

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the [NPDES eReporting Help Desk](#) for further guidance. Please note that EPA may contact you after you submit this report for more information.

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Permit																		
<b>Permit #:</b>	IL0028321			<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR				<b>Facility:</b>	SANITARY DISTRICT OF DECATUR MAIN STP								
<b>Major:</b>	Yes			<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522				<b>Facility Location:</b>	501 DIPPER LANE DECATUR, IL 62522								
<b>Permitted Feature:</b>	001 External Outfall			<b>Discharge:</b>	001-0 STP OUTFALL													
Report Dates & Status																		
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24			<b>DMR Due Date:</b>	09/25/24				<b>Status:</b>	NetDMR Validated								
Considerations for Form Completion																		
W1150150004 ; DMF LOAD LIMITS DISPLAYED.																		
Principal Executive Officer																		
<b>First Name:</b>	Kent			<b>Title:</b>	Executive Director				<b>Telephone:</b>	217-422-6931								
<b>Last Name:</b>	Newton																	
No Data Indicator (NODI)																		
<b>Form NODI:</b>	--																	
Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3				Value 3
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	1	--	Sample	=	6.9	=	6.81	=	6.7	19 - mg/L	0	02/DA - 2 Days Every Week	GR - GRAB			
					Permit Req.	>=	6.0 MO AV MN	>=	4.5 MN WK AV	>=	4.0 DAILY MN	19 - mg/L						
					Value NODI													
00400	pH	1 - Effluent Gross	0	--	Sample	=	7.85			=	8.29	12 - SU	0	02/DA - 2 Days Every Week	GR - GRAB			
					Permit Req.	>=	6.0 MINIMUM			<=	9.0 MAXIMUM	12 - SU						
					Value NODI													
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample	=	727.0	=	1163.0	26 - lb/d	=	3.0	=	5.0	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
					Permit Req.	<=	26063.0 MO AVG	<=	46913.0 WKLY AVG	26 - lb/d	<=	25.0 MO AVG	<=	45.0 WKLY AVG	19 - mg/L			
					Value NODI													
00600	Nitrogen, total [as N]	1 - Effluent Gross	0	--	Sample					=	12.5	=	12.5	19 - mg/L	0	01/30 - Monthly	CP - COMPOS	
					Permit Req.					Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L					
					Value NODI													
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	7	--	Sample	=	111.0	=	172.0	26 - lb/d	=	0.44	=	0.52	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
					Permit Req.	<=	1147.0 MO AVG	<=	3128.0 DAILY MX	26 - lb/d	<=	1.1 MO AVG	<=	3.0 DAILY MX	19 - mg/L			
					Value NODI													
00610	Nitrogen, ammonia total [as N]	8 - Other Treatment, Process Complete	0	--	Sample			=	141.0	26 - lb/d			=	0.48	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
					Permit Req.			<=	2919.0 WKLY AVG	26 - lb/d		<=	2.8 WKLY AVG	19 - mg/L				
					Value NODI													
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample					=	15.6	=	17.6	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS	
					Permit Req.					Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L					
					Value NODI													
00940	Chloride [as Cl]	1 - Effluent Gross	0	--	Sample							=	514.0	19 - mg/L	0	01/30 - Monthly	CP - COMPOS	
					Permit Req.							Req Mon DAILY MX	19 - mg/L					
					Value NODI													
00945	Sulfate, total [as SO4]	1 - Effluent Gross	0	--	Sample							=	344.0	19 - mg/L	0	01/30 - Monthly	CP - COMPOS	
					Permit Req.							Req Mon DAILY MX	19 - mg/L					
					Value NODI													
01067	Nickel, total [as Ni]	1 - Effluent Gross	0	--	Sample	=	3.2			26 - lb/d	=	0.013		19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS	
					Permit Req.	<=	40.0 MO AVG			26 - lb/d	<=	0.0381 MO AVG		19 - mg/L				
					Value NODI													

					Value NODI														
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample = 29.06 = 51.48 03 - MGD													0	99/99 - Continuous
					Permit Req. Req Mon MO AVG Req Mon DAILY MX 03 - MGD														99/99 - Continuous
					Value NODI														
50060	Chlorine, total residual	1 - Effluent Gross	0	--	Sample < 0.011 19 - mg/L														02/DA - 2 Days Every Week GR - GRAB
					Permit Req. <= 0.05 DAILY MX 19 - mg/L														02/DA - 2 Days Every Week GR - GRAB
					Value NODI														
74055	Coliform, fecal general	1 - Effluent Gross	0	--	Sample = 94.0 13 - #/100mL														02/DA - 2 Days Every Week GR - GRAB
					Permit Req. <= 400.0 DAILY MX 13 - #/100mL														02/DA - 2 Days Every Week GR - GRAB
					Value NODI														
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	--	Sample = 524.0 = 707.0 26 - lb/d														02/DA - 2 Days Every Week CP - COMPOS
					Permit Req. <= 20850.0 MO AVG <= 41700.0 WKLY AVG 26 - lb/d														02/DA - 2 Days Every Week CP - COMPOS
					Value NODI														

**Submission Note**  
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**  
No errors.

**Comments**

**Attachments**  
No attachments.

**Report Last Saved By**  
**SANITARY DISTRICT OF DECATUR**

User: keithrsdd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:34 (Time Zone: -05:00)

**Report Last Signed By**

User: TIMSDD89  
Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)

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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	002 External Outfall	<b>Discharge:</b>	002-0 EMERGENCY HIGH LEVEL OVERFLOW BYPASS
<b>Facility:</b>	SANITARY DISTRICT OF DECATUR MAIN STP		
<b>Facility Location:</b>	501 DIPPER LANE DECATUR, IL 62522		

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**  
W0430350001

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3				Value 3
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample													
					Permit Req.									Opt Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - GRAB
					Value NODI										C - No Discharge			
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample													
					Permit Req.									Opt Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - GRAB
					Value NODI										C - No Discharge			
74055	Coliform, fecal general	1 - Effluent Gross	0	--	Sample													
					Permit Req.									Opt Mon DAILY MX	13 - #/100mL		DL/DS - Daily When Discharging	GR - GRAB
					Value NODI										C - No Discharge			
74071	Flow	1 - Effluent Gross	0	--	Sample													
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo							DL/DS - Daily When Discharging	
					Value NODI										C - No Discharge			

**Submission Note**  
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**  
No errors.

**Comments**  
No discharge during the month.

**Attachments**  
No attachments.

**Report Last Saved By**  
SANITARY DISTRICT OF DECATUR  
User: keithrstd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:35 (Time Zone: -05:00)

**Report Last Signed By**  
User: TIMSDD89

Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)

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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	003 External Outfall	<b>Discharge:</b>	003-0 TREATED CSO-OAKLAND AVENUE
<b>Facility:</b>		<b>Facility Location:</b>	SANITARY DISTRICT OF DECATUR MAIN STP 501 DIPPER LANE DECATUR, IL 62522

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**  
 W1150150004 ; RECEIVING WATER: SANGAMON RIVER NUMBER OF DAYS OF DISCHARGE:GF

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
 Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample						=	69.0				19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon DAILY MX			19 - mg/L	DL/DS - Daily When Discharging			GR - GRAB
					Value NODI														
00400	pH	1 - Effluent Gross	0	--	Sample						=	6.22				12 - SU	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon MINIMUM			12 - SU	DL/DS - Daily When Discharging			GR - GRAB
					Value NODI														
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample						=	532.0			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon DAILY MX			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	--	Sample						=	0.94			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon DAILY MX			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample						=	4.5			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon MO AVG			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
82220	Flow, total	1 - Effluent Gross	0	--	Sample			3.98		80 - Mgal/mo						DL/DS - Daily When Discharging	CN - CONTIN		
					Permit Req.			Req Mon MO TOTAL		80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
					Value NODI														

**Submission Note**  
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**Edit Check Errors**  
 No errors.

**Comments**  
 Three days of discharge.

**Attachments**  
 No attachments.

**Report Last Saved By**  
 SANITARY DISTRICT OF DECATUR

User: keithrsdd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:37 (Time Zone: -05:00)

***Report Last Signed By***

User: TIMSDD89  
Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)

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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	004 External Outfall	<b>Discharge:</b>	004-0 TREATED CSO-LINCOLN PARK
<b>Facility:</b>		<b>Facility Location:</b>	SANITARY DISTRICT OF DECATUR MAIN STP 501 DIPPER LANE DECATUR, IL 62522

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**  
W1150150004 ; RECEIVING WATER: SANGAMON RIVER NUMBER OF DAYS OF DISCHARGE:GF

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample						=	30.0				19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon DAILY MX			19 - mg/L	DL/DS - Daily When Discharging			GR - GRAB
					Value NODI														
00400	pH	1 - Effluent Gross	0	--	Sample						=	6.52				12 - SU	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon MINIMUM			12 - SU	DL/DS - Daily When Discharging			GR - GRAB
					Value NODI														
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample						=	216.0			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon DAILY MX			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	--	Sample						=	0.24			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon DAILY MX			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample						=	1.73			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon MO AVG			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
82220	Flow, total	1 - Effluent Gross	0	--	Sample			=	1.4	80 - Mgal/mo						DL/DS - Daily When Discharging	CN - CONTIN		
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
					Value NODI														

**Submission Note**  
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**  
No errors.

**Comments**  
Two days of discharge.

**Attachments**  
No attachments.

**Report Last Saved By**  
SANITARY DISTRICT OF DECATUR

User: keithrsdd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:38 (Time Zone: -05:00)

***Report Last Signed By***

User: TIMSDD89  
Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)



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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	007 External Outfall	<b>Discharge:</b>	007-0 TREATED CSO-MCKINLEY AVENUE
<b>Facility:</b>	SANITARY DISTRICT OF DECATUR MAIN STP		
<b>Facility Location:</b>	501 DIPPER LANE DECATUR, IL 62522		

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**  
W1150150004 ; RECEIVING WATER: SANGAMON RIVER NUMBER OF DAYS OF DISCHARGE:GF

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample						=	59.0				19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon DAILY MX			19 - mg/L	DL/DS - Daily When Discharging			GR - GRAB
					Value NODI														
00400	pH	1 - Effluent Gross	0	--	Sample						=	6.53				12 - SU	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon MINIMUM			12 - SU	DL/DS - Daily When Discharging			GR - GRAB
					Value NODI														
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample						=	1440.0			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon DAILY MX			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	--	Sample						=	1.97			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon DAILY MX			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample						=	1.21			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB		
					Permit Req.							Req Mon MO AVG			19 - mg/L			DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
82220	Flow, total	1 - Effluent Gross	0	--	Sample			=	8.41	80 - Mgal/mo						DL/DS - Daily When Discharging	CN - CONTIN		
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
					Value NODI														

**Submission Note**  
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**  
No errors.

**Comments**  
Three days of discharge.

**Attachments**  
No attachments.

**Report Last Saved By**  
SANITARY DISTRICT OF DECATUR

User: keithrsdd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:40 (Time Zone: -05:00)

***Report Last Signed By***

User: TIMSDD89  
Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the [NPDES eReporting Help Desk](#) for further guidance. Please note that EPA may contact you after you submit this report for more information.

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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	008 External Outfall	<b>Discharge:</b>	008-0 TREATED CSO-SEVENTH WARD
<b>Facility:</b>	SANITARY DISTRICT OF DECATUR MAIN STP		
<b>Facility Location:</b>	501 DIPPER LANE DECATUR, IL 62522		

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**  
W1150150004 ; RECEIVING WATER: SANGAMON RIVER NUMBER OF DAYS OF DISCHARGE:GF

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3			
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample						=	92.0				19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
					Permit Req.							Req Mon DAILY MX			19 - mg/L	GR - GRAB		
					Value NODI													
00400	pH	1 - Effluent Gross	0	--	Sample					=	6.29				12 - SU	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon MINIMUM			12 - SU			GR - GRAB
					Value NODI													
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample						=	338.0			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon DAILY MX			19 - mg/L			GR - GRAB
					Value NODI													
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	--	Sample						=	0.2			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon DAILY MX			19 - mg/L			GR - GRAB
					Value NODI													
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample						=	0.96			19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB	
					Permit Req.							Req Mon MO AVG			19 - mg/L			GR - GRAB
					Value NODI													
82220	Flow, total	1 - Effluent Gross	0	--	Sample		=	17.22	80 - Mgal/mo							DL/DS - Daily When Discharging	CN - CONTIN	
					Permit Req.			Req Mon MO TOTAL	80 - Mgal/mo									CN - CONTIN
					Value NODI													

**Submission Note**  
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**  
No errors.

**Comments**  
Three days of discharge.

**Attachments**  
No attachments.

**Report Last Saved By**  
SANITARY DISTRICT OF DECATUR

User: keithrsdd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:42 (Time Zone: -05:00)

***Report Last Signed By***

User: TIMSDD89  
Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)

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<b>Permit</b>																				
<b>Permit #:</b> IL0028321		<b>Permittee:</b> SANITARY DISTRICT OF DECATUR				<b>Facility:</b> SANITARY DISTRICT OF DECATUR MAIN STP														
<b>Major:</b> Yes		<b>Permittee Address:</b> 501 DIPPER LANE DECATUR, IL 62522				<b>Facility Location:</b> 501 DIPPER LANE DECATUR, IL 62522														
<b>Permitted Feature:</b> A03 External Outfall		<b>Discharge:</b> A03-0 CSO-OAKLAND AVENUE CSO TREATMENT BYPASS																		
<b>Report Dates &amp; Status</b>																				
<b>Monitoring Period:</b> From 08/01/24 to 08/31/24				<b>DMR Due Date:</b> 09/25/24				<b>Status:</b> NetDMR Validated												
<b>Considerations for Form Completion</b>																				
W1370200010 ; RECEIVING WATER:BRIAR CREEK																				
<b>Principal Executive Officer</b>																				
<b>First Name:</b> Kent				<b>Title:</b> Executive Director				<b>Telephone:</b> 217-422-6931												
<b>Last Name:</b> Newton																				
<b>No Data Indicator (NODI)</b>																				
<b>Form NODI:</b> --																				
Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type		
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units	
74062	Overflows	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											
<b>Submission Note</b>																				
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.																				
<b>Edit Check Errors</b>																				
No errors.																				
<b>Comments</b>																				
No discharge during the month.																				
<b>Attachments</b>																				
No attachments.																				
<b>Report Last Saved By</b>																				
SANITARY DISTRICT OF DECATUR																				
<b>User:</b> keithrsdd				<b>Name:</b> Keith Richard				<b>E-Mail:</b> keithr@sddcleanwater.org												
<b>Date/Time:</b> 2024-09-16 10:43 (Time Zone: -05:00)																				
<b>Report Last Signed By</b>																				
<b>User:</b> TIMSDD89				<b>Name:</b> Tim Gorden				<b>E-Mail:</b> timg@sddcleanwater.org												
<b>Date/Time:</b> 2024-09-16 13:22 (Time Zone: -05:00)																				

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<b>Permit</b>																				
<b>Permit #:</b> IL0028321		<b>Permittee:</b> SANITARY DISTRICT OF DECATUR				<b>Facility:</b> SANITARY DISTRICT OF DECATUR MAIN STP														
<b>Major:</b> Yes		<b>Permittee Address:</b> 501 DIPPER LANE DECATUR, IL 62522				<b>Facility Location:</b> 501 DIPPER LANE DECATUR, IL 62522														
<b>Permitted Feature:</b> A04 External Outfall		<b>Discharge:</b> A04-0 CSO-LINCOLN PARK CSO TREATMENT BYPASS																		
<b>Report Dates &amp; Status</b>																				
<b>Monitoring Period:</b> From 08/01/24 to 08/31/24				<b>DMR Due Date:</b> 09/25/24				<b>Status:</b> NetDMR Validated												
<b>Considerations for Form Completion</b>																				
W1370200010 ; RECEIVING WATER:BRIAR CREEK																				
<b>Principal Executive Officer</b>																				
<b>First Name:</b> Kent		<b>Title:</b> Executive Director				<b>Telephone:</b> 217-422-6931														
<b>Last Name:</b> Newton																				
<b>No Data Indicator (NODI)</b>																				
<b>Form NODI:</b> --																				
Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Type			
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3				Value 3	Units	
74062	Overflows	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											
<b>Submission Note</b>																				
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.																				
<b>Edit Check Errors</b>																				
No errors.																				
<b>Comments</b>																				
No discharge during the month.																				
<b>Attachments</b>																				
No attachments.																				
<b>Report Last Saved By</b>																				
SANITARY DISTRICT OF DECATUR																				
User:		keithrsdd																		
Name:		Keith Richard																		
E-Mail:		keithr@sddcleanwater.org																		
Date/Time:		2024-09-16 10:43 (Time Zone: -05:00)																		
<b>Report Last Signed By</b>																				
User:		TIMSDD89																		
Name:		Tim Gorden																		
E-Mail:		timg@sddcleanwater.org																		
Date/Time:		2024-09-16 13:22 (Time Zone: -05:00)																		

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<b>Permit</b>																				
<b>Permit #:</b>		IL0028321			<b>Permittee:</b>		SANITARY DISTRICT OF DECATUR					<b>Facility:</b>		SANITARY DISTRICT OF DECATUR MAIN STP						
<b>Major:</b>		Yes			<b>Permittee Address:</b>		501 DIPPER LANE DECATUR, IL 62522					<b>Facility Location:</b>		501 DIPPER LANE DECATUR, IL 62522						
<b>Permitted Feature:</b>		A06 External Outfall			<b>Discharge:</b>		A06-0 CSO-FAIRVIEW PARK CSO													
<b>Report Dates &amp; Status</b>																				
<b>Monitoring Period:</b>		From 08/01/24 to 08/31/24			<b>DMR Due Date:</b>		09/25/24					<b>Status:</b>		NetDMR Validated						
<b>Considerations for Form Completion</b>																				
W1370200010 ; RECEIVING WATER:BRIAR CREEK																				
<b>Principal Executive Officer</b>																				
<b>First Name:</b>		Kent			<b>Title:</b>		Executive Director					<b>Telephone:</b>		217-422-6931						
<b>Last Name:</b>		Newton																		
<b>No Data Indicator (NODI)</b>																				
<b>Form NODI:</b>		--																		
Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type		
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units	
74062	Overflows	1 - Effluent Gross	0	--	Sample															
					Permit Req.															
					Value NODI															
<b>Submission Note</b>																				
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.																				
<b>Edit Check Errors</b>																				
No errors.																				
<b>Comments</b>																				
No discharge during the month.																				
<b>Attachments</b>																				
No attachments.																				
<b>Report Last Saved By</b>																				
SANITARY DISTRICT OF DECATUR																				
<b>User:</b>		keithrsdd																		
<b>Name:</b>		Keith Richard																		
<b>E-Mail:</b>		keithr@sddcleanwater.org																		
<b>Date/Time:</b>		2024-09-16 10:43 (Time Zone: -05:00)																		
<b>Report Last Signed By</b>																				
<b>User:</b>		TIMSDD89																		
<b>Name:</b>		Tim Gorden																		
<b>E-Mail:</b>		timg@sddcleanwater.org																		
<b>Date/Time:</b>		2024-09-16 13:22 (Time Zone: -05:00)																		

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<b>Permit</b>																				
<b>Permit #:</b> IL0028321		<b>Permittee:</b> SANITARY DISTRICT OF DECATUR				<b>Facility:</b> SANITARY DISTRICT OF DECATUR MAIN STP														
<b>Major:</b> Yes		<b>Permittee Address:</b> 501 DIPPER LANE DECATUR, IL 62522				<b>Facility Location:</b> 501 DIPPER LANE DECATUR, IL 62522														
<b>Permitted Feature:</b> A07 External Outfall		<b>Discharge:</b> A07-0 CSO-MCKINLEY AVE CSO TREATMENT BYPASS																		
<b>Report Dates &amp; Status</b>																				
<b>Monitoring Period:</b> From 08/01/24 to 08/31/24				<b>DMR Due Date:</b> 09/25/24				<b>Status:</b> NetDMR Validated												
<b>Considerations for Form Completion</b>																				
W1370200010 ; RECEIVING WATER:BRIAR CREEK																				
<b>Principal Executive Officer</b>																				
<b>First Name:</b> Kent		<b>Title:</b> Executive Director				<b>Telephone:</b> 217-422-6931														
<b>Last Name:</b> Newton																				
<b>No Data Indicator (NODI)</b>																				
<b>Form NODI:</b> --																				
Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type		
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units	
74062	Overflows	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											
<b>Submission Note</b>																				
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.																				
<b>Edit Check Errors</b>																				
No errors.																				
<b>Comments</b>																				
No discharge during the month.																				
<b>Attachments</b>																				
No attachments.																				
<b>Report Last Saved By</b>																				
SANITARY DISTRICT OF DECATUR																				
User:		keithrsdd																		
Name:		Keith Richard																		
E-Mail:		keithr@sddcleanwater.org																		
Date/Time:		2024-09-16 10:44 (Time Zone: -05:00)																		
<b>Report Last Signed By</b>																				
User:		TIMSDD89																		
Name:		Tim Gorden																		
E-Mail:		timg@sddcleanwater.org																		
Date/Time:		2024-09-16 13:22 (Time Zone: -05:00)																		



EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the [NPDES eReporting Help Desk](#) for further guidance. Please note that EPA may contact you after you submit this report for more information.

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with this permit and EPA NPDES regulations 40 CFR 122.41(l)(4)(i). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average 2 hours per outfall. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

<b>Permit</b>																				
<b>Permit #:</b> IL0028321		<b>Permittee:</b> SANITARY DISTRICT OF DECATUR				<b>Facility:</b> SANITARY DISTRICT OF DECATUR MAIN STP														
<b>Major:</b> Yes		<b>Permittee Address:</b> 501 DIPPER LANE DECATUR, IL 62522				<b>Facility Location:</b> 501 DIPPER LANE DECATUR, IL 62522														
<b>Permitted Feature:</b> A08 External Outfall		<b>Discharge:</b> A08-0 CSO-SEVENTH WARD CSO TREATMENT BYPASS																		
<b>Report Dates &amp; Status</b>																				
<b>Monitoring Period:</b> From 08/01/24 to 08/31/24				<b>DMR Due Date:</b> 09/25/24				<b>Status:</b> NetDMR Validated												
<b>Considerations for Form Completion</b>																				
W1370200010 ; RECEIVING WATER:BRIAR CREEK																				
<b>Principal Executive Officer</b>																				
<b>First Name:</b> Kent				<b>Title:</b> Executive Director				<b>Telephone:</b> 217-422-6931												
<b>Last Name:</b> Newton																				
<b>No Data Indicator (NODI)</b>																				
<b>Form NODI:</b> --																				
Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type		
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units	
74062	Overflows	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											
<b>Submission Note</b>																				
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.																				
<b>Edit Check Errors</b>																				
No errors.																				
<b>Comments</b>																				
No discharge during the month.																				
<b>Attachments</b>																				
No attachments.																				
<b>Report Last Saved By</b>																				
SANITARY DISTRICT OF DECATUR																				
<b>User:</b> keithrsdd				<b>Name:</b> Keith Richard				<b>E-Mail:</b> keithr@sddcleanwater.org												
<b>Date/Time:</b> 2024-09-16 10:44 (Time Zone: -05:00)																				
<b>Report Last Signed By</b>																				
<b>User:</b> TMSDD89				<b>Name:</b> Tim Gorden				<b>E-Mail:</b> timg@sddcleanwater.org												
<b>Date/Time:</b> 2024-09-16 13:22 (Time Zone: -05:00)																				

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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	INF Influent Structure	<b>Discharge:</b>	INF-G INFLUENT FLOW FROM GROUNDWATER DEWATERING SYSTEM
<b>Facility:</b>			SANITARY DISTRICT OF DECATUR MAIN STP
<b>Facility Location:</b>			501 DIPPER LANE DECATUR, IL 62522

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample													99/99 - Continuous	
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									
					Value NODI		Q - Not Quantifiable		Q - Not Quantifiable										

**Submission Note**  
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**  
No errors.

**Comments**  
Existing infrastructure does not allow for measurement of flow.

**Attachments**  
No attachments.

**Report Last Saved By**  
SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2024-09-16 10:45 (Time Zone: -05:00)

**Report Last Signed By**

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2024-09-16 13:22 (Time Zone: -05:00)

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<b>Permit</b>			
<b>Permit #:</b>	IL0028321	<b>Permittee:</b>	SANITARY DISTRICT OF DECATUR
<b>Major:</b>	Yes	<b>Permittee Address:</b>	501 DIPPER LANE DECATUR, IL 62522
<b>Permitted Feature:</b>	INF Influent Structure	<b>Discharge:</b>	INF-L INFLUENT REPORTING
<b>Facility:</b>	SANITARY DISTRICT OF DECATUR MAIN STP		
<b>Facility Location:</b>	501 DIPPER LANE DECATUR, IL 62522		

<b>Report Dates &amp; Status</b>			
<b>Monitoring Period:</b>	From 08/01/24 to 08/31/24	<b>DMR Due Date:</b>	09/25/24
<b>Status:</b>	NetDMR Validated		

**Considerations for Form Completion**  
W1150150004

<b>Principal Executive Officer</b>			
<b>First Name:</b>	Kent	<b>Title:</b>	Executive Director
<b>Last Name:</b>	Newton	<b>Telephone:</b>	217-422-6931

**No Data Indicator (NODI)**  
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Type
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3			
00310	BOD, 5-day, 20 deg. C	G - Raw Sewage Influent	0	--	Sample						=	162.0			19 - mg/L	02/DA - 2 Days Every Week	CP - COMPOS
					Permit Req.										19 - mg/L		
					Value NODI												
00530	Solids, total suspended	G - Raw Sewage Influent	0	--	Sample						=	326.0			19 - mg/L	02/DA - 2 Days Every Week	CP - COMPOS
					Permit Req.										19 - mg/L		
					Value NODI												
00665	Phosphorus, total [as P]	G - Raw Sewage Influent	0	--	Sample						=	21.7	=	27.2	19 - mg/L	02/DA - 2 Days Every Week	CP - COMPOS
					Permit Req.										19 - mg/L		
					Value NODI												
50050	Flow, in conduit or thru treatment plant	G - Raw Sewage Influent	0	--	Sample	=	28.08	=	51.54	03 - MGD						99/99 - Continuous	RT - RCOTOT
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD							
					Value NODI												

**Submission Note**  
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**Edit Check Errors**  
No errors.

**Comments**

**Attachments**  
No attachments.

**Report Last Saved By**  
SANITARY DISTRICT OF DECATUR

User: keithrsdd  
Name: Keith Richard  
E-Mail: keithr@sddcleanwater.org  
Date/Time: 2024-09-16 10:46 (Time Zone: -05:00)

**Report Last Signed By**  
User: TIMSDD89

Name: Tim Gorden  
E-Mail: timg@sddcleanwater.org  
Date/Time: 2024-09-16 13:22 (Time Zone: -05:00)