10 | | | | | | | | | | | | | | |
| CSO Outfall No. 009 | | | | | | | | | | CSO Outfall No. 010 | | | | | CSO Outfall No. | | | | | CSO Outfall No. | | | | |
| Day of Month | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E | Time Discharge Began | M or E | Event Duration (Hours) | M or E | Event Discharge (MG) | M or E |
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| 30 | | | | | | | | | | | | | | | | | | | | | | | | |
| Totals: | 0 | Days | 0.00 | | 0 | | 0 | Days | 0.00 | | 0 | | 0 | Days | 0.00 | | 0 | | 0 | Days | 0.00 | | 0 | |



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| | | | | | |
|--------------------------------|--------------------------------|---|--|----------------|-----------|
| City: | City of Noblesville | Page: | 4 of 4 | Permit Number: | IN0020168 |
| Facility: | Noblesville Wastewater Utility | Public Notification Requirements Met? Y <input checked="" type="checkbox"/> | | | |
| Monitoring Period: | April | 2016 | Check box if no CSO discharge occurred for the month: <input type="checkbox"/> | | |
| Design Peak Hourly Flow (MGD): | 20 | Design Average Flow (MGD): | 10.0 | | |

| Day of Month | Comments (further explanation as to why each CSO event occurred) |
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| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
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| 7 | |
| 8 | |
| 9 | |
| 10 | |
| 11 | Rain event occurred that caused some combined sewer overflow lines to exceed capacity. |
| 12 | |
| 13 | |
| 14 | |
| 15 | |
| 16 | |
| 17 | |
| 18 | |
| 19 | |
| 20 | |
| 21 | Rain event occurred that caused some combined sewer overflow lines to exceed capacity. |
| 22 | Rain event occurred that caused some combined sewer overflow lines to exceed capacity. |
| 23 | |
| 24 | |
| 25 | |
| 26 | |
| 27 | |
| 28 | Rain event occurred that caused some combined sewer overflow lines to exceed capacity. |
| 29 | |
| 30 | Rain event occurred that caused some combined sewer overflow lines to exceed capacity. |
| 31 | |

| | |
|--|--------------|
| Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent | Telephone |
| Michael Hendricks, Controller | 317-776-6353 |

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 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.

| | |
|--|-----------------|
| Signature of Principal Executive Officer or Authorized Agent | Date (mm/dd/yy) |
| | 05/17/16 |