PERMITTEE NAME: SA ADDRESS: 501 DIPPER DECATUR, IL 62	LANE	DISTRICT (OF DECA	TUR				COMMENTS: TREATMENT PLANT EFFLUENT
PHONE: 422-6931								
IL 0028321] [<u></u> .
PERMIT #		I	LATITUDE	LONGITUDE				*** NO DISCHARGE ***
REPORTING PERIOD	FROM	2010 YEAR	4 MO	1 DAY	ТО	2010 YEAR	4 MO	30 DAY

			QUANTITY					CONCENTRA		FREQUENCY			
PARAMETER	FLOW REPORTED 39. 50050 PERMIT *** CBOD5 REPORTED 67. 80082 PERMIT 20. NDED SOLIDS REPORTED 13. 00530 PERMIT 26. pH REPORTED *** 00400 PERMIT *** NIA NITROGEN REPORTED 6. 00610 PERMIT 15. INE RESIDUAL REPORTED *** 50060 PERMIT *** LCOLIFORM REPORTED *** 74055 PERMIT *** PRINCIPAL EXECUTIVE OFFICER									_			SAMPLE
		MONTH AVE	WEEK AVE	DAILY MAX	UNITS		MONTH AVE	WEEK AVE	DAILY MAX	UNITS		ANALYSIS	TYPE
						EX					EX		
FLOW	REPORTED	39.12	****	56.72			****	****	*****			CONTINU	JOUS
50050	PERMIT	****	****	****	MGD		****	****	****			CONTINU	JOUS
CBOD5	REPORTED	673	729	****			2	3	****			2/7	24HC
80082	PERMIT	20850	41700	****	lbs/D		20	40	*****	mg/l		2/7	24HC
SUSPENDED SOLIDS	REPORTED	1378	1812	****			5	7	*****			2/7	24HC
OO530	PERMIT	26063	46913	****	lbs/D		25	45	*****	mg/l		2/7	24HC
pН	REPORTED	****	****	****			7.7 MIN	****	7.9 MAX	STD.		2/7	grab
00400	PERMIT	****	****	****			6.0-9.0	****	6.0-9.0	UNITS		2/7	grab
AMMONIA NITROGEN	REPORTED	63	****	128			0.19	****	0.27			2/7	24HC
00610	PERMIT	1564	****	3128	lbs/D		1.5	****	3.0	mg/l		2/7	24HC
CHLORINE RESIDUAL	REPORTED	****	****	****			****	****	****			****	****
50060	PERMIT	****	****	****			****	****	****	mg/l		2/7	grab
FECAL COLIFORM	REPORTED	****	****	****			****	****	****	n/		****	****
74055	PERMIT	****	****	****			****	****	****	100 ml		2/7	grab
DISSOLVED OXYGEN	REPORTED	****	****	****			****	****	7.67			****	****
	PERMIT	****	****	****			****	****	MIN 6.0	mg/l		2/7	grab
NAME OF PRINCIPAL EXECU	TIVE OFFICER	₹	TITLE OF TH	E OFFICER			DATE	X					
CHERRY MONTE	A		EXECUTIVE	DIRECTOR			5/10/2010	SIGN	ATURE OF PRI	NCIPLE EX	KECU	TIVE	
LAST FIRST	MI		TITLE				YY/MM/DD		OFFICER OR A		D AC	GENT	
I CERTIFY UNDER PENALTY OF LAW THAT THAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUMMITTED INFORMATION IS TRUE, ACCURATE AND COMPETE. I AM AWARE THAT I HERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C & 1001 AND 33 U.S.C. & 1319. Penalties under thes statues may include fines up to \$10,000 and or maximum imprisonment of between 6 monts and 5 years.													
Receiving Water: Sangamon Riv	er	Number of Day	ys of Discharge	:								Page 2 of 6	j

PERMITTEE NAME: SANITA	ARY DISTRIC	CT OF DECA	TUR		7			COLDETA	ma.
ADDRESS: 501 DIPPER LAND DECATUR, IL 6252								TREAT	MENT PLANT INFLUENT
PHONE: 422-6931 IL 0028321 PERMIT #		Ę	ATITUDE	LONGITUDE			*** NO	O DISCHARG	E***
REPORTING PERIOD	FROM	2010 YEAR	4 MO	1 DAY	ТО	2010 YEAR	4 MO	30	
DARAMETER		Q	UANTITY			C	CONCENT	RATION	FREQUENCY

			QUANTITY					CONCENTRA]	FREQUENCY	<i>7</i> :		
PARAMETER												OF	SAMPLE
		MONTH AVE	WEEK AVE	DAILY MAX	UNITS	NO	MONTH AVE	WEEK AVE	DAILY MAX	UNITS	NO	ANAYSIS	TYPE
						EX					EX		
FLOW	REPORTED	36.08	****	52.12			****	*****	****			CONT.	REC.
50050	PERMIT	****	****	****	MGD		****	*****	****				TOTAL
BOD5	REPORTED	****	****	****			108	*****	****			2/7	24-C
00310	PERMIT	****	****	****			****	*****	****	mg/l		2/7	24-C
SUSPENDED SOLIDS	REPORTED	****	****	****			240	*****	****			2/7	24-C
OO530	PERMIT	****	****	****			****	*****	****	mg/l		2/7	24-C
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
NAME OF PRINCIPAL EXECUTIVE O	FFICER		TITLE OF THE	E OFFICER			DATE	X					
CHERRY MONTE	A		EXECUTIVE I				5/10/2010	SIGNATURE (E	
LAST FIRST	M.		TITLE		THAT THA	/F PFF	YY/MM/DD RSONALLY EXAMINED	OFFICER OR			Γ		

TCERTIFY UNDER PENALTY OF LAW THAT THAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUMMITTED INFORMATION IS TRUE, ACCURATE AND COMPETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. Penalties under thes statues may include fines up to \$10,000 and or maximum imprisonment of between 6 monts and 5 years.

Page 1 of 6

PERMITTEE NAME: SAN		TRICT OF D	ECATUR						COMMENTS:				
ADDRESS: 501 DIPPER L DECATUR, IL 6252					ı				TREATED	CSO-OA			-
PHONE: 422-6931	_] -			Number of	f Days of Discha	rge:	2]	
IL 002832	1											_	
PERMIT	#		LATITUDE	LONGITUDE					*** NO DISC	CHARGE		***	
REPORTING PERIOD	FROM	2010 YEAR	4 MO	1 DAY		ТО	2010 YEAR	4 MO	30 DAY				
			QUANTITY					CONCENTRA	TION			FREQUENCY	
PARAMETER				I	-l		· -				1	OF	SAMPLE
		DAILY AVE	WEEK AVE	MONTH AVI	UNITS	EX	MONTH AVE	WEEK AVE	DAILY MAX	UNITS	NO EX		TYPE
FLOW	REPORTED	****	****	0.48		EA	****	****	****		EA	CONT	N/A
82220	PERMIT	****	****	Total	MGAI		****	****	****	1			Contin
BOD5	REPORTED	****	****	*****	MGAI	<u> </u>	138	****	****		₩	DL/DS	CP
00310	PERMIT	****	****	****	lbs/D	\vdash	****	****	****	mg/l	.	DL/DS DLY WH	GRAB
SUSPENDED SOLIDS	REPORTED	****	****	****	103/10	1 -	832	*****	****	IIIg/I	╁┷	DL/DS	СР
00530	PERMIT	****	****	****	lbs/D	\vdash	****	****	****	mg/l		DLY WH	GRAB
pH	REPORTED	****	****	****	100/2	1	7.3 MIN	****	7.3 MAX	STD.	Ħ	DL/DS	СР
00400	PERMIT	*****	****	****	1	1:::	6.0-9.0	****	6.0-9.0	UNITS		DLY WH	GRAB
	REPORTED					1	310 710				 	1	<u> </u>
	PERMIT				1					1			
	REPORTED					1					 		
	PERMIT				1					1			
	REPORTED												
	PERMIT				1					1			
	REPORTED											1	
	PERMIT												
NAME OF PRINCIPAL EXECUTIV	'E OFFICER		TITLE OF THI	E OFFICER			DATE	X					
CHERRY MONTE	A		EXECUTIVE 1		_		5/10/2010	SI	GNATURE OF				
LAST FIRST	MI			PENALTY OF LAW			RSONALLY EXAMINE THOSE INDIVIDUALS			MATION	ZED A	AGENT	
Pacciving Water: Sangamon Diver			THE INFORMATION THERE ARE SIGNI	N, I BELIEVE THE S FICANT PENALTIES U.S.C & 1001 AND 33 U.S.C	UMMITTE S FOR SUI	D INFO	THOSE INDIVIDUALS RMA HON IS TRUE, A NG FALSE INFORMAT or thes statues may include fines	CCURATE AND COL TON, INCLUDING TH	MPETE. I AM AWAR HE POSSIBILITY OF	E IHAI		Page 6 of	6

PERMITTEE NAME: SAI	- NITARY DI	STRICT OF	DECATUR		7				COLONENTES				
ADDRESS: 501 DIPPER I	LANE								COMMENTS:				
DECATUR, IL 6252	22								LINCOLN P	OUTFAL			
PHONE: 422-6931					I					UUITAL	<i>L</i> #0	04	
	<u> </u>				_			Number of Da	ys of Discharge:		1		
IL 0028321]]						—	-	
PERMIT #	‡		LATITUDE	LONGITUDE					*** NO DISCI	HARGE	<u></u>	***	
REPORTING PERIOD	FROM	2010 YEAR		1 DAY		ТО	2010 YEAR		30 DAY				
	T		QUANTITY					CONCENTRAT	TON			FREQUENCY	7
PARAMETER			Q 01									OF	SAMPLE
	<u> </u>	DAILY AVE	WEEK AVE	MONTH AVE	UNITS		MONTH AVE	WEEK AVE	DAILY MAX	UNITS		ANAYSIS	TYPE
== 0.				- 00	<u> </u>	EX			<u> </u>	<u> </u>	EX		/.
FLOW	REPORTED	****	****	0.00	_	<u> </u>	****	****	****	<u> </u>	<u> </u>	CONT	N/A
82220	PERMIT	****	****	Total	MG		****	****	****			Daily	Contin
BOD5	REPORTED	****	****	****		Щ	0	****	****		<u></u>	DL/DS	CP
00310	PERMIT	****	****	****	lbs/D)	****	****	****	mg/l	<u>[</u>	DLY WH	GRAB
SUSPENDED SOLIDS	REPORTED	****	****	*****			0	****	****			DL/DS	CP
OO530	PERMIT	****	****	*****	lbs/D	,	*****	****	****			DLY WH	GRAB
pН	REPORTED	****	****	****		\Box	0.0 MIN	****	0.0 MAX	STD.		DL/DS	CP
00400	PERMIT	****	****	****	1		6.0-9.0	****	6.0-9.0	UNITS	,	DLY WH	GRAB
	REPORTED			1									
	PERMIT			1	1					1		:	
	REPORTED			1					1			1	
	PERMIT				1			1	<u> </u>	1		:	
	REPORTED							1	<u> </u>		厂		
	PERMIT				1					1		:	
	REPORTED			1	1								
	PERMIT			1	1				1	1		:	
NAME OF PRINCIPAL EXECUTIV	VE OFFICER		TITLE OF THE	OFFICER			DATE	X					
CHERRY MONTE			EXECUTIVE D	IRECTOR]		5/10/2010	SIGNA	ATURE OF PRIN	CIPLE EX	ECU'	TIVE	
LAST FIRST	M.		TITLE		<u> </u>		YY/MM/DD		ICER OR AUTHO		GEN	ſΤ	
D W G. D.			SUBMITTED HEREIN THE INFORMATION, THERE ARE SIGNIFIC	N; AND BASED ON N , I BELIEVE THE SUI ICANT PENALTIES F S.C & 1001 AND 33 U.S.C. &	MY INQUIF MMITTED FOR SUBI	RY OF T INFOR MITTING	RSONALLY EXAMINED THOSE INDIVIDUALS II RMATION IS TRUE, ACC IG FALSE INFORMATIC thes statues may include fines up	IMMEDIATELY RESPO CURATE AND COMPE DN, INCLUDING THE P	NSIBLE FOR OBTAINI TE. I AM AWARE THA	NG AT		D 5	
Receiving Water: Sangamon River												Page 5 of	б

PERMITTEE NAME: SA ADDRESS: 501 DIPPER 1 DECATUR, IL 625	LANE	ISTRICT OF	DECATUR]				COMMENTS:	CSO D			_
PHONE: 422-6931	_]					OUTFAI	LL #(107	
IL 0028321	 I	1		T]			Number of da	ays discharged	3	ļ		
PERMIT #	#		LATITUDE	LONGITUDE	DE *** NO DISCHARGE ***								
REPORTING PERIOD	FROM	2010 YEAR		1 DAY		то	2010 YEAR		30 DAY				
			QUANTITY					CONCENTRAT	ION			FREQUENCY	=
PARAMETER		DAILY MAX	WEEK AVE	MONTH AVE	IINITC	INO	MONTH AVE	WEEK AVE	DAILY MAX	UNITS	INO	OF ANAYSIS	SAMPLE TYPE
	1	DAIL I WAA	WEEKAVE	MONITAVE	UNIIS	EX	MONITAVE	WEEK AVE	DAILI MAA	UNIIS	EX	ANATSIS	TIPE
FLOW	REPORTED	****	****	7.40			****	****	****			CONT	N/A
82220	PERMIT	****	****	Total	MG		****	****	****	1		Daily	Contin
BOD5	REPORTED	****	****	****		广	41	*****	****		Ë	DL/DS	СР
00310	PERMIT	****	****	****	lbs/D		****	****	****	mg/l		DLY WH	GRAB
SUSPENDED SOLIDS	REPORTED	****	****	****		<u> </u>	308	****	****		Ė	DL/DS	СР
OO530	PERMIT	****	****	****	lbs/D		****	****	****	mg/l		DLY WH	GRAB
pН	REPORTED	****	****	****			7.4 MIN	****	7.8 MAX	STD.		DL/DS	СР
00400	PERMIT	****	****	****	1		6.0-9.0	****	6.0-9.0	UNITS	<u> </u>	DLY WH	GRAB
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
	REPORTED												
	PERMIT												
NAME OF PRINCIPAL EXECUTI	IVE OFFICER		TITLE OF THE	OFFICER			DATE	X				•	
CHERRY MONTE	A		EXECUTIVE D		1		5/10/2010		URE OF PRINCIP	I E EXEC	ידו זי	VF	
LAST FIRST	MI		TITLE		1		YY/MM/DD		CER OR AUTHO				
Description Water Communication Discourse			THE INFURIMATION, THERE ARE SIGNIFI	, I BELIEVE THE SUI ICANT PENALTIES F	VIIVII I IED II FOR SUBMI	NFUKIV ITTING	HUSE INDIVIDUALS IM	UKATE AND COMPET N, INCLUDING THE PO	IT THE INFORMATION ISIBLE FOR OBTAININ E. LAM AWARE THAT DSSIBILITY OF FINE AN			D 2 5 (
Receiving Water: Sangamon River												Page 3 of 6	J

PERMITTEE NAME: SA	- NITARY D	ISTRICT OF	DECATUR]				COMMENTS				
ADDRESS: 501 DIPPER DECATUR, IL 625									7TH WARD				_
PHONE: 422-6931	_			-]							700	
		1 1		T	1			Number of d	ays discharged	2			
IL 0028321]]						_	7	
PERMIT #	‡		LATITUDE	LONGITUDE					*** NO DISC	HARGE		***	
REPORTING PERIOD	FROM	2010 YEAR	4 MO	1 DAY			2010 YEAR		30 DAY				
			QUANTITY					CONCENTRAT	TON			FREQUENC'	Y
PARAMETER				1					T =	T		OF	SAMPLI
		DAILY MAX	WEEK AVE	MONTH AVE	UNITS	EX	MONTH AVE	WEEK AVE	DAILY MAX	UNITS	NO EX		TYPE
FLOW	REPORTED	****	****	62.80		EA	****	****	****		EA	CONT	N/A
82220	PERMIT	****	****	Total	MG		****	****	****	1		Daily	Contir
BOD5	REPORTED	****	****	****	MIG	1	56	****	****	<u> </u>	 	DL/DS	CP
00310	PERMIT	****	****	****	lbs/D	<u> </u>	****	****	****	mg/l		DLY WH	GRAB
SUSPENDED SOLIDS	REPORTED	****	****	****	-70 107 -	<u> </u>	469	****	****	8		DL/DS	СР
00530	PERMIT	*****	****	****	lbs/D		****	****	****	mg/l		DLY WH	GRAB
pН	REPORTED	****	****	****			7.2 MIN	****	7.3 MAX	STD.		DL/DS	СР
00400	PERMIT	****	****	****	İ		6.0-9.0	****	6.0-9.0	UNITS	<u> </u>	DLY WH	GRAB
	REPORTED												
	PERMIT									1		:	
	REPORTED												
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	REPORTED												
	PERMIT												
	REPORTED]								
	PERMIT												
NAME OF PRINCIPAL EXECUT	IVE OFFICER		TITLE OF THE	OFFICER			DATE	X					
CHERRY MONTE	A	•	EXECUTIVE D	IRECTOR	1		5/10/2010	SIGNA	TURE OF PRINC	IPLE EX	ECU'	ΓΙVE	
LAST FIRST	MI		TITLE				YY/MM/DD	_	FICER OR AUTH		AGE	NT	
			SUBMITTED HEREIN THE INFORMATION, THERE ARE SIGNIFI	I; AND BASED ON M I BELIEVE THE SUN CANT PENALTIES F S.C & 1001 AND 33 U.S.C. &	IY INQUIR MMITTED I OR SUBM	Y OF T INFORM IITTING	SONALLY EXAMINED A HOSE INDIVIDUALS IN MATION IS TRUE, ACC FALSE INFORMATION HERS statues may include fines up to	MEDIATELY RESPOI URATE AND COMPE ⁻ N, INCLUDING THE P	NSIBLE FOR OBTAININ TE. I AM AWARE THA	IG Γ			
Receiving Water: Sangamon River	r											Page 4 of	6