



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

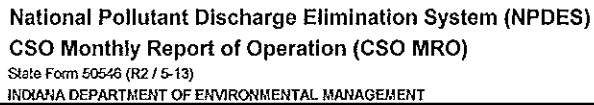
State Form 50548 (R2 / 5-13)

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 2017		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	7.860	13.18			0.00	0.00													
2	8.060	13.36			0.00	0.00													
3	6.170	13.64	4:55 AM	1.00	0.19	0.09	15 min												
4	7.710	12.04			0.00	0.00													
5	8.100	18.48	8:25 AM	1.50	0.38	0.17	15 min	8:25 PM	M	0.42	M	0.016	M						
6	8.000	11.77	12:35 AM	1.17	0.15	0.07	15 min												
7	8.250	12.51			0.00	0.00													
8	8.340	10.92			0.00	0.00													
9	7.300	11.53			0.00	0.00													
10	8.270	15.24	5:10 PM	1.33	0.87	0.82	15 min	5:25 PM	M	1.08	M	0.206	M						
11	7.910	12.26			0.00	0.00													
12	7.820	14.85			0.00	0.00													
13	7.030	14.84			0.00	0.00													
14	8.050	12.52	6:15 PM	0.17	0.02	0.02	15 min												
15	7.660	12.80	1:15 PM	0.08	0.01	0.01	15 min												
16	7.900	12.78			0.00	0.00													
17	6.140	12.45			0.00	0.00													
18	7.810	13.25			0.00	0.00													
19	6.460	12.14			0.00	0.00													
20	7.470	13.55	7:40 PM	0.33	0.16	0.16	15 min	8:15 PM	M	0.33	M	0.004	M						
21	7.860	12.09			0.00	0.00													
22	6.670	13.43			0.00	0.00													
23	7.680	13.59			0.00	0.00													
24	5.980	12.32			0.00	0.00													
25	6.400	12.17			0.00	0.00													
26	7.330	12.04			0.00	0.00													
27	6.440	12.18	3:10 AM	0.25	0.04	0.03	15 min												
28	10.260	19.06	5:40 PM	2.58	0.95	0.49	15 min	7:00 PM	M	2.33	M	0.147	M						
29	13.130	19.96	1:10 AM	7.00	2.08	0.73	15 min	1:50 AM	M	6.66	M	0.305	M						
30	14.180	20.43	12:30 AM	2.83	0.69	0.73	15 min	12:00 AM	M	2.00	M	0.095	M						
31																			
Totals:	238.24			18.24	5.54			6	Da ys	12.82		0.773		0	Da ys	0.00		0	
Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent														Telephone					
Ray Thompson, Utility Director														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)					
														5/16/17					



City: City of Noblesville							Page 2 of 4						Permit Number: IN0020168														
Facility: Noblesville Wastewater Utility							Public Notification Requirements Met? Y																				
Monitoring Period: April 2017							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			
	3:55 PM	M	0.75	M	0.008	M																					
	5:20 PM	M	0.92	M	0.02	M	5:30 PM	M	0.17	M	0.001	M															
Totals:	5	Days	8.25		0.156		3	Days	1.00		0.0521		0	Days	0		0		0	Days	0.00		0				

[illegible]



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: 4 of 4	Permit Number: IN0020168
Facility: Noblesville Wastewater Utility	Public Notification Requirements Met? <input checked="" type="checkbox"/> Y	
Monitoring Period: April 2017	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)
1	
2	
3	
4	
5	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.
6	
7	
8	
9	
10	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.
21	
22	
23	
24	
25	
26	
27	
28	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.
29	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.
30	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.

Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent Ray Thompson, Utility Director	Telephone 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) 5/14/17