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|  | **Sanitary Sewer Overflow 5-Day Follow Up Report**Division of Surface Water |
| **Report Submitted By** |
| **Date:** |       |
| **Facility name:** |       |
| **Ohio NPDES permit no.:** |       |
| **Period covered by report:** |       |
| **Contact person** |  |
|  | **Name:** |       |
|  | **Title:** |       |
|  | **Mailing address:** |       |
|  | **County:** |       |
|  | **Telephone:** | (   )    -      |
|  | **Email:** |       |
| **Signature required at end of form** |
| **Overflow Information** |
| **Event start date and time – if multiple locations, include information for each** |       |
| **Event end date and time** |       |
| **Location(s) the SSO – include unique ID number of one exists** |       |
| **Destination(s) of overflow** | [ ]  Basement or building [ ]  Ground [ ]  Storm sewer to receiving water [ ]  Directly to receiving water  |
| **Specific receiving water(s) if applicable** |       |
| **Estimated volume (million gallons) - if multiple locations, include volume for each** |       |
| **Sewer system component(s) from which release occurred** | [ ]  Manhole [ ]  Constructed overflow [ ]  Pipe crack [ ]  Pump station[ ]  Other (explain)       |
| **Cause(s) of overflow** | [ ]  Extreme weather [ ]  Debris in line[ ]  Other blockages[ ]  Other (explain)        | [ ]  Equipment failure[ ]  Roots[ ]  Line deterioration | [ ]  Power failure[ ]  Grease[ ]  Vandalism |
| **Steps taken or planned to eliminate and/or reduce the overflow – include schedule of major milestones** |       |
| **Steps taken or planned to prevent reoccurrence of the overflow(s) – include schedule of major milestones** |       |
| **Steps taken or planned to mitigate the impact(s) of the overflow(s) – include schedule of major milestones** |       |
| **Additional information (attach additional pages, maps, etc. as needed)** |       |
| **Certification:***I certify that I have personally examined and am familiar with the information in this report and all attachments. I believe that the information is true, accurate, and complete.* |
| **Name (typed):** |       | **Title:** |       |
| **Signature:** |  | **Date:** |  |