



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER RESOURCES DIVISION

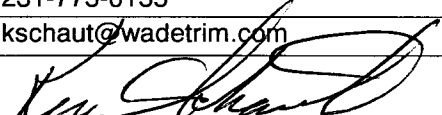
Report of Discharge

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	Kenneth Schaut	
Position	Project Manager	
Address	3161 South Lake Mitchell Drive	
City, State, Zip code	Cadillac, MI 49601	
County	Wexford County	
Telephone No.	231-775-0155	
E-mail address	kschaut@wadetrim.com	
Signature		Date 5/23/17

Sewer System Owner

Name	Lake Mitchell Sewer Authority
Address	3161 South Lake Mitchell Drive
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)	Approximately 3,000 - 5,000 gallons.
--	--------------------------------------



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER RESOURCES DIVISION

Report of Discharge

Quality of discharge(s) (such as raw sewage, diluted raw sewage, partially treated, RTB, blended, etc.)	Partially Diluted Raw Sewage. This was due to infiltration and was determined by the elevated flows.			
Reason for the discharge(s)	Consumer Energy had a power outage that occurred in part of the LMSA sewer system and other areas in Cadillac as well. There was a storm with heavy rain. Power outage occurred 8:48 p.m. and was restored at 9:43 p.m.			
Location of the discharge(s)	1754 East Lake Mitchell Drive, Cadillac, MI 49601			
Surface waters impacted by the discharge(s)	NO			
Land impacted by the discharge(s)	Yes. The sewer was contained around the lift station area.			
Discharge event start date and time	Date: 5/23/17 Time: 9:30 p.m.			
Discharge event end date and time	Date: 5/23/17 Time: 10:00 p.m.			
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: 5/24/17 Time: 9:30 a.m.		<u>Local Health Department</u> Date: 5/24/17 Time: 2:20 p.m.	<u>Daily Local Newspaper</u> Date: 5/24/17 Time: 2:20 p.m.
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: Rain	Amount: .87	Start Date/Time: 5/23/17 approx. 5:30 p.m.	End Date/Time: 5/23/17 approx. 6:15 p.m.
Name of wastewater treatment facility normally receiving sewage	City of Cadillac Wastewater Treatment Plant			
Was this discharge disinfected to meet fecal coliform limitations?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable			
Actions taken to minimize the impact from the discharge(s), if any	The Operation & Maintenance Technicians responded to an alarm at SPS 1B (sewer lift station). Upon arrival, the Technician's noticed there was a Consumer's Energy power outage around part of the LMSA (Lake Mitchell Sewer Authority) sewer system. When the power was restored, it created a high-water alarm at the 1B lift station due to the surge of sewer coming into the			



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER RESOURCES DIVISION

Report of Discharge

	lift station.
Actions taken or that will be taken to prevent reoccurrence of the discharge(s), if any	The discharge event occurred due to an unscheduled Consumer's Energy power outage and has been reported to DEQ, per the requirements.
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 type="checkbox"/> Testing waived by local health department <input checked="" 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>I would like to reiterate that the 3,000 – 5,000 gallons of sewage discharged was a very high estimate. The sewage was very diluted due to the amount of rain and the elevated flows. The area that was impacted, has been raked and lime was broadcast over the area.</p> <p>If any further action is needed, please advise.</p>