

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: City of Noblesville													wyddiad F	ermit Number: IN0020168								
Facility: Noblesville Wastewater Utility												Public Notification Requirements Met? Y											
Monftoring Period: May 2017												Check box if no CSO discharge occurred for the month:											
Design	Peak Hour	(MGD):	10.0				W.W.S																
wwti	P Influent	Data	31 (7 (1) 30	Pro	ecipitation E	ala			C	SO 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 Daity Precip. (inches)	Peak Intensity (Inch/hr)	Measureme nt Interval (hr, 30 m, 15 m)	Time Discharge Began	⊗ &	Event Duration (Hours)	M or E	Event Discharg e (MG)	M or E	Time Discharge Began	ા દુ	Event Duration (Hours)	≱ક્ષ	Event Discharge (MG)	M or E				
1	10.060	20.52	1:40 AM	1.66	0.45	0.17	15 min :	3:35 AM	М	2.50	М	0.077	М					<u> </u>	┦				
2	9.880	18.87	12:05 AM	0.33	0.04	0.06	15 min				L		L.,										
3	9,900	14,58	6:25 PM	2.17	0.26	0.10	15 min				_						Ш						
4	19.800	25.57	12:20 AM	23.00	3.21	0.38	15 min	3:15 AM	М	11.67	М	. 0.329	М				Ш						
- 5	24.380	23.44	12:15 AM	4.50	0.55	0.11	15 min										Ц						
6	14.330	22,69			0.00	0.00					<u> </u>												
7	11.680	19.86			0.00	0.00											Ш		Ш				
8	8.880	16.20			0.00	0.00									Ц		Ц						
9	13,800	22,65	1:20 AM	5.33	1.24	0.45	15 min	6:40 AM	М	7.42	М	0.149	М						Ш				
10	10.410	18.46	11:40 PM	0.33	0.10	0.10	15 min																
11	9.930	18.75	12:00 AM	0.75	0.19	0,27	15 min	12:25 AM	М	0.75	М	0.015	М		Ш								
12	10.570	14.91			0.00	0.00				· · · · · · · · · · · · · · · · · · ·					Ш								
13	9.450	15.82			0.00	0.00													Ш				
14	9.270	12.90			0.00	0,00			Ц										Ш				
15	6.700	12.39			0.00	0.00																	
16	8.180	18,07			0.00	0.00																	
/17	8.110	12.74			0.00	0.00													Щ				
18	7.950	10.68			0.00	0.00																	
ୀ9 ା	9,600	13.04	2:05 PM	0.33	0.20	0.20	15 min	2:25 PM	М	0.50	М	0.009	М						Ш				
20	9.820	19.01	11:40 AM	1.50	0.73	0.64	15 min	11:55 AM	М	1.83	М	0.143	М						Ш				
21	8.290	14.23	10:10 AM	80.0	80.0	0.06	15 min																
22	6,300	12.08			0.00	0.00																	
23	7.870	12.12			0.00	0.00													Ш				
24	9.780	13.02	12:50 PM	2.33	0,36	0.20	15 min	4:30 PM	М	0.66	М	0.005	М				Ц		Ш				
25	8,010	12.86	12:20 AM	3.42	0.51	0.14	15 min	2:00 AM	М	2.17	М	0.026	М				Ц		Ш				
26	10.170	18.39	6:40 AM	0.66	0.48	0.34	15 min	9:20 PM	М	1.25	М	0.109	М						Ш				
27	9.950	15.07	5:30 AM	80,0	0.01	0.01	15 min				Ц												
28	6,740	11,97	6:30 PM	0.17	0.02	0.01	15 min										\Box						
29	9.670	12.79	1:20 AM	0.33	0.04	0.01	15 min																
30	6.120	12.17	7:25 AM	0.08	0.01	0.01	15 min								_		Ц						
31	9.080	18.16	and the state of	radition of the	0.00	0.00	1 11 11 11 11 11 11 11	w 2000 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -		ANAMES WERE CO.		v.060+014-0111				JE56-51-10-1		contact was see	Ш				
Totais:	314.68		20160112521 20161552	47.05	8.46	ndurkë së Palisarjasi	::::::::::::::::::::::::::::::::::::::	9	Da ys	28.75	(X)	0.862		0	Da ys	0.00	856 118	0.000					
Typed o														Telephone									
CERTIE	Ray Thompson, Utility Director													317-776-6353									
MTH AS	CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION. THE A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION. F THE PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGI												TON SUBMI MATION; TI	TTE IE I	D. BASED NFORMATI	ON:	MY INQUIF SUBMITTE	RY D					
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FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. Signature of Principal Executive Officer or Authorized Agent Date (mm/dd/yy)



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City:	: City of Noblesville									Page 2 of 4 Permit Number: IN0020168														
Facility: Noblesville Wastewater Utility								i destin		Public No	tific	ation Requ	iren	nents Met?	Υ									
Monitoring Period: May 2017									Check box if no CSO discharge occurred for the month:															
Design Peak Flow (Hourly) (MGD): 20 Design Flow (MGD): 10																								
	CSO Outfall No. 004			13	CSO Outfall No. 005							CS	O Outfall	No.	007	14		C	O Outfall	No.	800			
Day of Month	Time Discharge Began	a o ar	Event Duration (Hours)	H or E	Event Discharge (MG)	M or E	Discharge	ताश्≅		M or E	Event Discharge (MG)	M or E	Time Discharge Began	M or E	Duration	M of E	Event Discharge (MG)	M or E	Discharge	or H	Event Duration (Hours)	M or E	Event Discharge (MG)	M
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4	6:35 AM	М	11.75	М	0.139	М																		L
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9	6:50 AM	М	2,92	М	0,046	М				L				L				<u> </u>		_				ļ
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11	12:15 AM	М	0.42	М	0.011	М		Ц						\vdash				<u> </u>				_		L
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20	2:15 PM	1 1	0.25	M	0.003	M		_		_				\vdash										
21	11:55 AM	П	0.75	M	0.017	П	11:50 AM	M	0.33	М	0.013	M		H						Н		-		-
22	10:20 AM	M	0.25	М	0.003	M		H				H				_		H		H				\vdash
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24		Н		\exists		H		H		-				H				H	-	Н		_		
25	2:15 AM		0.42	, a	0.003	Ш						\square		-						H				
26	9:15 PM	ΙI				ΙI	9:10 PM	М	0,33	М	0.008	M					-			Н				Г
27	9.10 FM	10	0.00	140	0.017	H	V. 10 FM	181	0,00	, , , ,	0.000	171								Н				
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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT City: City of Noblesville										Page 3	of	4		P	em	nit Number: IN0020168								
Facility: Noblesville Wastewater Utility									WWW	3.95	CARLA HERAL	fica	tion Requi	ren	nents Met?	Y	SMY.							
Monitoring Period: May 2017											Check	c bo	ox if no C	SO	discharge	00	curred f	or th	e month:					
Design Peak Flow (Hourly) (MGD): 20 Design Flow (MGD): 10										460189											Y.V.			
a legica de la company de la c							O Outfall	010		CS	Outfall i	No.			VALUE OF	С	SO Outfal	l No.						
Day of Month	Time Discharge Began	M	Event	М	Event Discharge (MG)	H & H	Time Discharge	M or	Event	М		M of E	Time Oxscharge	or H	Event	м	Event Discharge (MG)	₩ or E	Discharge	or M	Event Duration (Hours)	М	Event Discharge (MG)	H or
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City: City of Noblesville	Page: 4 of 4	Permit Number: IN0020168						
Facility: Noblesville Wastewater Utility	Public Notification Requirements Met? Y							
Monitoring Period: May 2017	Check box if a	o CSO discharge occurred for the month:						
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 Rain event occurred that caused some combined sewer overflow lines to exceed capac	ity.							
2		<u></u>						
3	••							
4 Rain event occurred that caused some combined sewer overflow lines to exceed capac	ity.							
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9 Rain event occurred that caused some combined sewer overflow lines to exceed capac	ity.							
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Rain event occurred that caused some combined sewer overflow lines to exceed capace	ity.							
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Rain event occurred that caused some combined sewer overflow lines to exceed capac Rain event occurred that caused some combined sewer overflow lines to exceed capac								
26 Rain event occurred that caused some combined sewer overflow lines to exceed capac								
27	·/··							
28								
29								
30								
Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent		Telephone						
Ray Thompson, Utility Director		317-776-6353						
CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PRE								
WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND								
OF THE PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR. S, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AV								
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Signature of Principal Executive Officer or Authorized Agent	Communication (No. 1) and the second of the	Date (mm/dd/yy)						
1 thran		06/16/17						