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Submission HNT-T6AK-1TF68 Revision 2 Form Version 1.10

This step allows you to review the form to confirm the form is populated completely and accurately, prior to certification and submission.

Please note: Any work you perform filling out a form will not be accessible by EGLE staff or the public until you actually submit the form in the 'Certify & Submit' step.

## REPORT DETAILS

**Is this the initial or final discharge report?**

Initial

**Site/Facility Name:**

Lake Mitchell Sewer Authority (former Wexford Co DPW) CM

**Permit Number (if applicable):**

None Specified

**Sewer System Owner**

## None Specified

# Lake Mitchell Sewer Authority

**Ext.**

None Specified

operationsoffice@lakemitchellsewer.com

231-775-0156

US

Cadillac MI 49601

### Longitude

-85.5088

## DISCHARGE DETAILS

1

## SSO Discharge

NO

## Grinder Pump Station 10A

**Outfall Description**

Minor Sewer Discharge

**Outfall Location****Latitude****Longitude**

44.2686339

-85.49542939999998

**Has the discharge ended?**

YES

**Volume Discharged**

25

**Unit**

Gallons

**Was the volume estimated?**

Yes

**Quality of Discharge**

Diluted Raw Sewage

**Please describe the discharge, including the reason for Discharge**

On Saturday, October 26, 2019, the on-call Sewer Technician received a call at 9:45 a.m. to respond to a sewer alarm at 126 Lily Street, grinder pump station 10A. The technician was on site by 10:10 a.m. The Technician noted the station was not discharging upon his arrival, however observed a small amount of dark water on the tank lid and noted that the wet well was full. The technician further documented there was no standing water and/or debris on the surrounding ground. The station never discharged while the technician was on site. After troubleshooting the station's electrical panel, the Technician determined it was a malfunction with a component (35-amp main fuse) that created the temporary power loss to the grinder pumps. This prevented the grinder pumps from moving the sewer out of the wetwell and into the transmission line.

**Was the land or surface water impacted by the discharge?**

Land impacted only

**Name/description of the land impacted:**

GPS 10A

**Discharge Event Start****Date**

10/26/2019

**Time**

9:45 AM

**Discharge Event End****Date**

10/26/2019

**Time**

10:10 AM

Organization	Date	Time
Local Health Department	10/26/2019	2:30 PM
Daily Local Newspaper	10/26/2019	2:30 PM

Organization	Date	Time
Local Health Department	10/26/2019	2:30 PM
Daily Local Newspaper	10/26/2019	2:30 PM

### Report Submitter

## None Specified

**Title**  
Project Manager

**Organization Name**  
Lake Mitchell Sewer Authority

Phone Type	Phone Number	Ext.
Business	231-775-0155	None Specified

**Email**  
operationsoffice@lakemitchellsewer.com

**Fax**  
231-775-0156

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Cadillac MI 49601  
United States

<https://miwaters.deq.state.mi.us/nform/app/#/submissionwizard/e1770858-54bd-4c95-9f6e-fbef0dbd2f9c/3?returnContext=Home&returnUrl=https%3A%2F%2Fmiwaters.deq.state.mi.us%2F...> 4/5

As a precautionary measure, the sewer Technician broadcast lime, and taped off the surrounding area.

No files uploaded

## None Specified

