Permit

IL0028321 Permit #:

Permittee: SANITARY DISTRICT OF DECATUR

Major:

Permittee Address: 501 DIPPER LANE Facility Location:

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

Yes

DECATUR, IL 62522

501 DIPPER LANE DECATUR, IL 62522

Permitted Feature:

001 External Outfall

Newton

Discharge:

001-0 STP OUTFALL

Report Dates & Status

From 07/01/22 to 07/31/22 **Monitoring Period:**

DMR Due Date: 08/25/22

Status: **NetDMR Validated**

Considerations for Form Completion

W1150150004; DMF LOAD LIMITS DISPLAYED.

Principal Executive Officer

Kent First Name:

Title: **Executive Director** Telephone:

217-422-6931

No Data Indicator (NODI)

Last Name:

Form NODI:

	Parameter	Monitoring Location	Season # Param. N	IODI		Qua	antity or Lo	ading					Quality or Conc	entration			# of Ex	. Frequency of Analysis	Sample Type
Code	Name				Qualifier 1	Value 1	Qualifier 2	2 Value 2	Units	Qualifier	1 Value 1	Qualifier 2	2 Value 2	Qualifier 3	3 Value 3	Units			
				Sample								=	7.22			19 - mg/L		02/DA - 2 Days Every Week	
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0	Permit Re	q.							>=	6.25 MN WK AV	>=	5.0 DAILY MN	19 - mg/L	0	02/DA - 2 Days Every Week	GR - GRAB
	, , , , ,			Value NOI	DI														
				Sample						=	7.84			=	8.1	12 - SU		02/DA - 2 Days Every Week	GR - GRAB
00400	nH	1 - Effluent Gross	0	Permit Re	q.					>=	6.0 MINIMUN	1		<=	9.0 MAXIMUM	12 - SU	0	02/DA - 2 Days Every Week	
00400	P11	1 Emach Gross		Value NOI	DI														
				Sample	= 62	28.0	=	886.0	26 - lb/d			=	3.0	=	4.0	19 - mg/L		02/DA - 2 Days Every Week	CP - COMPO
00530	Solids, total suspended	1 - Effluent Gross	0	Permit Re	q. <= 26	6063.0 MO AVG	<=	46913.0 WKLY A	/G 26 - lb/d			<=	25.0 MO AVG	<=	45.0 WKLY AVG	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPO
00000	oonus, total suspended	1 Emach Gross		Value NOI	DI														
				Sample								=	20.5	=	20.5	19 - mg/L		01/30 - Monthly	CP - COMPOS
00600	Nitrogon total [oo NI]	1 - Effluent Gross	0	Permit Re	q.								Req Mon MO AVO		Req Mon DAILY MX			-	CP - COMPO
00000	Nitrogen, total [as N]	1 - Ellident Gloss	0	Value NOI									·		·		U		
				Sample		06.0	=	157.0	26 - lb/d			=	0.45	=	0.51	19 - mg/L		02/DA - 2 Days Every Week	CD COMPOS
				Permit Re		147.0 MO AVG		3128.0 DAILY MX					1.1 MO AVG			19 - mg/L		02/DA - 2 Days Every Week	
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	6			147.0 MO 7.VO	\ <u>-</u>	5120.0 DAILT WA	20 lb/u			_	1.1 WO 7.V O	\ <u>_</u>	5.0 DAILT WAX	15 mg/L	0	02/D/Y 2 Days Every Week	OI COMI OC
				Value NOI	ונ														
				Sample				127.0	26 - lb/d						0.47	19 - mg/L		02/DA - 2 Days Every Week	
00610	Nitrogen, ammonia total [as N]	8 - Other Treatment, Process Complete	0	Permit Re	q.		<=	2919.0 WKLY AV	3 26 - lb/d					<=	2.8 WKLY AVG	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
				Value NOI	DI														
				Sample								=	20.9	=		19 - mg/L		02/DA - 2 Days Every Week	CP - COMPOS
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	Permit Re	q.								Req Mon MO AVO	3	Req Mon DAILY MX	(19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
				Value NOI	DI														
				Sample										=	585.0	19 - mg/L		01/30 - Monthly	CP - COMPO
00940	Chloride [as CI]	1 - Effluent Gross	0	Permit Re	q.										Req Mon DAILY MX	(19 - mg/L	0	01/30 - Monthly	CP - COMPO
				Value NOI	DI														
				Sample										=	651.0	19 - mg/L		01/30 - Monthly	CP - COMPOS
00945	Sulfate, total [as SO4]	1 - Effluent Gross	0	Permit Re	q.										Req Mon DAILY MX	(19 - mg/L	0	01/30 - Monthly	CP - COMPOS
00040	odinate, total [as 664]	1 Emach Gross		Value NOI	DI														
				Sample	= 4.8	8			26 - lb/d			=	0.02			19 - mg/L		02/DA - 2 Days Every Week	CP - COMPO
04007	Niekal tatal for Nil	1 - Effluent Gross		Permit Re		0.0 MO AVG			26 - lb/d			<=	0.0381 MO AVG			19 - mg/L		02/DA - 2 Days Every Week	
01067	Nickel, total [as Ni]	i - Eilideili Gioss	0	Value NOI													U		
				Sample		3.13	=	49.08	03 - MGD)								99/99 - Continuous	
50050	Floor in an abit on the transfer at about	4. 544		Permit Re		eq Mon MO AVG		Req Mon DAILY N										99/99 - Continuous	
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	Value NOI													0		
				Sample Permit Re												19 - mg/L		02/DA - 2 Days Every Week	
50060	Chlorine, total residual	1 - Effluent Gross	0											<=	0.05 DAILY MX	19 - mg/L	0	02/DA - 2 Days Every Week	GR - GRAB
				Value NOI	DI														
				Sample												13 - #/100m		02/DA - 2 Days Every Week	
74055	Coliform, fecal general	1 - Effluent Gross	0	Permit Re	q.									<=	400.0 DAILY MX	13 - #/100m	0	02/DA - 2 Days Every Week	GR - GRAB
	-			Value NOI	DI														

				Sample =	477.0	=	555.0	26 - lb/d	=	2.0	=	2.0	19 - mg/L	02/DA - 2 Days Every Week CP - COMPOS
80082 BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0		Permit Req. <=	20850.0 MO A\	VG <=	41700.0 WKLY A	/G 26 - lb/d	<=	20.0 MO AVG	<=	40.0 WKLY AVG	19 - mg/L 0	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 follow	wing fields will be s	ubmitted for tha	t row: Unit	s, Number of Exc	ursions, Frequenc	y 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@sddclear	nwater.org												
Date/Time:	2022-08-08 08::	23 (Time	Zone: -05:0	0)										
Report Last Signed By														
User:	TIMSDD89													
Name:	Tim Gorden													
E-Mail:	timg@sddcleanv	water.org												

2022-08-08 13:46 (Time Zone: -05:00)

Date/Time:

DMR Copy of Record Permit SANITARY DISTRICT OF DECATUR SANITARY DISTRICT OF DECATUR MAIN STP Permit #: IL0028321 Permittee: Facility: Facility Location: Major: Yes **Permittee Address: 501 DIPPER LANE 501 DIPPER LANE** DECATUR, IL 62522 DECATUR, IL 62522 002 **Permitted Feature:** Discharge: 002-0 External Outfall **EMERGENCY HIGH LEVEL OVERFLOW BYPASS** Report Dates & Status **Monitoring Period: DMR Due Date:** From 07/01/22 to 07/31/22 08/25/22 Status: **NetDMR Validated Considerations for Form Completion** W0430350001 **Principal Executive Officer** Kent Title: Telephone: 217-422-6931 **First Name: Executive Director** Last Name: Newton No Data Indicator (NODI) Form NODI: Monitoring Location Season # Param. NODI Quantity or Loading **Quality or Concentration** # of Ex. Frequency of Analysis Qualifier 1 Value 1 Qualifier 2 Units Qualifier 1 Value 1 Qualifier 2 Value 2 Qualifier 3 Code Name Value 2 Value 3 Sample DL/DS - Daily When Discharging GR - GRAB Opt Mon DAILY MX 19 - mg/L Permit Req. 00310 **BOD, 5-day, 20 deg. C** 1 - Effluent Gross 0 C - No Discharge Value NODI Sample Permit Reg. Opt Mon DAILY MX 19 - mg/L DL/DS - Daily When Discharging GR - GRAB 00530 **Solids, total suspended** 1 - Effluent Gross 0 C - No Discharge Value NODI Sample Opt Mon DAILY MX 13 - #/100mL DL/DS - Daily When Discharging GR - GRAB Permit Req. 74055 **Coliform, fecal general** 1 - Effluent Gross 0 C - No Discharge Value NODI Sample Opt Mon MO TOTAL 4K - #/mo Permit Reg. DL/DS - Daily When Discharging 74071 **Flow** 1 - Effluent Gross 0 C - No Discharge 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 No discharge during the month. **Attachments** No attachments. Report Last Saved By SANITARY DISTRICT OF DECATUR User: keithrsdd Keith Richard Name: E-Mail: keithr@sddcleanwater.org Date/Time: 2022-08-08 08:24 (Time Zone: -05:00)

Report Last Signed By

TIMSDD89
Tim Gorden

timg@sddcleanwater.org

2022-08-08 13:46 (Time Zone: -05:00)

User:

Name: E-Mail:

Date/Time:

Permit

Major:

Permit #: IL0028321

Yes

Permittee: SANITARY DISTRICT OF DECATUR

Permittee Address: 501 DIPPER LANE

DECATUR, IL 62522

Facility Location:

Facility:

Status:

SANITARY DISTRICT OF DECATUR MAIN STP

Location: 501 DIPPER LANE DECATUR, IL 62522

Permitted Feature:

003 External Outfall Discharge:

DMR Due Date:

003-0
TREATED CSO-OAKLAND AVENUE

Report Dates & Status

Monitoring Period: From 07/01/22 to 07/31/22

08/25/22

NetDMR Validated

Considerations for Form Completion

W1150150004; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

First Name: Kent

Title: Executive Director

Telephone: 217-422-6931

Last Name: Newton

No Data Indicator (NODI)

Form NODI: --

	10DI.																		
	Parameter	Monitoring Location	Season # Paran	n. NODI				or Loading					ality or Concentr				# of Ex.	Frequency of Analysis	Sample Type
Code	Name				Qualifie	r 1 Value	1 Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
				Samp	Э									=	54.0	19 - mg/L		DL/DS - Daily When Dischargin	g GR - GRAB
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	Permit F	eq.										Req Mon DAILY N	/IX 19 - mg/L	0	DL/DS - Daily When Dischargin	g GR - GRAB
00310	505, 3-day, 20 deg. 0	1 - Lindent Oloss		Value N	DI												O		
				Samp	9					=	7.04			=	7.04	12 - SU		DL/DS - Daily When Dischargin	ng GR - GRAB
00400	nH	1 - Effluent Gross	0	Permit F	eq.						Req Mon MINIMUM	1			Req Mon MAXIMI	JM 12 - SU	0	DL/DS - Daily When Dischargin	g GR - GRAB
00400	pii	1 - Lilidelit Gloss	0	Value N	DI												U		
				Samp	9									_	320.0	19 - mg/L		DL/DS - Daily When Dischargin	ng GR - GRAB
00500	Onlide total assessed at	4		Permit F											Req Mon DAILY N			DL/DS - Daily When Dischargin	•
00530	Solids, total suspended	1 - Effluent Gross	0														0		.9
				Value N	וטו														
				Samp	9									-	1.54	19 - mg/L		DL/DS - Daily When Dischargin	g GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	Permit F	eq.										Req Mon DAILY N	/IX 19 - mg/L	0	DL/DS - Daily When Dischargin	g GR - GRAB
	[Value N	DDI														
				Samp	9							=	4.45	-	4.45	19 - mg/L		DL/DS - Daily When Dischargin	ng GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	Permit F	eq.								Req Mon MO AV	G	Req Mon DAILY N	/IX 19 - mg/L	0	DL/DS - Daily When Dischargin	g GR - GRAB
				Value N	DDI														
				Samp	9		= 1.	.43	80 - Mgal/mo									DL/DS - Daily When Dischargin	ng CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0	Permit F	eq.		R	eq Mon MO TOTAL	80 - Mgal/mo								0	DL/DS - Daily When Dischargin	ng CN - CONTIN
JEELO				Value N	DDI												Ü		

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

One day 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: 2022-08-08 08:26 (Time Zone: -05:00)

Report Last Signed By

 User:
 TIMSDD89

 Name:
 Tim
 Gorden

E-Mail: timg@sddcleanwater.org

Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit

Permit #: IL0028321

Major: Yes

Permittee: SANITARY DISTRICT OF DECATUR

08/25/22

Permittee Address: 501 DIPPER LANE

DECATUR, IL 62522

Facility Location: 501 DIPPER LANE DECATUR, IL 62522

SANITARY DISTRICT OF DECATUR MAIN STP

NetDMR Validated

Facility:

Status:

Permitted Feature: 004

External Outfall

Newton

004-0

TREATED CSO-LINCOLN PARK

Report Dates & Status

Monitoring Period:

Considerations for Form Completion

W1150150004; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

From 07/01/22 to 07/31/22

Principal Executive Officer

First Name: Kent

Title: Executive Director

Discharge:

DMR Due Date:

Telephone: 217-422-6931

No Data Indicator (NODI)

Last Name:

Form NODI: --

1 011111	TODI.																			
	Parameter	Monitoring Location	Season	# Param. NOD				Quantity of	or Loading				Qu	ality or Concentra	ation			# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier '	1 Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
					Sample										=	168.0	19 - mg/L		DL/DS - Daily When Dischargin	g GR - GRAB
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY N	/IX 19 - mg/L	. 0	DL/DS - Daily When Dischargin	g GR - GRAB
00010	202, c day, 20 dog. c	I Lindon Groos			Value NODI															
					Sample						=	7.08			=	7.08	12 - SU		DL/DS - Daily When Dischargin	g GR - GRAB
00400	pH	1 - Effluent Gross	0		Permit Req.							Req Mon MINIMUM				Req Mon MAXIMI	JM 12 - SU	0	DL/DS - Daily When Dischargin	g GR - GRAB
00400	рп	1 - Lindent Oloss	U		Value NODI													U		
					Sample										=	78.0	19 - mg/L	_	DL/DS - Daily When Dischargin	g GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY			DL/DS - Daily When Dischargin	•
00550	Solius, total suspended	1 - Elliuelli Gloss	U		Value NODI													U		
					Sample										=	0.31	19 - mg/L		DL/DS - Daily When Dischargin	g GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY	/IX 19 - mg/L	. 0	DL/DS - Daily When Dischargin	g GR - GRAB
00010	Will Ogen, animonia total [as N]	1 - Liliuelli Gioss	U		Value NODI													U		
					Sample								=	1.09	=	1.09	19 - mg/L		DL/DS - Daily When Dischargin	g GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVO	3	Req Mon DAILY N	/IX 19 - mg/L		DL/DS - Daily When Dischargin	g GR - GRAB
00000	i nospilorus, total [as i]	1 - Lindent Oloss			Value NODI													0		
					Sample			= 0.3	3	80 - Mgal/mo									DL/DS - Daily When Dischargin	g CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0		Permit Req.			Re	eq Mon MO TOTA	L 80 - Mgal/mo								0	DL/DS - Daily When Dischargin	g CN - CONTIN
OLLEO	i ion, total	. Emaoni Gross			Value NODI													Ü		

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

One day 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: 2022-08-08 08:28 (Time Zone: -05:00)

Report Last Signed By

 User:
 TIMSDD89

 Name:
 Tim
 Gorden

E-Mail: timg@sddcleanwater.org

Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit

Major:

IL0028321 Permit #:

Yes

SANITARY DISTRICT OF DECATUR Permittee:

501 DIPPER LANE **Permittee Address:**

DECATUR, IL 62522

Facility Location:

SANITARY DISTRICT OF DECATUR MAIN STP

Facility:

501 DIPPER LANE DECATUR, IL 62522

007 **Permitted Feature:**

External Outfall

Discharge: 007-0

Title:

TREATED CSO-MCKINLEY AVENUE

Report Dates & Status

Monitoring Period: From 07/01/22 to 07/31/22 **DMR Due Date:** 08/25/22

Status: **NetDMR Validated**

Considerations for Form Completion

W1150150004; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

First Name: Kent

Executive Director

Telephone: 217-422-6931

Last Name: Newton

No Data Indicator (NODI)

Form NODI:

	Parameter	Monitoring Location	Season	# Param. NOD	I		Quant	ity or Loading				Qua	lity or Concent	ration			# of Ex	c. Frequency of Analysis	Sample Type
Code	Name					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 Permit Req. Value NODI										59.0 Req Mon DAILY M	19 - mg/l X 19 - mg/l		DL/DS - Daily When Discharging DL/DS - Daily When Discharging	
00400	рН	1 - Effluent Gross	0		Sample Permit Req. Value NODI						7.09 Req Mon MINIMUM	1			7.11 Req Mon MAXIMU	12 - SU M 12 - SU		DL/DS - Daily When Discharging DL/DS - Daily When Discharging	
00530	Solids, total suspended	1 - Effluent Gross	0		Sample Permit Req. Value NODI										313.0 Req Mon DAILY M	19 - mg/l X 19 - mg/l		DL/DS - Daily When Discharging DL/DS - Daily When Discharging	
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0		Sample Permit Req. Value NODI										5.24 Req Mon DAILY M	19 - mg/l X 19 - mg/l		DL/DS - Daily When Discharging DL/DS - Daily When Discharging	
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Sample Permit Req. Value NODI								0.8 Req Mon MO A\	= /G	1.22 Req Mon DAILY M	19 - mg/l X 19 - mg/l		DL/DS - Daily When Discharging DL/DS - Daily When Discharging	
82220	Flow, total	1 - Effluent Gross	0		Sample Permit Req. Value NODI		=	2.3 Req Mon MO TOT	80 - Mgal/mo FAL 80 - Mgal/mo								0	DL/DS - Daily When Discharging DL/DS - Daily When Discharging	

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: 2022-08-08 08:30 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89 Tim Gorden Name:

E-Mail: timg@sddcleanwater.org

Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit

IL0028321 Permit #:

Major: Yes Permittee: SANITARY DISTRICT OF DECATUR

501 DIPPER LANE **Permittee Address:**

DECATUR, IL 62522

Facility Location:

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE DECATUR, IL 62522

Permitted Feature:

800 External Outfall Discharge: 0-800

DMR Due Date:

Title:

TREATED CSO-SEVENTH WARD

Report Dates & Status

Monitoring Period: From 07/01/22 to 07/31/22 08/25/22

Status: **NetDMR Validated**

Considerations for Form Completion

W1150150004; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

Last Name:

First Name: Kent

Newton

Executive Director

Telephone: 217-422-6931

No Data Indicator (NODI)

Form NODI:

	Parameter	Monitoring Location	Season # Param. NO	DI			Quantity o	r Loading				Qua	ality or Concentr	ation			# of Ex.	Frequency of Analysis	Sample Type
Code	Name				Qualifier '	1 Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
				Sample											64.0	19 - mg/		DL/DS - Daily When Discharging	g GR - GRAB
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	Permit Req											Req Mon DAILY	MX 19 - mg/	0	DL/DS - Daily When Discharging	g GR - GRAB
	,, ,			Value NOD															
				Sample						=	7.18			=	7.18	12 - SU		DL/DS - Daily When Discharging	g GR - GRAB
00400	pH	1 - Effluent Gross	0	Permit Req							Req Mon MINIMUM	1			Req Mon MAXIM	UM 12 - SU	0	DL/DS - Daily When Discharging	g GR - GRAB
00100	P	1 Emacin Groot		Value NOD															
				Sample										=	429.0	19 - mg/		DL/DS - Daily When Discharging	g GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0	Permit Req											Req Mon DAILY	MX 19 - mg/		DL/DS - Daily When Discharging	
00000	Conac, total casponaca	1 Emacin Groot		Value NOD															
				Sample										=	0.51	19 - mg/	L	DL/DS - Daily When Discharging	g GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	Permit Req											Req Mon DAILY	MX 19 - mg/	0	DL/DS - Daily When Discharging	g GR - GRAB
000.0	······oge···, a·······o·····a total [ao 1.]	. I I I I I I I I I I I I I I I I I I I		Value NOD															
				Sample								=	1.09	=	1.09	19 - mg/	L	DL/DS - Daily When Discharging	g GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	Permit Req									Req Mon MO AV	G	Req Mon DAILY	MX 19 - mg/	- 0	DL/DS - Daily When Discharging	g GR - GRAB
00000	· ···op···o··ae, ·o··a·· [ae ·]			Value NOD															
				Sample			= 4.7	73	80 - Mgal/mo									DL/DS - Daily When Discharging	g CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0	Permit Req			Re	eq Mon MO TOTAL	80 - Mgal/mo								0	DL/DS - Daily When Discharging	g CN - CONTIN
OLLLO	i ion, total	. Emasile Gross		Value NOD															

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

One day 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: 2022-08-08 08:32 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89 Tim Gorden Name:

E-Mail: timg@sddcleanwater.org

Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit	#:	IL0028321		Perr	nittee:		SANITAF	RY DISTI	RICT OF DECATU	R			Facility:	:	SAN	NITARY	Y DIS	TRICT	OF DECATUR MAI	N STP
Major:		Yes		Peri	mittee Addr		501 DIPF DECATU						Facility	Location:		DIPPE CATUR				
Permitt	ted Feature:	A03 External Outfall		Disc	charge:		A03-0 CSO-OA	KLAND /	AVENUE CSO TRI	EATMEN	T BYPAS	S								
Report	Dates & Sta	tus		ļ																
Monito	ring Period:	From 07/01/22	to 07/31	/22 DMF	R Due Date:	:	08/25/22						Status:		Net	DMR V	/alida	ated		
Consid	derations for	Form Completion	1	,																
W13702	200010 ; RE0	CEIVING WATER:	BRIAR C	REEK																
Princip	oal Executive	Officer																		
First Na	ame:	Kent		Title):		Executive	e Directo	r				Telepho	ne:	217	'-422-6	931			
Last Na	ame:	Newton											,							
No Data	ta Indicator (NODI)		·																
Form N	NODI:																			
		Monitoring Location	Season #	Param. NOD					or Loading					Concentration				of Ex.	Frequency of Analysis	Sample Ty
Code	Name				Sample	Qualifier	1 Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2 Qual	ifier 3 \	Value 3 l	Units			
74062	Overflows	1 - Effluent Gross	0		Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
Submis	ssion Note	1 - Effluent Gross oes not contain an			Permit Req. Value NODI	uent Trac	ding, then		C - No Discharge			for that	row: Units	s, Number c	of Excu	ursions	, Fred	quency	of Analysis, and Sa	mple Typ
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Permit SANITARY DISTRICT OF DECATUR Facility: SANITARY DISTRICT OF DECATUR MAIN STP Permit #: IL0028321 Permittee: Yes 501 DIPPER LANE Facility Location: 501 DIPPER LANE Major: **Permittee Address:** DECATUR, IL 62522 DECATUR, IL 62522 A04 Discharge: A04-0 Permitted Feature: External Outfall CSO-LINCOLN PARK CSO TREATMENT BYPASS Report Dates & Status **DMR Due Date:** Status: Monitoring Period: From 07/01/22 to 07/31/22 08/25/22 **NetDMR Validated Considerations for Form Completion** W1370200010; RECEIVING WATER:BRIAR CREEK **Principal Executive Officer** Kent Title: **Executive Director** Telephone: 217-422-6931 First Name: Last Name: Newton No Data Indicator (NODI) Form NODI: Monitoring Location Season # Param. NODI # of Ex. Frequency of Analysis Sample Type Parameter Quantity or Loading **Quality or Concentration** Qualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 2 Value 2 Qualifier 3 Value 3 Units Code Name Sample Opt Mon MO TOTAL 4K - #/mo Permit Req. 74062 **Overflows** 1 - Effluent Gross 0 C - No Discharge 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 No discharge during the month. **Attachments** No attachments. Report Last Saved By SANITARY DISTRICT OF DECATUR User: keithrsdd Name: Keith Richard E-Mail: keithr@sddcleanwater.org Date/Time: 2022-08-08 08:33 (Time Zone: -05:00) Report Last Signed By User: TIMSDD89 Tim Gorden Name: E-Mail: timg@sddcleanwater.org Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit																			
Permit	#:	IL0028321			Permittee):	SANITAF	RY DISTRICT OF D	DECATU	R	Facili	ity:		SANITA	RY DISTE	RICT	OF D	DECATUR MAIN ST	Р
Major:		Yes			Permittee	Address:		PER LANE JR, IL 62522			Facili	ity Location	on:		PER LAN JR, IL 625				
Permit	ted Feature:	A06 External Out	fall		Discharg	e:	A06-0 CSO-FAI	IRVIEW PARK CS	0										
Report	Dates & Sta	atus																	
Monito	ring Period:	From 07/01/2	22 to 07	/31/22	DMR Due	Date:	08/25/22				Statu	s:		NetDMR	Nalidate	d			
Consid	lerations for	Form Completion	1																
W1370	200010 ; RE	CEIVING WATER:	BRIAR C	CREEK															
Princip	al Executive	e Officer																	
First N	ame:	Kent			Title:		Executive	e Director			Telep	hone:		217-422	-6931				
Last Na	ame:	Newton																	
No Dat	a Indicator	(NODI)																	
Form N	IODI:																		
Pa	rameter	Monitoring Location	Season	# Param. NOD	I			or Loading				Quality or					f Ex.	Frequency of Analysis	Sample Type
Code	Name				Sample	Qualifier 1 Val	lue 1 Qualifier 2	2 Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3 Un	its			
74062	Overflows	1 - Effluent Gross	0		Permit Req.			Opt Mon MO TOTAL	4K - #/mo)									
74002	Overnows	1 - Lindent Gloss			Value NODI			C - No Discharge											
Submis	ssion Note			l					ı					ı					
If a para	ameter row o	loes not contain an	y values	for the Sam	ple nor Effl	uent Trading,	, then none of	f the following fields	s will be s	submitted	for that	t row: Unit	s, Num	ber of Exc	cursions, F	reque	ency	of Analysis, and Sa	ample Type.
	neck Errors		-																
No erro	ors.																		
Comm	ents																		
No disc	harge during	the month.																	
Attach	ments																		
No attach	ments.																		
Report	Last Saved	By																	
SANITA	ARY DISTRI	CT OF DECATUR																	
User:				keithrsdd															
Name:				Keith Ric															
E-Mail:				keithr@sdd															
Date/Ti				2022-08-08	8 08:33 (T	ime Zone: -0	05:00)												
Report	Last Signe	d By																	
User:				TIMSDD89															
Name:				Tim Gord															
E-Mail:				timg@sddd															
Date/Ti	me:			2022-08-08	3 13:46 (T	ime Zone: -0	05:00)												

Permit SANITARY DISTRICT OF DECATUR Facility: SANITARY DISTRICT OF DECATUR MAIN STP Permit #: IL0028321 Permittee: Yes 501 DIPPER LANE Facility Location: 501 DIPPER LANE Major: Permittee Address: DECATUR, IL 62522 DECATUR, IL 62522 A07 Discharge: A07-0 Permitted Feature: CSO-MCKINLEY AVE CSO TREATMENT BYPASS External Outfall Report Dates & Status DMR Due Date: Status: Monitoring Period: From 07/01/22 to 07/31/22 08/25/22 **NetDMR Validated Considerations for Form Completion** W1370200010; RECEIVING WATER:BRIAR CREEK **Principal Executive Officer** Kent Title: **Executive Director** Telephone: 217-422-6931 First Name: Last Name: Newton No Data Indicator (NODI) Form NODI: Monitoring Location Season # Param. NODI # of Ex. Frequency of Analysis Sample Type Parameter Quantity or Loading **Quality or Concentration** Qualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 2 Value 2 Qualifier 3 Value 3 Units Code Name Sample Opt Mon MO TOTAL 4K - #/mo Permit Req. 74062 **Overflows** 1 - Effluent Gross 0 C - No Discharge 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 No discharge during the month. **Attachments** No attachments. Report Last Saved By SANITARY DISTRICT OF DECATUR User: keithrsdd Name: Keith Richard E-Mail: keithr@sddcleanwater.org Date/Time: 2022-08-08 08:34 (Time Zone: -05:00) Report Last Signed By User: TIMSDD89 Tim Gorden Name: E-Mail: timg@sddcleanwater.org Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit	#:	IL0028321		P	ermittee:		SANIT	ARY DIST	TRICT OF DECAT	UR			Facility:		SANI	TARY DI	STRIC [®]	Γ OF DECA	TUR MAIN	I STP
Major:		Yes		P	ermittee Ad	dress:		PPER LA TUR, IL 6					Facility L	ocation:		IPPER L ATUR, IL				
Permitt	ted Feature:	A08 External Outfall	l	D	ischarge:		A08-0 CSO-S	SEVENTH	WARD CSO TRE	ATMENT	BYPASS	6								
Report	Dates & Star	tus		·																
Monito	ring Period:	From 07/01/22	to 07/31	/22 D	MR Due Dat	te:	08/25/2	22					Status:		NetD	MR Valid	dated			
Consid	derations for	Form Completion	1	·																
W13702	200010 ; REC	EIVING WATER:	BRIAR C	REEK																
Princip	oal Executive	Officer																		
First Na	ame:	Kent		Т	tle:		Execut	ive Direct	tor				Telephon	e:	217-4	22-6931				
Last Na	ame:	Newton																		
No Dat	ta Indicator (I	NODI)																		
Form N	IODI:																			
		Monitoring Location	Season #	Param. NO	DI				or Loading					oncentration				. Frequency	of Analysis	Sample Type
Code	Name				Sample	Qualifier	1 Value 1	Qualifier 2	2 Value 2	Units	Qualifier 1	1 Value 1	Qualifier 2	/alue 2 Quali	fier 3 Va	lue 3 Unit	s			
74062	Overflows	1 - Effluent Gross	0		Permit Req	-			Opt Mon MO TOTAL	4K - #/mo										
7 1002	0.101110110	1 Emdoni Grood			Value NOD	ı			C - No Discharge											
Submis	ssion Note		1				'	'	1	'	·			'		'		_		
If a para	ameter row do	es not contain any	y values	for the Sa	mple nor Eff	luent Trad	dina tha											f A b	1 0-	
	heck Errors						aing, me	n none or	the following field:	s will be s	submitted	for that	t row: Units	, Number of	f Excur	sions, Fı	requenc	y of Analys	s, and Sa	mpie i ype.
No erro					•	idoni ira	airig, trie	n none of	the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, F	equen	y of Analys	s, and Sa	mpie Type.
	ors.				•	idom Tra	aing, the	n none of	the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, F	requend	cy of Analys	s, and Sa	пріе Туре.
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	ents	the month.					aing, the	n none of	the following fields	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, Fr	requenc	y of Analys	s, and Sa	тріе Туре.
	ents charge during	the month.					aing, trie	n none of	the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	rsions, Fi	equen	ey of Analys	s, and Sa	тріе Туре.
No disc	ents charge during ments	the month.					aing, trie	n none or	the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	rsions, Fi	equen	ey of Analys	s, and Sa	тріе Туре.
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No disc Attachi No attachi Report SANITA User:	ents charge during ments ments. t Last Saved I	Ву		Keith F	ichard ddcleanwate	er.org			the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, Fi	requenc	y of Analys	s, and Sa	пріє туре.
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No disc Attachi No attachi Report SANITA User: Name: E-Mail: Date/Tii	ents charge during ments ments Last Saved ARY DISTRIC	By ET OF DECATUR		Keith Fikeithr@s 2022-08-	ichard ddcleanwate 08 08:34 (*	er.org			the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, Fi	requenc	y of Analys	s, and Sa	пріє і уре.
No disc Attachi No attachi Report SANITA User: Name: E-Mail: Date/Tii Report User: Name:	ents charge during ments ments. chast Saved ARY DISTRIC	By ET OF DECATUR		Keith Fikeithr@s 2022-08- TIMSDD Tim Go	ichard ddcleanwate 08 08:34 (* 39 rden	er.org Time Zon			the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, Fi	requenc	y of Analys	s, and Sa	пріє туре.
No disc Attachi No attachi Report SANITA User: Name: E-Mail: Date/Tin Report User:	charge during ments ments t Last Saved ARY DISTRIC	By ET OF DECATUR		Keith Fikeithr@s 2022-08- TIMSDD Tim Gottimg@sd	ichard ddcleanwate 08 08:34 (*	er.org Time Zon	ne: -05:00	D)	the following field:	s will be s	submitted	for that	t row: Units	, Number o	f Excur	sions, Fi	requenc	y of Analys	s, and Sa	пріє і уре.

Permit Facility: IL0028321 Permittee: SANITARY DISTRICT OF DECATUR SANITARY DISTRICT OF DECATUR MAIN STP Permit #: 501 DIPPER LANE Major: Yes **Permittee Address: Facility Location:** 501 DIPPER LANE DECATUR, IL 62522 DECATUR, IL 62522 INF Discharge: INF-G **Permitted Feature:** Influent Structure INFLUENT FLOW FROM GROUNDWATER DEWATERING SYSTEM Report Dates & Status **DMR Due Date: Monitoring Period:** From 07/01/22 to 07/31/22 08/25/22 Status: **NetDMR Validated Considerations for Form Completion Principal Executive Officer** First Name: Kent Title: **Executive Director** Telephone: 217-422-6931 Last Name: Newton No Data Indicator (NODI) Form NODI: Monitoring Location Season # Param. NODI # of Ex. Frequency of Analysis Sample Type Quantity or Loading Quality or Concentration Qualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 2 Value 2 Qualifier 3 Value 3 Units Code Sample Reg Mon MO AVG Req Mon DAILY MX 99/99 - Continuous 03 - MGD Permit Req. 50050 Flow, in conduit or thru treatment plant 1 - Effluent Gross 0 Q - Not Quantifiable Q - Not Quantifiable 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 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: 2022-08-08 08:35 (Time Zone: -05:00) Report Last Signed By User: TIMSDD89 Tim Gorden Name: E-Mail: timg@sddcleanwater.org Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)

Permit

IL0028321 Permit #:

Permittee:

SANITARY DISTRICT OF DECATUR

Facility: SANITARY DISTRICT OF DECATUR MAIN STP

Major: Yes Permittee Address:

DMR Due Date:

Title:

Facility Location:

Status:

501 DIPPER LANE DECATUR, IL 62522

08/25/22

Executive Director

501 DIPPER LANE DECATUR, IL 62522

Permitted Feature:

INF Influent Structure Discharge: INF-L INFLUENT REPORTING

Report Dates & Status

Monitoring Period: From 07/01/22 to 07/31/22

NetDMR Validated

Considerations for Form Completion

W1150150004

Principal Executive Officer

First Name: Kent

Telephone: 217-422-6931

Last Name: Newton

No Data Indicator (NODI)

Form NODI:

. 0	1001.																		
	Parameter	Monitoring Location	Season #	# Param. NOD	ı		Q	uantity or Loadi	ing				Quality or Con	centration		7	f of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1 V	alue 1 Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
					Sample							=	123.0			19 - mg/L	0:	2/DA - 2 Days Every Week	CP - COMPO
00310	BOD, 5-day, 20 deg. C	G - Raw Sewage Influent	0		Permit Req	ı.							Req Mon MO AV	G		19 - mg/L	0	2/DA - 2 Days Every Week	CP - COMPO
000.0	, c aa,, _c acg. c	o man comage minaom			Value NOD	1													
					Sample							=	240.0			19 - mg/L	0:	2/DA - 2 Days Every Week	CP - COMPO
00530	Solids, total suspended	G - Raw Sewage Influent	0		Permit Req								Req Mon MO AV	3		19 - mg/L	0	2/DA - 2 Days Every Week	CP - COMPO
00000	Consultation of the consul	o man comage minaom			Value NOD	1													
					Sample							=	30.35	=	33.0	19 - mg/L	0:	2/DA - 2 Days Every Week	CP - COMPO
00665	Phosphorus, total [as P]	G - Raw Sewage Influent	0		Permit Req								Req Mon MO AV	3	Req Mon DAILY MX	19 - mg/L	0	2/DA - 2 Days Every Week	CP - COMPO
00000	· · · · · · · · · · · · · · · · · · ·	o man comage minaom			Value NOD	1													
					Sample	= 2	7.22	= 45	5.47	03 - MGD							9	9/99 - Continuous	RT - RCOTOT
50050	Flow, in conduit or thru treatment plant	G - Raw Sewage Influent	0		Permit Req	. R	eq Mon MO A\	/G R	eq Mon DAILY MX	03 - MGD							0 9	9/99 - Continuous	RT - RCOTOT
22300	,	- tan cowago minuoni			Value NOD	1													

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 Keith Richard Name:

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Date/Time: 2022-08-08 08:36 (Time Zone: -05:00)

Report Last Signed By

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Date/Time: 2022-08-08 13:46 (Time Zone: -05:00)