

Report User: MLan0001

SSO ID: 6926

Print Date: 6/14/2017

\* require for submission

require for completion

Report Form

Facility Name: **Gadsden City Of W River Wwtp**

Permit Number: **AL0053201**

\* Date/Time SSO Began: **6/14/2017 1:30:00 PM**

\* Is SSO currently ongoing?  Yes  No

\* Date/Time SSO Stopped: **6/14/2017 2:00:00 PM**

Report Estimated Volume as  Value  Range

Estimated Volume **400.00** gallons

Was the Department verbally notified?  Yes  No

(If report online, verbal notification is not required)

Source of Discharge Event:  manhole  lift station  broken line  
 cleanout  treatment plant  other

\* Location of Discharge(address,etc)  
(not required if " Lat/Long of Discharge " is reported)

Manhole #517  
901 Rainbow Drive

\* Lat/Long of Discharge  
(not required if " Location of Discharge " is reported)

Latitude: **33.9897**

Longitude: **-86.0027**

Known or Suspected Cause of Discharge

Grease Blockage

Ultimate Destination of Discharge

ground absorbed  
 creek or river (Provide name)   
 Un-named Tributary

storm drain  
 drainage ditch  
 backup into building/residence

other (describe)

Did the Discharge reach swimming water?  Yes  No

Monitoring of the Receiving Water Is

complete  ongoing  not necessary

Was the affected area

cleaned?  disinfected?

Describe corrective actions taken, plans to eliminate future discharges, and actions or plans to mitigate impacts to the environment and/or public health

Area cleaned, disinfected, line jetted and inspected. Site entered into GIS for subsequent evaluations.

Indicate Efforts to Notify Public

press release

(check all that apply)

\*

placement of signs

other

\* Date Public Was Notified: **6/14/2017**

notice not required because:

County Health Department

\* Date Other Officials Were Notified: **6/14/2017**

State Health Department

other

\* Date Other Officials Were Notified: **6/14/2017**

notice not required because:

Other States:

Were any public water supply intake locations affected?

Yes  No

**General Comment**

General Report Comment and Explanation