



**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: December 2020	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	WWTP Influent Data		Precipitation Data					CSO Outfall No. 002					CSO Outfall No. 003							
	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	7.60	9.89			0.00	0.00														
2	7.30	11.23			0.00	0.00														
3	6.94	10.98			0.00	0.00														
4	7.96	16.44			0.00	0.00														
5	7.48	11.34			0.00	0.00														
6	8.07	11.60			0.00	0.00														
7	6.22	13.26			0.00	0.00														
8	7.05	10.96			0.00	0.00														
9	7.15	9.54			0.00	0.00														
10	6.91	11.91			0.00	0.00														
11	9.22	10.30	10:15 PM	1.08	0.17	0.14	15 min													
12	7.25	21.91	12:10 AM	4.75	0.79	0.26	15 min	7:55 AM	M	0.83	M	0.005	M							
13	8.24	14.55			0.00	0.00														
14	5.98	11.72			0.00	0.00														
15	6.78	9.55			0.00	0.00														
16	7.37	11.75	10:20 AM	1.35	0.20	0.11	15 min													
17	7.65	10.50	8:15 PM	0.08	0.01	0.01	15 min													
18	8.74	11.24			0.00	0.00														
19	7.60	12.13			0.00	0.00														
20	8.21	13.58			0.00	0.00														
21	6.17	10.67	1:35 PM	0.08	0.01	0.01	15 min													
22	7.52	11.43			0.00	0.00														
23	8.49	15.06	3:30 PM	1.25	0.26	0.18	15 min													
24	7.11	15.66	12:00 AM	0.92	0.11	0.20	15 min													
25	7.71	10.94			0.00	0.00														
26	8.15	13.85			0.00	0.00														
27	7.21	13.53	8:05 PM	0.33	0.04	0.02	15 min													
28	6.28	11.26			0.00	0.00														
29	7.32	9.89			0.00	0.00														
30	7.82	13.68	7:15 AM	4.25	0.56	0.11	15 min													
31	8.66	12.34	11:40 AM	0.33	0.07	0.07	15 min													
Totals:	232.16			14.42	2.22			1	Days	0.83		0.005		0	Days	0.00		0		

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: *[Signature]* Date (mm/dd/yy): **01/19/21**



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Monitoring Period: December 2020										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. 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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CSO Outfall No. 009						CSO Outfall No. 010						CSO Outfall No.												
CSO Outfall No.						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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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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Day of Month	Comments (further explanation as to why each CSO event occurred)
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12	Rain event occurred that caused some combined sewer overflow lines to exceed capacity.
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Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent Ray Thompson, Utility Director	Telephone 317-776-6353
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Signature of Principal Executive Officer or Authorized Agent 	Date (mm/dd/yy) 01/19/21