



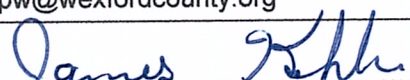
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
WATER RESOURCES DIVISION  
**Report of Discharge**

*This information is required to be submitted under Michigan Act 451, Public Acts of 1994, as amended, Part 31, Section 324.3112a. Potential fines and penalties specified in Part 31 apply to this requirement.*

**Type of Discharge Being Reported**

- ☐ **RTB Discharge:** The reported discharge was from a retention and treatment basin (RTB), or equivalent structure, which serves a municipal combined sewer system. The RTB or equivalent structure is designed in accordance with approved plans, and operated in accordance with criteria in a permit, order, or other enforceable document issued by the Michigan Department of Environmental Quality (MDEQ) or by court action. This type of discharge is commonly referred to as an RTB discharge.
- ☐ **CSO Discharge:** The reported discharge is from a municipal combined sewer system and is not from a facility which is designed to meet final performance criteria specified in a permit, order, or other enforceable document. The discharge is associated with wet weather events. This type of discharge is commonly referred to as a combined sewer overflow (CSO).
- ☒ **SSO Discharge:** The reported discharge is from a private or municipal separate sewer collection system (not wastewater treatment plant) during wet or dry weather, or a dry weather discharge from a municipal combined sewer collection system. This type of discharge is commonly referred to as a sanitary sewer overflow (SSO).
- ☐ **Other:** The reported discharge was of untreated or partially treated sewage (definition in Section 3112a) which is not characterized by one of the conditions listed above. A detailed description of the discharge is provided below.

**Report Submitted By**

Name	Jim Kohler	
Position	Operator/Tech 2	
Address	3161 S. Lake Mitchell Dr.	
City, State, Zip code	Cadillac, MI 49601	
County	Wexford	
Telephone No.	231-775-0155	
E-mail address	dpw@wexfordcounty.org	
Signature		Date 9-2-14

**Sewer System Owner**

Name	Wexford County DPW
Address	3161 S. Lake Mitchell Dr
City, State, Zip Code	Cadillac, MI 49601
County	Wexford

**Discharge Information (see instructions for completing this section)**

Volume discharged (specify units, either gallons or million gallons)	6000 Gals
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Quality of discharge(s) (such as raw sewage, diluted raw sewage, partially treated, RTB, blended, etc.)	Raw sewage			
Reason for the discharge(s)	The sewer pump station at 1754 E. Lake Mitchell Dr. is under rehabilitation and a cam lock connector came loose on the bypass pumping.			
Location of the discharge(s)	1754 E. Lake Mitchell Dr. Cadillac, MI 49601			
Surface waters impacted by the discharge(s)	The overflow ran into the swamp between E. Lake Mitchell and M-115; water flows southeast through the swamp, then through the culvert/ditch in to Lake Mitchell.			
Land impacted by the discharge(s)	Immediately surrounding the pump station			
Discharge event start date and time	Date: 9-1-14 Time: Before 10:07 AM			
Discharge event end date and time	Date: 9-1-14 Time: 12:40 PM			
Is the sewer system owner in compliance or not in compliance with applicable discharge permits, laws, rules, and orders?	<input checked="" type="checkbox"/> In compliance <input type="checkbox"/> Not in compliance		If not in compliance, please explain:	
Initial notification date and time (if no notice or >24 hrs of discharge, please explain at the end of the form)	<u>MDEQ</u> Date: 9-2-14 Time: 11:50 AM <i>Fixed 1:47 PM</i>		<u>Local Health Department</u> Date: 9-2-14 Time: 10:50 AM <i>Called then returned my call 1:15 PM</i>	<u>Daily Local Newspaper</u> Date: 9-2-14 Time: 11:45 AM <i>Called and talked to Jeff</i>
Notification that the discharge has concluded (if the discharge was still occurring at the initial notification)	<u>MDEQ</u> Date: Time: <input checked="" type="checkbox"/> Not applicable		<u>Local Health Department</u> Date: Time: <input checked="" type="checkbox"/> Not applicable	<u>Daily Local Newspaper</u> Date: Time: <input checked="" type="checkbox"/> Not applicable
Precipitation type and measurements, if applicable	Type:	Amount:	Start Date/Time:	End Date/Time:
Name of wastewater treatment facility normally receiving sewage	Cadillac Wastewater Treatment Plant			
Was this discharge disinfected to meet fecal coliform limitations?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable			
Actions taken to minimize the impact from the discharge(s), if any	The contractor doing the work was contacted to determine the malfunction and make repairs. Elmer's vacuumed approximately 500 gallons of wastewater from the overflow site and was hauled away.			
Actions taken or that will be taken to prevent	Elmer's secured the cam lock connector on the bypass line with wire.			





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reoccurrence of the discharge(s), if any	
Results of <u>E. coli</u> testing (select one)	<input type="checkbox"/> Results pending (provide expected date of submittal) <input type="checkbox"/> Results attached <input checked="" type="checkbox"/> Testing waived by local health department <input type="checkbox"/> Not applicable no discharge to surface waters
Additional Information (Check any box that is appropriate)	<p><input checked="" type="checkbox"/> (1) The reported discharge was caused by a party other than this sewer system owner and over which this owner had no control or knowledge of the actions which resulted in the discharge. Reporting and corrective actions by this sewer system owner were conducted in a timely manner upon becoming aware of the condition.</p> <p><input type="checkbox"/> (2) The reported discharge was from an RTB, <u>and</u> the level of treatment provided is in full compliance with <u>final</u> performance criteria in a permit, order, or other enforceable document issued or entered between the MDEQ and the discharger, or by court action.</p> <p><input type="checkbox"/> (3) The reported discharge was of partially treated sewage that bypassed one or more treatment units at the wastewater treatment facility.</p> <p><input type="checkbox"/> All effluent limits were met during the event</p> <p><input type="checkbox"/> All effluent limits were not met during the event (please explain)</p>
Additional information (attach sheets as necessary)	<p>A local property owner noticed the overflow that morning and reported it around 10:00 a.m. The DPW was paged out at 10:07 a.m. and was on site by 10:15 a.m. DPW staff immediately notified Elmer's of the overflow and their crew arrived on site at 11:50 a.m.</p> <p>The DPW is unable to verify the exact time the overflow began. Elmer's was on site Sunday evening, 8-31-14, and everything was intact.</p> <p>The DPW Operator believes the overflow was reported fairly close to the time the DPW staff was notified due to the heavy foot traffic in the area from local property owners.</p>