#### **Appendix B**

INSTRUCTIONS:

imprisonment for knowing violations.

SIGNATURE:

Complete all parts of this form and fax it to Office of Water Quality, Compliance Evaluation Section at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

To report a spill or if the release is resulting in a fish kill or other severe environmental damage, immediately report the release to the Emergency

Response Section	spili response line at:	(317) 233-7	745 or toll free with	nin Indiana at (888) 233-7	745.		
			GENER	AL INFORMATION			
Facility Name: North Vernon V	Vastewater Depa	rtment	County: Jennings		NPDES IN 002	Permit Number: 0451	
<b>5</b> 1		Phone Number: (812) 346-14			ime IDEM Notified: 2011 4:00 PM		
DELEAS				SE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:			ddress & Description	Receiving Area: (Ground, Stream	n Name, Storm Sewer, etc.)	
12/21/2011	12/21/2011	Norris A	orris Ave Lift Station Unnamed drainage s				
4:00 AM	9:30 AM						
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow	:
Check one: ⊠ Est		N		12.0 MGD		4.76 MGD	
Description of the E  ☑Untreated Relea	Bypass or Overflow: (€ se □Partially	<i>Check All Tha</i> / Treated Rel		of a Treatment Process	☐Blended \	Vith Final Effluent & Sample	d
None	ge to aquatic life or re	eceiving strea	am:			·	
Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches							
Additional Informati		and a total	of 1 12 inches	of rain in a 4 hour no	ried The reint	fall arosted flow that av	roodod
						all created flow that ex of approximately 200	
						l a negligible impact on	
Muscatatuck Ri		,	,				
Actions Taken to P	revent, Minimize, or M	litigate Dama	ige:				
		Ū					
Actions Taken or P	lanned to Prevent Rec	currence.					
Actions ration of the	iamica to i revent rec	odirerioe.					
		//	TTACH ADDITION	NAL SHEETS IF NECESS	ARV)		
		(A		TON AND SIGNATURE	, u.v.i <i>j</i>		
			ll attachments wer	e prepared under my dire		n in accordance with a syste	
manage the system	ात्रात्र qualified personi n, or those persons dir	ectly respons	jamer and evaluat sible for gathering	e trie information submitte the information, the inforn	a. Based on my ination submitted is	nquiry of the person or persons, to the best of my knowledg	nis wno je and

belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and

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<u> </u>	<u> </u>	<u> </u>		<u> </u>				
				AL INFORMATION				
Facility Name: North Vernon V	Vastewater Depar	County: Jennings			NPDES IN 002	Permit Number: 0451		
			Phone Number: (812) 346-14					
			RELEAS	SE INFORMATION				
Date & Time	Date & Time	Location R		ddress & Description	Receiv	ving Area:		
Release Began:	Release Stopped:		, Lift Station, Force				n Name, Storm Sewer, etc.)	
12/04/2011	12/05/2011	Norris A	e Lift Station		Unnamed drainage swale			
6:30 PM	10:30 PM							
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:		WWTP Peak Design Flow:	
M								
Check one: Est				Over 10.0 MGD			4.76 MGD	
⊠Untreated Relea		Treated Re	ease Bypass	of a Treatment Process		Blended V	Vith Final Effluent & Sampled	
•	ige to aquatic life or re	eceiving strea	ım:					
None								
	Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches							
Additional Informati	ion:	<u> </u>				· · · · · · · · · · · · · · · · · · ·		
							infall created flow that	
							eather flow on 12/04/11 of	
				1 of approximately 14	1,000C	FS due	to the rainfall event.	
Overflows had	a negligible impad	ct on the M	luscatatuck Riv	ver.				
A :: T   . D		P						
Actions Taken to P	revent, Minimize, or M	litigate Dama	ige:					
Actions Taken or P	lanned to Prevent Red	currence:						
		(A		NAL SHEETS IF NECESS.	ARY)			
Logrtify under none	ilty of law that this doo	ument and a		TON AND SIGNATURE	ction or o	supervisio	n in accordance with a system	
							nguiry of the person or persons who	

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	spili response line at.	(317) 233-77	45 or toll free with	iiii iiidialla at (000) 200-77	743.		
Facility Name:			GENERA County: Jennings	AL INFORMATION		S Permit Number: 020451	
Individual Making F Russell Vaught	ndividual Making Report: Russell Vaught Phone Number: (812) 346-1496			96	Date & Time IDEM Notified: 4/19/2011 4:35P.M.		
			RELEAS	SE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ad , Lift Station, Force	ddress & Description e Main, etc.)	Receiving Are (Ground, Stre	a: am Name, Storm Sewer, etc.)	
4/19/2011	4/19/2011	Norris Av	e Lift Station		Unnamed drainage swale		
8:00 AM	3:30 PM						
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check one: ⊠ Est		No a la All The	( 0 = 1 )	Over 9.0 MGD		4.76 MGD	
□ Description of the E □ Untreated Relea	Bypass or Overflow: (C se □Partially	Treated Rel		of a Treatment Process	□Blended	With Final Effluent & Sampled	
Describe any dama None	ge to aquatic life or re	ceiving strea	m:				
☐ Construction Re	Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches						
The sewer drain for repair. The weather flow or Muscatatuck Ri	Additional Information: The sewer drainage basin received a total of 1.47 inches of rain on 4/19/2011. We do have that was hit by lighty it is out for repair. The Muscatatuck River flow increased from the dry weather flow on 4/18/11 of approximately 500 CFS to a wet weather flow on 4/19/11 of approximately 8,000CFS due to the rainfall event. Overflows had a negligible impact on the Muscatatuck River.						
	revent, Minimize, or M		ge:				
Actions Taken or P	lanned to Prevent Red	currence:					
		(A		NAL SHEETS IF NECESS	ARY)		
			attachments wer			sion in accordance with a system	

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		(611) = 6	GENER	AL INFORMATION		
	Vastewater Depai	rtment	County: Jennings	AL INI ONWATION	NPDES IN 002	Permit Number: 0451
			Phone Number: (812) 346-14			Fime IDEM Notified: 011 4:35P.M.
			RELEAS	SE INFORMATION		
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ad , Lift Station, Force	ddress & Description e Main, etc.)	Receiving Area: (Ground, Strear	n Name, Storm Sewer, etc.)
4/23/2011	4/23/2011	Norris A	e Lift Station		Unnamed dr	ainage swale
1:00 AM	2:00 AM					
Amount of Flow Re	leased:	·		WWTP Flow During Rel	ease:	WWTP Peak Design Flow:
Check one: Est		Dhaala All Tha	. t A = = ( )	Over 12.0 MGD		4.76 MGD
⊠Untreated Relea		/Treated Re	ease □Bypass	of a Treatment Process	☐Blended \	Vith Final Effluent & Sampled
Describe any dama None	ge to aquatic life or re	eceiving strea	ım:			
Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches						
The sewer drain increased from	Additional Information:  The sewer drainage basin received a total of 5.88 inches of rain 4/20/2011 thur 4/25/2011. The Muscatatuck River flow increased from the dry weather flow on 4/19/11 of approximately 1000 CFS to a wet weather flow on 4/23/11 of approximately 15,000CFS due to the rainfall event. Overflows had a negligible impact on the Muscatatuck River.					
Actions Taken to Pi	revent, Minimize, or M	litigate Dama	ge:			
Actions Taken or P	Actions Taken or Planned to Prevent Recurrence:					
		(A		NAL SHEETS IF NECESS.	ARY)	
Loortifuundar nana	los effection de la difference		CERTIFICAT	TON AND SIGNATURE		

SIGNATURE	DATE:

INSTRUCTIONS:

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				, ,			
			GENER/	AL INFORMATION			
Facility Name: North Vernon V	Vastewater Depar	rtment	County: Jennings			NPDES IN 002	Permit Number: 0451
			Phone Number: (812) 346-14				
REI FAS			SE INFORMATION				
Date & Time	Date & Time	Location R		ddress & Description	Receiv	ring Area:	
Release Began:	Release Stopped:		e, Lift Station, Force				n Name, Storm Sewer, etc.)
4/27/2011	4/27/2011	Norris Av	e. Lift Station		Unnamed drainage swale		
5:00 AM	3:00 PM						
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:		WWTP Peak Design Flow:
Check one: X Est				Over 10 MGD			4.76 MGD
Description of the E ⊠Untreated Relea	Bypass or Overflow: (0 se Partially	Check All Tha Treated Re		of a Treatment Process		Blended V	Vith Final Effluent & Sampled
Describe any dama None	nge to aquatic life or re	eceiving strea	ım:				
	Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches						
The sewer drain of approximatel Overflows had 4/27/2011	Additional Information: The sewer drainage basin received a total of 1.47 inches. The Muscatatuck River flow increased from the flow on 4/26/11 of approximately 1000 CFS to a wet weather flow on 4/27/11 of approximately 18,000CFS due to the rainfall event.  Overflows had a negligible impact on the Muscatatuck River. We have had 7.35 inches of rain from 4/22/2011 to						
	revent, Minimize, or N		ge:				
Actions Taken or P	lanned to Prevent Red	currence:					
		(A		NAL SHEETS IF NECESS.	ARY)		
			ll attachments wer				n in accordance with a system

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		(011) 200	GENER	AL INFORMATION			
	Vastewater Depai	rtment	County: Jennings	AL INI ONWATION		NPDES Permit Number: IN 0020451	
			Phone Number: (812) 346-14			Fime IDEM Notified: 011 4:00P.M.	
			RELEAS	SE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ad , Lift Station, Force	ddress & Description e Main, etc.)	Receiving Area: (Ground, Strear	n Name, Storm Sewer, etc.)	
11/15/2011	11/15/2011	Northeas	t Lift Station		Unnamed dr	ainage swale	
12:00 AM	10:00 AM						
Amount of Flow Re	leased:	·		WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check one: Est		Dhaala All Tha	4 A = = b - \	Over 12 MGD		4.76 MGD	
⊠Untreated Relea		/Treated Rel	ease □Bypass	of a Treatment Process	☐Blended \	With Final Effluent & Sampled	
Describe any dama None	ge to aquatic life or re	eceiving strea	ım:				
Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches							
The sewer drain 11/15/11 of app Overflows had a	□ Construction Related □ Power Failure □ Equipment Failure □ Precipitation □ Inches  Additional Information:  The sewer drainage basin received a total of 2.30 inches. The Muscatatuck River flow increased from the flow on 11/15/11 of approximately 50 CFS to a wet weather flow on 11/15/11 of approximately 5,000CFS due to the rainfall event. Overflows had a negligible impact on the Muscatatuck River.						
Actions Taken to P	revent, Minimize, or M	litigate Dama	ge:				
Actions Taken or P	lanned to Prevent Red	currence:					
		(A	TTACH ADDITION	NAL SHEETS IF NECESS.	ARY)		
Loostify under none	to after that the	,		TON AND SIGNATURE			

SIGNATURE:	DATE:

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Response Section	spili response line at.	(317) 233-7	743 or toll free with	III IIIdialia at (000) 255-7	745.		
			GENER	AL INFORMATION			
Facility Name: North Vernon Wastewater Department			County: Jennings		NPDES IN 002	Permit Number: 0451	
Individual Making Report: Russell Vaught		Phone Number: (812) 346-14			ime IDEM Notified: 011 4:00P.M.		
			RELEAS	SE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:			ddress & Description	Receiving Area: (Ground, Stream	n Name, Storm Sewer, etc.)	
12/04/2011	12/05/2011	Northeas	st Lift Station		Unnamed dra	ainage swale	
6:30 PM	10:30 PM						
Amount of Flow Re	leased:	ı		WWTP Flow During Re	lease:	WWTP Peak Design Flow:	
Check one: ⊠ Est		Olera L. All The	- ( A ( )	Over 10.0 MGD		4.76 MGD	
⊠Untreated Relea		y Treated Re	lease □Bypass	of a Treatment Process	☐Blended V	Vith Final Effluent & Sampled	
Describe any dama None	ige to aquatic life or re	eceiving strea	am:				
Reason for Bypass	Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches						
			andre			Tredpitation menes	
The sewer drain capacity. The M flow on 12/05/1	Additional Information: The sewer drainage basin received a total of 2.440 inches. The rainfall created flows that exceeded the pump station's capacity. The Muscatatuck River flow increased from the flow on 12-04-2011 of approximately 200 CFS to a wet weather flow on 12/05/11 of approximately 14,000CFS due to the rainfall event. Overflows had a negligible impact on the Muscatatuck River.						
Actions Taken to P	revent, Minimize, or M	litigate Dama	ige:				
Actions Taken or P	lanned to Prevent Red	currence:					
		(Δ	TTACH ADDITION	NAL SHEETS IF NECESS	SARY)		
		,	CERTIFICAT	TION AND SIGNATURE	,		
L certify under pena	Ity of law that this doc	ument and a	Il attachments wer	e prepared under my dire	ction or supervisio	n in accordance with a system	

designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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

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Response Section	spili response line at.	(317) 233-77	45 or toll free with	iiii iiidiaila at (000) 233-77	745.			
Facility Name: North Vernon V	Vastewater Depar	rtment	GENERA County: Jennings	AL INFORMATION		ES Permit Number: 020451		
Russell Vaught (812) 346-1			Phone Number: (812) 346-14	96		& Time IDEM Notified: 1/ 2011 4:00 PM		
			RELEAS	SE INFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ad , Lift Station, Force	ddress & Description e Main, etc.)	Receiving Are (Ground, Stre	ea: eam Name, Storm Sewer, etc.)		
12/21/2011	12/21/2011	Northeas	t Lift Station		Unnamed drainage swale			
4:00AM	9:30 AM							
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:		
Check one: ⊠ Est				12.0 MGD		4.76 MGD		
⊠Untreated Relea		/Treated Rel	ease □Bypass	of a Treatment Process	□Blende	d With Final Effluent & Sampled		
None	ige to aquatic life or re	eceiving strea	ım:					
☐ Construction Re	Reason for Bypass/Overflow:  Construction Related Power Failure Equipment Failure Precipitation Inches							
The sewer drain from the flow of Overflows had	□ Construction Related □ Power Failure □ Equipment Failure □ Precipitation □ Inches  Additional Information:  The sewer drainage basin received a total of 1.12 inches of rain in 4 hour period. The Muscatatuck River flow increased from the flow on of approximately 200 CFS to a wet weather flow of approximately 12,000CFS due to the rainfall event.  Overflows had a negligible impact on the Muscatatuck River.							
Actions Taken to P	revent, Minimize, or M	litigate Dama	ge:					
Actions Taken or P	lanned to Prevent Red	currence:						
		<u>(</u> A		NAL SHEETS IF NECESS	ARY)			
			Il attachments wer			sion in accordance with a system		

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	op rooponeee a	(011) 200 11	.0 0. 10					
					AL INFORMATION			
Facility Name: North Vernon V	Vastewater Depar	rtment	County Jenn	•		NPDES Permit Number: IN 0020451		
Individual Making Report: Phone Number Russell Vaught (812) 346-14					Date & Time IDEM Notified: 4/27/2011 4:00P.M.			
ū			` ,					
Date & Time	Date & Time	Location D			SE INFORMATION	Desciving A	****	
Release Began:	Release Stopped:				ldress & Description e Main, etc.)	Receiving A (Ground, St		Name, Storm Sewer, etc.)
4/27/2011	4/27/2011	Northeas	t Lift S	station		Unnamed	d dra	ainage swale
5:00 AM	11:30 AM							
Amount of Flow Re	leased:				WWTP Flow During Rel	ease:		WWTP Peak Design Flow:
Check one: X Est					Over 10 MGD			4.76 MGD
Description of the E ⊠Untreated Relea	Bypass or Overflow: (C se	Check All Tha Treated Rel			of a Treatment Process	□Blend	led W	/ith Final Effluent & Sampled
	ige to aquatic life or re				or a reasonal record			That I mai Emderit a Campied
None		J						
Reason for Bypass					_			
☐ Construction Re		☐ Power Fa	ilure		Equipment Failure		$\boxtimes$	Precipitation Inches
Additional Informati		ad a total	of 1 47	inchae	The Museatatuck Pi	iver flow in	oroa	sed from the flow on 4/26/11
								ue to the rainfall event.
					ver. We have had 7.3			
4/27/2011	agg							
Actions Taken to P	revent, Minimize, or M	litinate Dama	ue.					
Actions rancin to the	10 0 0 111, 10 11111111120, 01 10	inigate Barria	go.					
Actions Taken or D	lanned to Prevent Red	ourronae:						
Actions Taken of F	ianned to Frevent Rec	currence.						
		//	TTACU	ADDITION	NAL SHEETS IF NECESS	ARV)		
		(A			TION AND SIGNATURE	MIT I)		
I certify under pena	lty of law that this doc	ument and a				ction or super	visior	n in accordance with a system

designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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:	DATE:	

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			GENER/	AL INFORMATION				
			County: Jennings			IN 002	Permit Number: 0451	
			Phone Number: (812) 346-14	96			ime IDEM Notified: 011 4:00P.M.	
			RELEAS	SE INFORMATION				
Date & Time	Date & Time	Location R		ddress & Description	Receiv	ing Area:		
Release Began:	Release Stopped:		, Lift Station, Force				n Name, Storm Sewer, etc.)	
12/04/2011	12/05/2011	Northwe	st Lift Station	Unna	Unnamed drainage swale			
4:30 AM	9:30 PM							
Amount of Flow Re	leased:	l .		WWTP Flow During Rel	ease:		WWTP Peak Design Flow:	
Check one: X Est				Over 10.0 MGD			4.76 MGD	
⊠Untreated Relea		Treated Re	ease Bypass	of a Treatment Process		Blended V	Vith Final Effluent & Sampled	
Describe any dama None	ge to aquatic life or re	eceiving strea	ım:					
Reason for Bypass	elated	☐ Power Fa	illure	☐ Equipment Failure		$\boxtimes$	Precipitation Inches	
exceeded the p weather flow or the Muscatatuc	nage basin receiv oump station's cap n 12-05-2011 of a k River.	pacity. The	Muscatatuck I ely 14,000CFS	River flow increased	from d	ry weatt	uinfall created flows that ther flow of 200 CFS to a wet is had a negligible impact on	
Actions Taken to Prevent, Minimize, or Mitigate Damage:								
Actions Taken or Planned to Prevent Recurrence:								
		(A	TTACH ADDITION	NAL SHEETS IF NECESS.	ARY)			
			ll attachments wer				n in accordance with a system	

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				, ,			
			GENER/	AL INFORMATION			
			County: Jennings			NPDES Permit Number: IN 0020451	
Individual Making F Russell Vaught			Phone Number: (812) 346-14	96			ime IDEM Notified: 2011 4:00 AM
			DELEAS	SE INFORMATION			
Date & Time	Date & Time	Location R		ddress & Description	Receiving Area:		
Release Began:	Release Stopped:		e, Lift Station, Force				n Name, Storm Sewer, etc.)
12/21/2011	12/21/2011	Northwe	st Lift Station		Unnar	med dra	ainage swale
4:00 AM	8:30 AM						
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:		WWTP Peak Design Flow:
Check one: 🛛 Est				12.0 MGD			4.76 MGD
Description of the E	Bypass or Overflow: (0 se □Partially	Check All Tha Treated Re		of a Treatment Process	□в	slended V	Vith Final Effluent & Sampled
Describe any dama None	nge to aquatic life or re	eceiving strea					·
Reason for Bypass	elated	☐ Power Fa	illure	☐ Equipment Failure			Precipitation Inches
exceeded the p weather flow or Muscatatuck Ri	nage basin receivoump station's cap n of approximately iver.	pacity. The	Muscatatuck I S due to the r		from dr	y weatt	fall created flows that ther flow of 200 CFS to a wet gible impact on the
Actions Taken to Prevent, Minimize, or Mitigate Damage:							
Actions Taken or Planned to Prevent Recurrence:							
		<u>(</u> A		NAL SHEETS IF NECESS.	ARY)		
			ll attachments wer				n in accordance with a system

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

INSTRUCTIONS:

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To report a spill or if the release is resulting in a fish kill or other severe environmental damage, immediately report the release to the Emergency Response Section spill response line at: (317) 233-7745 or toll free within Indiana at (888) 233-7745.

GENERAL INFORMATION								
Facility Name: North Vernon Wastewater Department			County: Jennings	AL INI ONWATION	NPDES IN 002	Permit Number: 0451		
Individual Making R Russell Vaught			Phone Number: (812) 346-14			Fime IDEM Notified: 1 1:15 P.M.		
			RELEAS	SE INFORMATION				
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ac , Lift Station, Force	ddress & Description e Main, etc.)	Receiving Area: (Ground, Stream	n Name, Storm Sewer, etc.)		
2/25/2011	2/25/2011	Northwes	st Lift Station		Unnamed dr	ainage swale		
Amount of Flow Re	leased:	·		WWTP Flow During Rel	ease:	WWTP Peak Design Flow:		
Check one: Est		Dhaala All Tha	4 A = = b - \	Over 7.0 MGD		4.76 MGD		
⊠Untreated Relea		/Treated Rel	ease □Bypass	of a Treatment Process	☐Blended \	Vith Final Effluent & Sampled		
Describe any dama None	ge to aquatic life or re	eceiving strea	ım:					
Reason for Bypass		□ Power Fa	ilure	☐ Equipment Failure	×	Precipitation Inches		
that is what cas approximately 5	nage basin receiv e the overflow. T	he Musca weather flo	tatuck River floow on 2/25/11	ow increased from the	e dry weather	so had a power failure and flow on 2/24/11 of to the rainfall event. Overflows		
Actions Taken to Prevent, Minimize, or Mitigate Damage:								
Actions Taken or Planned to Prevent Recurrence:								
		(A		NAL SHEETS IF NECESS. TON AND SIGNATURE	ARY)			
l as wife dan a sac	los effections de la della state		S-AHIHOAT	CAPAIND GIGINAT CINE		a in accordance with a sustain		

SIGNATURE:	DATE:

INSTRUCTIONS:

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			AENIED.				
Facility Name:			County:	AL INFORMATION	NPF	DES Permit Number:	
North Vernon Wastewater Department			Jennings			0020451	
Individual Making R	Report:		Phone Number:		Date & Time IDEM Notified:		
Russell Vaught			(812) 346-14	96	4/19	9/2011 4:35P.M.	
			RELEAS	SE INFORMATION			
Date & Time	Date & Time	Location R		Idress & Description	Receiving A	rea:	
Release Began:	Release Stopped:	of Manhole	, Lift Station, Force	e Main, etc.)	(Ground, St	ream Name, Storm Sewer, etc.)	
4/19/2011	4/19/2011	Northwe	st Lift Station		Unnamed	drainage swale	
6:00 AM	7:30 am						
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check one: X Est				Over 9.0 MGD		4.76 MGD	
Description of the E	Bypass or Overflow: (C se □Partially	Check All Tha Treated Rel		of a Treatment Process	□Blend	ed With Final Effluent & Sampled	
Describe any dama	ge to aquatic life or re	ceiving strea	ım:				
None							
Reason for Bypass							
☐ Construction Re		☐ Power Fa	ilure	Equipment Failure		□ Precipitation Inches	
Additional Informati		ad a total	of 1.47 inches	of rain on 4/10/2011	Wa da ha	ve that was hit by lighty it is out	
						f approximately 500 CFS to a wet	
						nad a negligible impact on the	
Muscatatuck Ri		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			nad a mognigione impact on the	
Actions Taken to Pi	revent, Minimize, or M	litigate Dama	ige:				
Actions Taken or P	lanned to Prevent Red	currence:					
, ione ione ione ion		Jul. 0.1001					
					15)()		
		(A		VAL SHEETS IF NECESS,	ARY)		
			CERTIFICAT	ION AND SIGNATURE			

SIGNATURE:	DATE:	_

INSTRUCTIONS:

imprisonment for knowing violations.

SIGNATURE:

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Response dection spin response line at. (517) 255-7745 or ton nee within indiana at (600) 255-7745.									
GENERAL INFORMATION									
			County: Jennings		NPDES IN 002	Permit Number: 0451			
Individual Making Report:			Phone Number:			Time IDEM Notified:			
Russell Vaught			(812) 346-14		4/25/20	O11 4:35P.M.			
			RELEAS	SE INFORMATION					
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ac e, Lift Station, Forc	ddress & Description e Main, etc.)	Receiving Area: (Ground, Stream	n Name, Storm Sewer, etc.)			
4/23/2011	4/23/2011	Northwe	st Lift Station		Unnamed dra	ainage swale			
1:00 AM	2:00 am								
Amount of Flow Re	leased:	l		WWTP Flow During Rel	lease:	WWTP Peak Design Flow:			
Check one: ⊠ Est				Over 12 MGD		4.76 MGD			
⊠Untreated Relea		/Treated Re	lease □Bypass	of a Treatment Process	☐Blended V	Vith Final Effluent & Sampled			
,	ige to aquatic life or re	eceiving strea	am:						
None									
	/0 "								
Reason for Bypass  Construction Re		☐ Power Fa	ailure	☐ Equipment Failure		Precipitation Inches			
Additional Informati	ion:								
						1 The Muscatatuck River flow			
				imately 1000 CFS to					
approximately 1	15,000CFS due to	the rainfa	all event. Overf	lows had a negligible	impact on the	Muscatatuck River.			
Actions Taken to P	revent, Minimize, or M	litigate Dama	ige:						
Actions Taken or P	lanned to Prevent Red	currence.							
7 tollorio Takon or 1	iamiou to i fovorit i to	Jan 101100.							
					4.51.0				
		(A		<i>NAL SHEETS IF NECESS</i> TION AND SIGNATURE	SARY)				
L certify under nena	Ity of law that this doc	ument and a			ction or supervisio	in in accordance with a system			

designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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

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response Section	spili response line at.	(317) 233-7	743 OF LOIL FIELD WILL	III IIIdialia at (000) 255-7	743.				
GENERAL INFORMATION									
,			County: Jennings		= = =	NPDES Permit Number: IN 0020451			
<b>5</b> 1		Phone Number: (812) 346-14			ime IDEM Notified: 011 4:00P.M.				
			RELEAS	SE INFORMATION					
Date & Time Release Began:	Date & Time Release Stopped:			ddress & Description	Receiving Area: (Ground, Stream	n Name, Storm Sewe	er, etc.)		
4/27/2011	4/27/2011	Northwe	st Lift Station		Unnamed dra	Unnamed drainage swale			
5:00 AM	11:30 AM								
Amount of Flow Re	eleased:	I		WWTP Flow During Re	lease:	WWTP Peak Desi	ງn Flow:		
Check one: Est	imated	Chock All The	ot Apply)	Over 10 MGD	4.76 MGD				
⊠Untreated Relea	se Partially	/ Treated Re	lease ☐Bypass	of a Treatment Process	☐Blended V	Vith Final Effluent &	Sampled		
None	age to aquatic life or re	eceiving strea	am:						
Reason for Bypass  Construction Re		☐ Power Fa	ilure	☐ Equipment Failure		Precipitation	Inches		
of approximatel	nage basin receiv ly 1000 CFS to a	wet weath	er flow on 4/27	The Muscatatuck R //11 of approximately ver. We have had 7.3	18,000CFS d	ue to the rainfall	event.		
Actions Taken to P	revent, Minimize, or M	litigate Dama	ige:						
Actions Taken or P	lanned to Prevent Red	currence:							
		(A		NAL SHEETS IF NECESS	SARY)				
L certify under pena	alty of law that this doc	ument and a		TON AND SIGNATURE	ction or supervisio	n in accordance with	a system		

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SIGNATURE:	DATE:

INSTRUCTIONS:

imprisonment for knowing violations.

SIGNATURE:

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Response Section	spili response line at.	(317) 233-77	45 or toll free with	iiii iiidiaila at (000) 233-77	745.				
Facility Name: North Vernon V	Vastewater Depar	tment	GENERAL INFORMATION County: Jennings			DES Permit Number: 0020451			
Individual Making Report: Russell Vaught			Phone Number: (812) 346-14	96		e & Time IDEM Notified: 6/2011 8:30 AM.			
			RELEAS	SE INFORMATION					
Date & Time Release Began:	Date & Time Release Stopped:		eleased From: (Ad , Lift Station, Force	ddress & Description e Main, etc.)	Receiving A (Ground, S	Area: tream Name, Storm Sewer, etc.)			
5/26/2011	5/26/2011	Northwes	st Lift Station		Unnamed	d drainage swale			
12:00 AM	2:00 AM								
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:			
Check one: ⊠ Est		No a la All Tha	(1001)	Over 4.75 MGD		4.76 MGD			
⊠Untreated Relea		Treated Rel	ease □Bypass	of a Treatment Process	□Blend	ded With Final Effluent & Sampled			
None	ge to aquatic life or re	ceiving strea	ım:						
Reason for Bypass		□ Power Fa	ilure	☐ Equipment Failure		☑ Precipitation Inches			
4 hour period. To cfs to a flow of	storm and lost pov The power was re 400 cfs during this	store and t	lift station. Sew the overflow st	ver drainage basin re		proximately .68 inches of rain in a tatuck river increased flow 800			
Actions Taken to Prevent, Minimize, or Mitigate Damage:									
Actions Taken or Planned to Prevent Recurrence:									
		<u>(</u> A		NAL SHEETS IF NECESS	ARY)				
			Il attachments wer			vision in accordance with a system my inquiry of the person or 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

INSTRUCTIONS:

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SIGNATURE:

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•	· · ·	` '		, ,			
				AL INFORMATION			
Facility Name: North Vernon Wastewater Department			County: Jennings			S Permit Number: 020451	
			Phone Number: (812) 346-14	96	Date & Time IDEM Notified: 5/1-09 at 11:10 A.M.		
			DELEAS	SE INCODMATION			
Date & Time	Date & Time	Location P		SE INFORMATION Idress & Description	Receiving Are		
Release Began:	Release Stopped:		e, Lift Station, Force			am Name, Storm Sewer, etc.)	
2/21/11	02/21/11	Southwe	st Lift Station		Unnamed o	drainage swale	
6:00 PM.	8:00 PM	Quaker I	Hills Subdivisio	n, North Vernon			
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check one: Est		Chools All The	14 Ann(14)	6.6 MGD		4.76 MGD	
⊠Untreated Relea		/Treated Re	ease Bypass	of a Treatment Process	□Blende	d With Final Effluent & Sampled	
Describe any dama None	ige to aquatic life or re	eceiving strea	ım:				
Reason for Bypass		☐ Power Fa	iluro	M Equipment Failure		□ Precipitation Inches	
Additional Informati		☐ Fower Fa	illule	□ Equipment Failure		☐ Precipitation Inches	
		annroxima	tely 1 25 inche	s of rain in a 6 hour i	neriod The r	ainfall created flows that	
						er flow of 75 cfs to a wet weather	
	ofs during this eve		maccatatach .	invol intorodood monit	a ary would	in how or no old to a mot mounter	
11011 01 10,000 0	ord during tine ove	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Actions Taken to P	revent, Minimize, or M	litigate Dama	ige:				
none							
Actions Taken or D	lanned to Prevent Red	currence.					
Actions raken of t	iamica to i revent itel	ouricitoo.					
		(A	TTACH ADDITION	NAL SHEETS IF NECESS	ARY)		
		,	CERTIFICAT	ION AND SIGNATURE	,		
I certify under pena	ilty of law that this doc	ument and a	II attachments were	e prepared under my dired	ction or supervi	sion in accordance with a system	

designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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

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		, ,		, ,				
			GENER/	AL INFORMATION				
Facility Name:   County:   North Vernon Wastewater Department   Jennings			County: Jennings			NPDES Permit Number: IN 0020451		
			Phone Number: (812) 346-14				ime IDEM Notified: 1 1:15 P.M.	
			REI EAS	SE INFORMATION				
Date & Time	Date & Time	Location R		ddress & Description	Receiv	ing Area:		
Release Began:	Release Stopped:		, Lift Station, Force				n Name, Storm Sewer, etc.)	
2/24/11	02/25/11	Southwe	est Lift Station		Unnai	med dra	ainage swale	
Amount of Flow Re	leased:	l		WWTP Flow During Rel	ease:		WWTP Peak Design Flow:	
Check one: 🛛 Est				7.0 MGD			4.76 MGD	
Description of the E  ⊠Untreated Relea	Bypass or Overflow: (0 se Partially	Check All Tha Treated Re		of a Treatment Process		Blended V	Vith Final Effluent & Sampled	
Describe any dama	ge to aquatic life or re	eceiving strea	im:					
Reason for Bypass  Construction Re		☐ Power Fa	ilure				Precipitation Inches	
exceeded the p	e basin received a nump station's cap	acity The	Muscatatuck i				nfall created flows that flow of 500 cfs to a wet	
weather flow of	10,000 cfs during	this even	t.					
	revent, Minimize, or M	litigate Dama	ge:					
none								
-								
Actions Taken or P	lanned to Prevent Red	currence:						
		<u>(</u> A		NAL SHEETS IF NECESS.	ARY)			
Loomifuunden	the of love the state is a decident			ION AND SIGNATURE	otion	unar isi	n in accordance with a sustain	
							n in accordance with a system	

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GENERAL INFORMATION							
		County: Jennings		NPDES Permit Number: IN 0020451			
Individual Making R Russell Vaught			Phone Number: (812) 346-14	Phone Number: (812) 346-1496		Date & Time IDEM Notified: 4/12/11 3:00 p.m	
			RELEAS	SE INFORMATION			
Date & Time Release Began:	Date & Time Date & Time Location Released From: (Address & Description Receiving Area:				r, etc.)		
04/11/11	04/11/11	Southwe	st Lift Station		Unnamed dra	ainage swale	
6:00 p.m.	8:00 p.m.						
Amount of Flow Re	leased:	I.		WWTP Flow During Rel	ease:	WWTP Peak Desig	ın Flow:
Check one: ⊠ Est				5.0 MGD		4.76 MGD	
⊠Untreated Relea		Treated Re	ease Bypass	of a Treatment Process	☐Blended \	With Final Effluent & \$	Sampled
Describe any dama None	ige to aquatic life or re	eceiving strea	ım:				
December Dyman	(Overflow)						
Reason for Bypass	elated	☐ Power Fa	illure	□ Equipment Failure	$\boxtimes$	Precipitation	Inches
Additional Information: Sewer drainage basin received approximately 2.30 inches of rain in a 12 hour period. The rainfall created flows that exceeded the pump station's capacity							
Actions Taken to Prevent, Minimize, or Mitigate Damage:							
none							
Actions Taken or Planned to Proyent Requirement							
Actions Taken or Planned to Prevent Recurrence:							
(ATTACH ADDITIONAL SHEETS IF NECESSARY)							
l contifuendor nono	CERTIFICATION AND SIGNATURE						

SIGNATURE:	DATE:

INSTRUCTIONS:

imprisonment for knowing violations.

SIGNATURE:

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CENERAL INFORMATION						
				AL INFORMATION		
			County: Jennings		NPDES Permit Number: IN 0020451	
Individual Making R Russell Vaught			Phone Number: (812) 346-1496		Date & Time IDEM Notified: 4/19/2011 4:35 PM.	
•			DELEAS	SE INCORMATION		
Date & Time	Date & Time	Location P		SE INFORMATION	Possiving Aro	2.
Release Began:	Release Stopped:		cation Released From: (Address & Description Manhole, Lift Station, Force Main, etc.)  Receiving Area: (Ground, Stream Name, Storm Sewer, etc.)			
4/19/11	04/19/11	Southwe	st Lift Station		Unnamed drainage swale	
6:30 PM.	8:30 PM	Quaker I	Hills Subdivisio	n, North Vernon		
Amount of Flow Re	leased:			WWTP Flow During Rel	ease:	WWTP Peak Design Flow:
Check one: Est		Dhaala All Tha	. ( A = =   )	9.0 MGD		4.76 MGD
		/Treated Rel	ease Bypass	of a Treatment Process	□Blended	With Final Effluent & Sampled
Describe any dama None	ige to aquatic life or re	eceiving strea	ım:			
Reason for Bypass		☐ Power Fa	ilure			☑ Precipitation Inches
Additional Informati			and 0	Z Equipment and o		24 1 1001phation money
Sewer drainage	e basin received	approxima	tely 1.47 inche	s of rain in a 6 hour p	period. The r	ainfall created flows that
exceeded the pump station's capacity. The Muscatatuck river increased from a dry weather flow of 500 cfs to a wet						
weather flow of 8,000 cfs during this event.						
Actions Taken to Drayant Miniming or Mitigate Damage.						
Actions Taken to Prevent, Minimize, or Mitigate Damage:						
none						
Actions Taken or Planned to Prevent Recurrence:						
(ATTACH ADDITIONAL SHEETS IF NECESSARY)						
Lagriff	les of less than 1995			ION AND SIGNATURE		
I certify under pena	ilty of law that this doc	ument and a	II attachments wer	e prepared under my dired	ction or supervis	ion in accordance with a system

designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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

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SIGNATURE:

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Response Section spill response line at. (517) 255-7745 of toll free within indiana at (600) 255-7745.							
			GENER	AL INFORMATION			
		County: Jennings		NPDES Permit Number: IN 0020451			
Individual Making F Russell Vaught			Phone Number: (812) 346-14	Phone Number: (812) 346-1496		Date & Time IDEM Notified: 4/19/2011 4:35 PM.	
			RELEAS	SE INFORMATION			
Date & Time Release Began:	Date & Time Release Stopped:			ddress & Description	Receiving Area: (Ground, Stream	m Name, Storm Sewe	er, etc.)
4/20/2011	04/20/11	Southwe	st Lift Station		Unnamed drainage swale		
12:00 AM.	2:00 AM	Quaker I	Hills Subdivisio	n, North Vernon			
Amount of Flow Re	leased:	L		WWTP Flow During Re	lease:	WWTP Peak Desi	gn Flow:
Check one: Est		Dhaala All Tha	- t A t - )	9.0 MGD		4.76 MGD	
		/Treated Re	lease □Bypass	of a Treatment Process	☐Blended \	With Final Effluent &	Sampled
Describe any dama None	ge to aquatic life or re	eceiving strea	am:				
Reason for Bypass		⊠ Power Fa	ailure	☐ Equipment Failure		Precipitation	Inches
Additional Informati							
We had a bad s	storm and lost po	wer to the	lift station . Se	wer drainage basin r	eceived appro	ximately 2.0 inch	es of rain in a
6 hour period. The power was restore and the over flow stop in about 30 min. The Muscatatuck river increased from a dry weather flow of 500 cfs to a wet weather flow of 10,000 cfs during this event.							
Thousand how or odd to a not would how of rojood do dailing time ordina							
Actions Taken to Prevent, Minimize, or Mitigate Damage:							
none							
Astissa Talan as Diagnad to December December 1							
Actions Taken or Planned to Prevent Recurrence:							
(ATTAON ADDITIONAL CUESTO IS NEOSCOADY)							
(ATTACH ADDITIONAL SHEETS IF NECESSARY)  CERTIFICATION AND SIGNATURE							
L certify under pena	Ity of law that this doc	ument and a		ON AND SIGNATURE	ction or supervisio	on in accordance with	a evetem

designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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

INSTRUCTIONS:

Complete all parts of this form and fax it to Office of Water Quality, Compliance Evaluation Section at (317) 232-8637 or 232-8406. This report will satisfy the Office of Water Quality (OWQ) telephone and written bypass / overflow reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

To report a spill or if the release is resulting in a fish kill or other severe environmental damage, immediately report the release to the Emergency Response Section spill response line at: (317) 233-7745 or toll free within Indiana at (888) 233-7745.

GENERAL INFORMATION							
		County: Jennings		NPDES Permit Number: IN 0020451			
Individual Making R Russell Vaught			Phone Number: (812) 346-14	Phone Number: (812) 346-1496		Date & Time IDEM Notified: 4/19/2011 4:35 PM.	
			RELEAS	SE INFORMATION			
Date & Time Release Began:	Date & Time Date & Time Location Released From: (Address & Description Receiving Area:			: m Name, Storm Sewer, etc.)			
4/23/2011	04/22311	Southwe	st Lift Station		Unnamed drainage swale		
1:00 AM.	2:00 AM	Quaker I	Hills Subdivisio	n, North Vernon			
Amount of Flow Re	leased:	I		WWTP Flow During Rel	ease:	WWTP Peak Design Flow:	
Check one: ⊠ Est				12.0 MGD		4.76 MGD	
⊠Untreated Relea		/Treated Rel	ease □Bypass	of a Treatment Process	☐Blended '	With Final Effluent & Sampled	
Describe any dama None	ige to aquatic life or re	eceiving strea	ım:				
Reason for Bypass	/Overflow: elated	☐ Power Fa	illure	☐ Equipment Failure	<u> </u>	Precipitation Inches	
Additional Information: The Sewer drainage basin received approximately 5.88 inches of rain from 4/20/2011 to 4/25/2011 in that period. The Muscatatuck river increased from a dry weather flow on 4/19/2011 of 1000 cfs to a wet weather flow on 4/23/2011 of 15,000 cfs during this event.							
Actions Taken to Prevent, Minimize, or Mitigate Damage: none							
Actions Taken or Planned to Prevent Recurrence:							
(ATTACH ADDITIONAL SHEETS IF NECESSARY)							
Loortify under none	CERTIFICATION AND SIGNATURE						

SIGNATURE:	DATE: