Form Approved OMB No. 2040-0004 expires on 07/31/2026 **DMR Copy of Record**

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(I)(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.

Permit Facility: Permit #: IL0028321 Permittee: SANITARY DISTRICT OF DECATUR SANITARY DISTRICT OF DECATUR MAIN STP Major: Yes Permittee Address: 501 DIPPER LANE **Facility Location:** 501 DIPPER LANE DECATUR, IL 62522 DECATUR, IL 62522 **Permitted Feature:** 001 Discharge: 001-0 **External Outfall** STP OUTFALL Report Dates & Status **DMR Due Date:** 06/25/24 **Monitoring Period:** From 05/01/24 to 05/31/24 Status: **NetDMR Validated Considerations for Form Completion** W1150150004; DMF LOAD LIMITS DISPLAYED. **Principal Executive Officer** First Name: Kent Title: **Executive Director** Telephone: 217-422-6931

Newton

Last Name:

No Data	a Indicator (NODI)																			
Form N	ODI:																			
	Parameter	Monitoring Location	Season #	# Param. NODI			Qu	antity or Loa	nding					Quality or Conce	entration			# 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			
					Sample								=	7.38	=	7.29	19 - mg/L		02/DA - 2 Days Every Week	
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0		Permit Req.								>=	6.25 MN WK AV	>=	5.0 DAILY MN	19 - mg/L	0	02/DA - 2 Days Every Week	GR - GRAB
					Value NODI															
					Sample						=	7.52			=	7.83	12 - SU		02/DA - 2 Days Every Week	GR - GRAB
00400	рН	1 - Effluent Gross	0	<u></u>	Permit Req.						>=	6.0 MINIMUM			<=	9.0 MAXIMUM	12 - SU	0	02/DA - 2 Days Every Week	GR - GRAB
00100	P.	1 Emdon oroso	J		Value NODI															
					Sample	= 1	666.0	_	2610.0	26 - lb/d			=	6.0	=	9.0	19 - mg/L		02/DA - 2 Days Every Week	CP - COMPOS
00500	Oalida tatal assessmented	4 550			Permit Req.		6063.0 MO AVG		46913.0 WKLY AVG				<=	25.0 MO AVG	<=	45.0 WKLY AVG	19 - mg/L		02/DA - 2 Days Every Week	
00530	Solids, total suspended	1 - Effluent Gross	0		Value NODI												J - J	_ 0		
					Sample								=	8.91	=	8.91	19 - mg/L		•	CP - COMPOS
00600	Nitrogen, total [as N]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - COMPOS
					Value NODI															
					Sample		03.0	=	136.0	26 - lb/d			=	0.4	=	0.53	19 - mg/L		02/DA - 2 Days Every Week	CP - COMPOS
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	4		Permit Req.	<= 1	564.0 MO AVG	<=	3128.0 DAILY MX	26 - lb/d			<=	1.5 MO AVG	<=	3.0 DAILY MX	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
					Value NODI															
					Sample								=	15.4	=	19.0	19 - mg/L	+	02/DA - 2 Days Every Week	CP - COMPOS
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX			02/DA - 2 Days Every Week	CP - COMPOS
00000	· noophorae, total [ao ·]	1 Emdon oroso	J		Value NODI															
					Sample										=	365.0	19 - mg/L		01/30 - Monthly	CP - COMPOS
00040	011 11 1 00	4 500			Permit Reg.										_	Reg Mon DAILY MX				CP - COMPOS
00940	Chloride [as Cl]	1 - Effluent Gross	0		Value NODI														,	
					Sample										=	300.0	19 - mg/L		,	CP - COMPOS
00945	Sulfate, total [as SO4]	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - COMPOS
					Value NODI															
					Sample		.4			26 - lb/d			=	0.013			19 - mg/L		02/DA - 2 Days Every Week	
01067	Nickel, total [as Ni]	1 - Effluent Gross	0		Permit Req.	<= 4	0.0 MO AVG			26 - lb/d			<=	0.0381 MO AVG			19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
					Value NODI															
					Sample	= 3	3.01	=	51.64	03 - MGD									99/99 - Continuous	
50050	Flow in an drift or the standard to the	4 Effluent Cres	0		Permit Req.	R	Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									99/99 - Continuous	
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	U																	

				Value NODI													
				Sample								<	0.011	19 - mg/L		02/DA - 2 Days Every Week	GR - GRAB
50060	Chlorine, total residual	1 - Effluent Gross	0	 Permit Req.								<=	0.05 DAILY MX	19 - mg/L	0	02/DA - 2 Days Every Week	GR - GRAB
				Value NODI													
				Sample								=	52.0	13 - #/100mL		02/DA - 2 Days Every Week	GR - GRAB
74055	Coliform, fecal general	1 - Effluent Gross	0	 Permit Req.								<=	400.0 DAILY MX	13 - #/100mL	0	02/DA - 2 Days Every Week	GR - GRAB
	3			Value NODI													
				Sample	=	532.0	=	668.0	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 AVG	<=	41700.0 WKLY AVG	26 - lb/d	<=	20.0 MO AVG	<=	40.0 WKLY AVG	19 - mg/L	0	02/DA - 2 Days Every Week	CP - COMPOS
23002				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: 2024-06-13 10:05 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit

Major:

Permit #: IL0028321

Permittee:

Discharge:

DMR Due Date:

Title:

SANITARY DISTRICT OF DECATUR

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

Permittee Address: 501 DIPPER LANE DECATUR, IL 62522 Facility Location:

501 DIPPER LANE DECATUR, IL 62522

Permitted Feature: 002

External Outfall

002-0

EMERGENCY HIGH LEVEL OVERFLOW BYPASS

Report Dates & Status

Monitoring Period: From 05/01/24 to 05/31/24

Yes

06/25/24

Status: No

NetDMR Validated

Considerations for Form Completion

W0430350001

Principal Executive Officer

First Name:

Kent Newton Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

Last Name:

orm NODI: --

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

Submission Note

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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: 2024-06-13 10:05 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89

Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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	m	

Major:

Permit #: IL0028321 Permittee: **Permittee Address:**

Discharge:

DMR Due Date:

SANITARY DISTRICT OF DECATUR

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE DECATUR, IL 62522 **Facility Location:**

501 DIPPER LANE DECATUR, IL 62522

External Outfall

003-0

TREATED CSO-OAKLAND AVENUE

Report Dates & Status

Permitted Feature:

Monitoring Period: From 05/01/24 to 05/31/24 06/25/24

Status: **NetDMR Validated**

Considerations for Form Completion

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

Principal Executive Officer

First Name:

Last Name:

Kent Newton

Yes

003

Title:

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

	Parameter	Monitoring Location	Season	# Param. NODI				Quantity	or Loading				Qu	ality or Concentrat	tion		# (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										=	78.0	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
					Value NODI															
					Sample						=	7.04			=	7.37	12 - SU	D	L/DS - Daily When Discharging	GR - GRAB
00400	рН	1 - Effluent Gross	0		Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU	D	L/DS - Daily When Discharging	GR - GRAB
00.00	F				Value NODI															
					Sample										=	424.0	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00000	conde, total cuopondou	1 Lindon Grood			Value NODI															
					Sample										=	7.57	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00010	This ogon, annionia total [ao 11]	1 Lindon Grood			Value NODI															
					Sample								=	5.35	=	9.81	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	D	L/DS - Daily When Discharging	GR - GRAB
00000	r nosphorus, total [us r]	1 Emacin Gross			Value NODI															
					Sample			= 3	3.09	80 - Mgal/mo								D	L/DS - Daily When Discharging	CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0		Permit Req.			F	Req Mon MO TOTAL	80 - Mgal/mo								D	L/DS - Daily When Discharging	CN - CONTIN
02220	i ion, total	- Lindent Gross	U		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

Four days of discharge.

Attachments

No attachments.

Report Last Saved By

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:08 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Major:

Permit #: IL0028321

Permittee:
Permittee Address:

DMR Due Date:

SANITARY DISTRICT OF DECATUR

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

of Ex.

Units

19 - mg/L

Frequency of Analysis

DL/DS - Daily When Discharging

Sample Type

GR - GRAB

501 DIPPER LANE DECATUR, IL 62522

Facility Location:

501 DIPPER LANE DECATUR, IL 62522

Discharge:

004-0

TREATED CSO-LINCOLN PARK

Report Dates & Status

Permitted Feature:

Monitoring Period: From 05/01/24 to 05/31/24

06/25/24

Status:

NetDMR Validated

Considerations for Form Completion

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

Principal Executive Officer

First Name:

Last Name:

Kent

Newton

Yes

004

External Outfall

Title:

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

Parameter Monitoring Location Season # Param. NODI Quantity or Loading Qualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 3 Value 2 Qualifier 3 Value 3 Qualifier 3 Value 4 Qualifier 4 Value 4 Qualifier 5 Value 4 Qualifier 5 Value 6 Qualifier 6 Qualifier 6 Qualifier 7 Value 6 Qualifier 7 Value 6 Qualifier 7 Value 6 Qualifier 8 Qualifier 8 Value 9 Qualifier 9 9 Quali

00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	 Permit Req. Value NODI					Req Mon DAILY M	X 19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00.400		4 5" 40		Sample Permit Req.		=	7.12 Reg Mon MINIMUM		= 7.12 Reg Mon MAXIMU	12 - SU M 12 - SU	DL/DS - Daily When Discharging DL/DS - Daily When Discharging	
00400	рн	1 - Effluent Gross	0	 Value NODI								
				Sample					= 60.0	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0	 Permit Req.					Req Mon DAILY M	X 19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
	, ,			Value NODI								
				Sample					= 0.45	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	 Permit Req.					Req Mon DAILY M	X 19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
	[[Value NODI								
				Sample			=	1.18	= 1.18	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	 Permit Req.				Req Mon MO AVG	Req Mon DAILY M	X 19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00000	· ····································			Value NODI								
				Sample	= 0.3	80 - Mgal/mo					DL/DS - Daily When Discharging	CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0	 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

One day of discharge

Attachments

No attachments.

Report Last Saved By

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:09 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Major:

Permit #: IL0028321

Permittee:
Permittee Address:

DMR Due Date:

SANITARY DISTRICT OF DECATUR

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE

DECATUR, IL 62522

Facility Location:

501 DIPPER LANE DECATUR, IL 62522

Discharge:

007-0TREATED CSO-MCKINLEY AVENUE

ECATUR, IL 62522

Report Dates & Status

Permitted Feature:

Monitoring Period: From 05/01/24 to 05/31/24

06/25/24

Status: No

NetDMR Validated

Considerations for Form Completion

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

Principal Executive Officer

First Name:

Last Name:

Kent Newton

Yes

007

External Outfall

Title:

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

FOITH	Parameter	Monitoring Location	Saasan #	Param NODI				Quant	ity or Loading				Oı	ality or Concentra	tion		# of Ex	. Frequency of Analysis	Sample Type
Code	Name	Worldoning Location	Season #	Faraili. NODI		Qualifier :	l Value 1	Qualifier 2		Units	Qualifier 1	Value 1	Qualifier 2		Qualifier 3	Value 3	Units # 01 EX	. Frequency of Analysis	Sample Type
Oouc	Hamo				Sample	Qualifici	value i	Qualifici 2	Z Value Z	Omto	Qualifier 1	Value 1	Qualifici 2	Value 2	=	52.0	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00040	DOD 5 dess 00 dess 0	4 F#Illiant Crass	0		Permit Req.											Reg Mon DAILY MX	-	DL/DS - Daily When Discharging	GR - GRAB
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	U		Value NODI												J. J.		
					Sample						=	7.22			=	7.22	12 - SU	DL/DS - Daily When Discharging	GR - GRAB
00400	рН	1 - Effluent Gross	0		Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU	DL/DS - Daily When Discharging	GR - GRAB
00.00		. Imagin cross			Value NODI														
					Sample										=	720.0	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
					Sample										=	0.8	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
	1				Value NODI														
					Sample								=	1.39	=	1.39	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00000	, 1100k1101 no. 1101 no. 1	. Zimasin eress			Value NODI														
					Sample			=	2.47	80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0		Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
5225	,	2			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

One day of discharge

Attachments

No attachments.

Report Last Saved By

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:11 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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(I)(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.

	m	

Major:

Permit #: IL0028321

Permittee:
Permittee Address:

Discharge:

DMR Due Date:

SANITARY DISTRICT OF DECATUR

Facility:
Facility Location:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE DECATUR, IL 62522

501 DIPPER LANE DECATUR, IL 62522

Permitted Feature: 008

External Outfall

008-0

TREATED CSO-SEVENTH WARD

Report Dates & Status

Monitoring Period: From 05/01/24 to 05/31/24

06/25/24

Status:

NetDMR Validated

Considerations for Form Completion

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

Principal Executive Officer

First Name: Last Name: Kent Newton

Yes

Title:

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

	Parameter	Monitoring Location	Season #	Param. NODI				Quantit	y or Loading				Qua	ality or Concentra	ition		# 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										=	49.0	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
					Value NODI														
					Sample						=	7.05			=	7.21	12 - SU	DL/DS - Daily When Discharging	GR - GRAB
00400	pH	1 - Effluent Gross	0		Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU	DL/DS - Daily When Discharging	GR - GRAB
	•				Value NODI														
					Sample										=	296.0	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00000	остас, тота: своротиси	. Lindoin Groos			Value NODI														
					Sample										=	0.77	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0		Permit Req.											Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
000.0	·····oge···, a······e····a teta: [ae ···]	. Lindoin Groos			Value NODI														
					Sample								= (0.82	=	1.08	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit Req.								ļ l	Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	DL/DS - Daily When Discharging	GR - GRAB
	a sacopsicoso, sessa que e ,				Value NODI														
					Sample			=	5.03	80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
82220	Flow, total	1 - Effluent Gross	0		Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo								DL/DS - Daily When Discharging	CN - CONTIN
- 0			-		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

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:12 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit Permit #: IL0028321 Permittee: SANITARY DISTRICT OF DECATUR Facility: SANITARY DISTRICT OF DECATUR MAIN STP Major: Yes Permittee Address: 501 DIPPER LANE **Facility Location:** 501 DIPPER LANE DECATUR, IL 62522 DECATUR, IL 62522 **Permitted Feature:** A03 Discharge: A03-0 External Outfall CSO-OAKLAND AVENUE CSO TREATMENT BYPASS Report Dates & Status **DMR Due Date:** Status: **Monitoring Period:** From 05/01/24 to 05/31/24 06/25/24 **NetDMR Validated Considerations for Form Completion** W1370200010 ; RECEIVING WATER:BRIAR CREEK **Principal Executive Officer** First Name: Kent Title: **Executive Director** Telephone: 217-422-6931

Last Name:

No Data Indicator (NODI)

Form NODI: --

1	Parameter	Monitoring Location	Season #	Param. NODI				Quantity	or Loading				Quality or	Concentrat	ion			# 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															
74062	Overflows	1 - Effluent Gross	0		Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
302	3.0				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: keithrsdd
Name: Keith Richard

Newton

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:13 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit

Major:

Permit #: IL0028321

Permittee:

SANITARY DISTRICT OF DECATUR

501 DIPPER LANE

DECATUR, IL 62522

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

Facility Location:

501 DIPPER LANE

DECATUR, IL 62522

Permitted Feature:

A04 External Outfall

Yes

Discharge: A04-0

Permittee Address:

DMR Due Date:

Title:

CSO-LINCOLN PARK CSO TREATMENT BYPASS

Report Dates & Status

Monitoring Period: From 05/01/24 to 05/31/24 06/25/24

Status:

NetDMR Validated

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name: **Last Name:**

Kent Newton

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

	Parameter	Monitoring Location	Season #	Param. NODI				Quantity	or Loading				Quality or	Concentrat	ion			# 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															
74062	Overflows	1 - Effluent Gross	0		Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
002	3.03				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: keithrsdd Keith Richard Name:

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:14 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89 Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit

Major:

Permit #: IL0028321 Permittee: **Permittee Address:**

DMR Due Date:

Title:

SANITARY DISTRICT OF DECATUR

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

Facility Location:

501 DIPPER LANE DECATUR, IL 62522

A06 Discharge: A06-0

CSO-FAIRVIEW PARK CSO

501 DIPPER LANE

DECATUR, IL 62522

Report Dates & Status

Permitted Feature:

Monitoring Period: From 05/01/24 to 05/31/24

Yes

Newton

External Outfall

06/25/24

Status: **NetDMR Validated**

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name: Kent **Executive Director**

Telephone:

217-422-6931

No Data Indicator (NODI)

Last Name:

Form NODI:

1	Parameter	Monitoring Location	Season #					Quantity	or Loading				Quality or	Concentrat	ion			# 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															
74062	Overflows	1 - Effluent Gross	0		Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
302	3.0				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: keithrsdd Keith Richard Name:

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:14 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89 Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit

Major:

Permit #: IL0028321

Permittee:
Permittee Address:

Discharge:

SANITARY DISTRICT OF DECATUR

Facility: Facility Location:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE

DECATUR, IL 62522

on: 501 DIPPER LANE DECATUR, IL 62522

Permitted Feature: A07

External Outfall

Yes

A07-0

CSO-MCKINLEY AVE CSO TREATMENT BYPASS

Report Dates & Status

Monitoring Period: From 05/01/24 to 05/31/24

06/25/24

Status: NetDMR Validated

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name: Last Name: Kent Newton Title:

DMR Due Date:

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

orm NODI: --

	Parameter	Monitoring Location	Season #	Param. NODI				Quantity	or Loading				Quality or	Concentrat	ion			# 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															
74062	Overflows	1 - Effluent Gross	0		Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
7 1002	Overnous	1 Lindon Cross			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: keithrsdd
Name: Keith Richard

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:15 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit

Major:

Permit #: IL0028321

Yes

Permittee:

SANITARY DISTRICT OF DECATUR

501 DIPPER LANE DECATUR, IL 62522 Facility Location:

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE

DECATUR, IL 62522

Permitted Feature: A08

External Outfall

From 05/01/24 to 05/31/24

A08-0

CSO-SEVENTH WARD CSO TREATMENT BYPASS

Permittee Address:

Discharge:

Title:

DMR Due Date:

06/25/24

Status:

NetDMR Validated

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

Report Dates & Status

Monitoring Period:

First Name:

Kent Newton Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

Last Name:

Р	arameter	Monitoring Location	Season #	Param. NODI				Quantity	or Loading				Quality or	Concentrat	ion			# 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															
74062	Overflows	1 - Effluent Gross	0		Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
	o voimono				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: keithrsdd
Name: Keith Richard

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:15 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89
Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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Permit

Major:

Permit #: IL0028321

Yes

Permittee: SANITARY DISTRICT OF DECATUR

> 501 DIPPER LANE DECATUR, IL 62522

Facility Location:

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE DECATUR, IL 62522

Permitted Feature:

INF

Discharge:

DMR Due Date:

Title:

Permittee Address:

INF-G INFLUENT FLOW FROM GROUNDWATER DEWATERING SYSTEM

Influent Structure

Report Dates & Status

Monitoring Period: From 05/01/24 to 05/31/24 06/25/24

Status:

NetDMR Validated

Considerations for Form Completion

Principal Executive Officer

First Name:

Kent Newton

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Last Name:

Form NODI:

	Parameter	Monitoring Location	Season #	Param. NODI			(Quantity or Load	ing				Quality 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															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0		Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD								9	99/99 - Continuous	
00000	rion, in conduit of the free plant	1 Lindon Grood			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 Keith Richard Name:

E-Mail: keithr@sddcleanwater.org

Date/Time: 2024-06-13 10:17 (Time Zone: -05:00)

Report Last Signed By

User: TIMSDD89 Name: Tim Gorden

E-Mail: timg@sddcleanwater.org

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(I)(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.

D	ermit	
-	CIIIIIL	

Major:

Permit #: IL0028321 Permittee: **Permittee Address:**

DMR Due Date:

SANITARY DISTRICT OF DECATUR

Facility:

SANITARY DISTRICT OF DECATUR MAIN STP

501 DIPPER LANE DECATUR, IL 62522 **Facility Location:**

501 DIPPER LANE DECATUR, IL 62522

Discharge:

INF-L

Influent Structure

INFLUENT REPORTING

Report Dates & Status

Permitted Feature:

Monitoring Period: From 05/01/24 to 05/31/24 06/25/24

Status: **NetDMR Validated**

Considerations for Form Completion

W1150150004

Last Name:

Principal Executive Officer

First Name: Kent

Newton

Yes

INF

Title:

Executive Director

Telephone:

217-422-6931

No Data Indicator (NODI)

Form NODI:

	Denometer	Manifeston Landing	0	A Damana NODI					U				0			4 - 5	E. E	OI- T
	Parameter	Monitoring Location	Season #	Param. NODI				Quantity or Loa					Quality or Cond				Ex. Frequency of Analysis	Sample Ty
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							=	90.0			19 - mg/L	02/DA - 2 Days Every Week	CP - COMP
00310	BOD, 5-day, 20 deg. C	G - Raw Sewage Influent	0		Permit Req.								Req Mon MO AVG			19 - mg/L	02/DA - 2 Days Every Week	CP - COMP
000.0	202,0 day, 20 dog. 0	Train Comago inimacin			Value NODI													
					Sample							=	144.0			19 - mg/L	02/DA - 2 Days Every Week	CP - COMPO
00530	Solids, total suspended	G - Raw Sewage Influent	0		Permit Req.								Req Mon MO AVG			19 - mg/L	02/DA - 2 Days Every Week	CP - COMP
00530	oonaa, totai oaaponaaa	o rian conago ililiacin			Value NODI													
					Sample							=	18.7	= 25	5.2	19 - mg/L	02/DA - 2 Days Every Week	CP - COMPO
00665	Phosphorus, total [as P]	G - Raw Sewage Influent	0		Permit Req.								Req Mon MO AVG	Re	eq Mon DAILY MX	19 - mg/L	02/DA - 2 Days Every Week	CP - COMPO
00000		Train Comago inimacin			Value NODI													
					Sample	= ;	33.37	=	52.34	03 - MGD							99/99 - Continuous	RT - RCOTO
50050	Flow, in conduit or thru treatment plant	G - Raw Sewage Influent	0		Permit Req.	i	Req Mon MO AV	G	Req Mon DAILY MX	03 - MGD							99/99 - Continuous	RT - RCOTO
50050	riow, in conduit or thru treatment plant	G - Kaw Sewage Influent			Value NODI													

Submission Note

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Edit Check Errors

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Comments

Attachments

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Report Last Saved By

SANITARY DISTRICT OF DECATUR

User: keithrsdd Name: Keith Richard

E-Mail: keithr@sddcleanwater.org

2024-06-13 10:21 (Time Zone: -05:00) Date/Time:

Report Last Signed By

TIMSDD89

Name: Tim Gorden

E-Mail: timg@sddcleanwater.org