

## 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											1 of	4		Permit Number: IN0020168							
Facility:	Facility: Noblesville Wastewater Utility											Public Notification Requirements Met? Y									
Monitor	Ionitoring Period; November 2017											Check box if no CSO discharge occurred for the month:									
Design	Peak Hou	rly Flow (N	(GD);	20	Design Av	rage Flow	(MGD):	10.0	11-6301-63												
wwt	P. Influen	Data	25-6865049700 68-65-866077	Pro	ecipitation E	ata	Section 5	300000000000000000000000000000000000000	С	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 Daily Precip. (Inches)	Peak Intensity (Inch/fur)	Measureme nt Interval (hr. 30 m, 15 m)	Time Discharge Began		Event Duration (Hours)	 	Event Discharg e (MG)	M or E		# & E	Event Duration (Hours)	ુ <b>ક</b>	Event Discharge (MG)	M or E		
1	7.710	19.27	6:10 AM	3.17	0.70	0.30	15 min	7:30 PM	М	1.66	М	0.061	М				Ц				
2	7.840	12.47	12:10 AM	0.42	0.06	0.03	15 min		Ш												
3	7.610	12.64	12:00 AM	0.42	0.08	0,09	15 min								L.						
4	8.050	12.26			0.00	0.00															
- 5	12.270	21,71	2:00 AM	4.33	1.65	0.79	15 min	3:50 PM	М	4.50	М	0.421	М						_		
6	7.740	21.11			0.00	0.00				:	Ш						_				
7	8.150	12.73	3:40 AM	0,17	0.02	0.02	15 min		Ш		Ц						Ш				
8	6,620	13.76			0.00	0.00													$\square$		
9	7.800	11.41			0.00	0.00			-		Н								$\sqcup$		
10	7.600	13.52			0.00	0.00					Н						$\sqcup$				
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12	7.880	12.73	1:00 PM	2.00	0.24	0.07	15 min		-		-								$\vdash\vdash$		
13	5.620	13.30			0.00	0.00					$\square$				H						
14	6,310	12,42			0.00	0.00												_			
15	6.570	12.73	8:40 AM	2.83	0.37	0.16	15 min										4		$\blacksquare$		
16	7.700	12.29			0.00	0.00			$\dashv$		-		_				$\dashv$				
17	8.160	9.84	10:15 PM	0.33	0.04	0.03	15 min												$\vdash \mid$		
18	13.730	23.39	12:30 AM	5.58	2.08	0.93	15 min	8:50 AM	М	4.25	М	0.481	M			:	$\dashv$		$\vdash\vdash$		
19	10.190	19.05		-	0.00	0.00			-								$\dashv$		$\vdash$		
20	7.550	18.83			0.00	0.00			-		H		$\dashv$				$\dashv$		$\vdash \vdash$		
21	8.070	13.05			0.00	0.00			-		-1		_				-		Н		
22	8.560	14.70			0.00	0.00			$\dashv$		$\vdash$						-		$\vdash$		
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26	7.640	13.16			0,00	0.00							_						Н		
20 27	7.770	13.44			0.00	0.00			$\dashv$		$\vdash$		Н		-		$\dashv$		$\vdash$		
28	6.060	12.33			0.00	0.00			$\dashv$		H				$\dashv$				H		
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Signature of Principal Executive Officer or Authorized Agent	Date (mm/dd/y	ry)
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## National Pollutant Discharge Elimination System (NPDES) CSO Monthly Report of Operation (CSO MRO) State Form 50546 (R2 / 5-13) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  City: City of Noblesville												Page 2 of, 4 Permit Number: IN0020168												
4643744404	Facility Noblesville Wastewater Utility												Public Notification Requirements Met? Y											
Monitoring Period: November 2017											Solida Nesta	Check box if no CSO discharge occurred for the month:												
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## National Pollutant Discharge Elimination System (NPDES) CSO Monthly Report of Operation (CSO MRO) State Form 50546 (RZ / 5-13) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: City of Noblesville												Page 3 of, 4 Permit Number: IN0020168												
Facility, Noblesville Wastewater Utility											Public Notification Requirements Met? Y													
Monitoring Period: November 2017										53.V 55.X	Check box if no CSO discharge occurred for the month:													
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Secility   November   2017   Check box if no CSO discharge occurred for the monits   Check box if no CSO discharge occurred for the monits   Check box if no CSO discharge occurred for the monits   Check box if no CSO discharge occurred for the monits   Comments (further explanation as to why each CSO event occurred)	City:	City of Nobles	viile				Page: 4 of 4	Permit Number: IN0020168				
Dosign Peak Hourly Flow (MSD): 20 Dosign Average Flow (MSD): 10.0    Dosign Average Flow (MSD): 10.0   Dosig	Facility	Noblesville W	astewater Utility			Public Notification Requirements Met? Y						
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Rain event occurred that caused some combined sewer overflow lines to exceed capacity.  19 20 21 22 23 24 25 26 27 28 29 30 29 30 31  Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent  Ray Thompson, Utility Director  Ray Thompson, Utility Director  Ray Thompson, Utility Director  Ray Thompson, Utility Director  17-76-6353  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; THE INFORMATION, THE INFORMATION, THE INFORMATION, THE INFORMATION, THE INFORMATION, INCLUDING THE POSSIBILITY OF FINE 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):  Date (mm/dd/yy):		<u> </u>										
20 21 22 23 24 25 26 27 28 29 30 30 31 Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent  Ray Thompson, Utility Director  Ray Thompson, Utility Director  Ray Thompson, Utility Director  Ray Thompson, Utility Director  1317-776-6353  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 KNOWLEGGE 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)		Rain event oc	curred that cause	d some	combined sewer overflow lines to ex-	ceed capacit	tv.					
21   22   23   24   25   26   27   28   29   29   29   29   29   29   29	19	j										
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23 24 25 26 27 28 29 30 31 Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent  Ray Thompson, Utility Director  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 PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION; THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEGGE 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 (min/dd/yy)		<b> </b>										
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