

DMR Copy of Record

| | | | | | |
|--------------------|-------------------------|--------------------|--------------------------------------|--------------------|--------------------------------------|
| Permit | | | | | |
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP | Facility: | DECATUR SD MAIN STP |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 |
| Permitted Feature: | 001 External Outfall | Discharge: | 001-0 STP OUTFALL | | |

| | | | | | |
|----------------------------------|---------------------------|---------------|----------|---------|------------------|
| Report Dates & Status | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | DMR Due Date: | 03/15/17 | Status: | NetDMR Validated |

Considerations for Form Completion
DMF LOAD LIMITS DISPLAYED.

| | | | | | |
|------------------------------------|--------|--------|--------------------|------------|--------------|
| Principal Executive Officer | | | | | |
| First Name: | Kent | Title: | Executive Director | Telephone: | 217-422-6931 |
| Last Name: | Newton | | | | |

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 |
| 00300 | Oxygen, dissolved [DO] | 1 - Effluent Gross | 0 | -- | Sample | = | 8.35 | | | | | | | | 19 - mg/L | 02/DA - 2 Days Every Week | GR - GRAB | |
| | | | | | Permit Req. | >= | 6 MINIMUM | | | | | | | | 19 - mg/L | 02/DA - 2 Days Every Week | GR - GRAB | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| 00400 | pH | 1 - Effluent Gross | 0 | -- | Sample | = | 7.88 | | | | = | 8.24 | | | 12 - SU | 02/DA - 2 Days Every Week | GR - GRAB | |
| | | | | | Permit Req. | >= | 6 MINIMUM | | | <= | 9 MAXIMUM | | | 12 - SU | 02/DA - 2 Days Every Week | GR - GRAB | | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | -- | Sample | = | 1183 | = | 1198 | 26 - lb/d | = | 5 | = | 6 | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | <= | 26063 MO AVG | <= | 46913 WKLY AVG | 26 - lb/d | <= | 25 MO AVG | <= | 45 WKLY AVG | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| 00610 | Nitrogen, ammonia total [as N] | 1 - Effluent Gross | 1 | -- | Sample | = | 26 | = | 35 | 26 - lb/d | = | 0.12 | = | 0.13 | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | <= | 1564 MO AVG | <= | 3128 DAILY MX | 26 - lb/d | <= | 1.5 MO AVG | <= | 3 DAILY MX | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| X_01067 | Nickel, total [as Ni] | 1 - Effluent Gross | 0 | -- | Sample | = | 3.7 | | | 26 - lb/d | = | 0.018 | | | 19 - mg/L | 05/DW - 5 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | <= | 16 MO AVG | | | 26 - lb/d | <= | .015 MO AVG | | | 19 - mg/L | 05/DW - 5 Days Every Week | CP - COMPOS | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| 01092 | Zinc, total [as Zn] | 1 - Effluent Gross | 0 | -- | Sample | = | 2.8 | = | 4 | 26 - lb/d | = | 0.013 | = | 0.02 | 19 - mg/L | 05/DW - 5 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | <= | 78 MO AVG | <= | 434 DAILY MX | 26 - lb/d | <= | .075 MO AVG | <= | .416 DAILY MX | 19 - mg/L | 05/DW - 5 Days Every Week | CP - COMPOS | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| 50050 | Flow, in conduit or thru treatment plant | 1 - Effluent Gross | 0 | -- | Sample | = | 25.04 | = | 35.23 | 03 - MGD | | | | | | 99/99 - Continuous | | |
| | | | | | Permit Req. | | Req Mon MO AVG | | Req Mon DAILY MX | 03 - MGD | | | | | | 0 | 99/99 - Continuous | |
| | | | | | Value NODI | | | | | | | | | | | | | |
| 50060 | Chlorine, total residual | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | <= | .05 DAILY MX | | 19 - mg/L | 09/99 - See Permit | GR - GRAB | |
| | | | | | Value NODI | | | | | | | | | 9 - Conditional Monitoring - Not Required This Period | | | | |
| 80082 | BOD, carbonaceous [5 day, 20 C] | 1 - Effluent Gross | 0 | -- | Sample | = | 444 | = | 460 | 26 - lb/d | = | 2 | = | 2 | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | <= | 20850 MO AVG | <= | 41700 WKLY AVG | 26 - lb/d | <= | 20 MO AVG | <= | 40 WKLY AVG | 19 - mg/L | 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 | | | | | | |
|--------------------------|-----------------------|---------------------|---|------|--|-------------|
| Code | Parameter Name | Monitoring Location | Field | Type | Description | Acknowledge |
| 01067 | Nickel, total [as Ni] | 1 - Effluent Gross | Quality or Concentration Sample Value 2 | Soft | The provided sample value is outside the permit limit. (Error Code: 1) | Yes |

Comments
See the attached letter in regards to the nickel exceedance.

| Attachments | | |
|---|------|--------|
| Name | Type | Size |
| February_2017_DMR_Nickel_violation_letter.pdf | pdf | 619221 |

Name: Keith Richard

E-Mail: keith@sddcleanwater.org

DMR Copy of Record

| | | | |
|--------------------|-------------------------|--------------------|---|
| Permit | | | |
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 |
| Permitted Feature: | 003 External Outfall | Discharge: | 003-0 TREATED CSO-OAKLAND AVENUE |
| Facility: | | Facility Location: | DECATUR SD MAIN STP 501 DIPPER LANE DECATUR, IL 62522 |

| | | | |
|----------------------------------|---------------------------|---------------|----------|
| Report Dates & Status | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | DMR Due Date: | 03/15/17 |
| Status: | NetDMR Validated | | |

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

| | | | |
|------------------------------------|--------|------------|--------------------|
| Principal Executive Officer | | | |
| First Name: | Kent | Title: | Executive Director |
| Last Name: | Newton | Telephone: | 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 | | | | | | | | | | | | | Req Mon MO AVG | 19 - mg/L | DL/DS - Daily When Discharging | GR - GRAB |
| | | | | | Permit Req. | | | | | | | | | | | | | C - No Discharge | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | | |
| 00400 | pH | 1 - Effluent Gross | 0 | -- | Sample | | | | | | >= | 6 MINIMUM | | | <= | 9 MAXIMUM | 12 - SU | | DL/DS - Daily When Discharging | GR - GRAB | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | C - No Discharge | | | | | | | | | |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | Req Mon MO AVG | 19 - mg/L | DL/DS - Daily When Discharging | GR - GRAB |
| | | | | | Permit Req. | | | | | | | | | | | | | C - No Discharge | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | | |
| 82220 | Flow, total | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | Req Mon MO TOTAL 80 - Mgal/mo | | DL/DS - Daily When Discharging | CN - CONTIN |
| | | | | | Permit Req. | | | | | | | | | | | | | 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
DECATUR SD MAIN STP

| | | | |
|---------|--------------------------|------------|--------------------------------------|
| User: | keithr@sddcleanwater.org | Date/Time: | 2017-03-10 08:24 (Time Zone: -06:00) |
| Name: | Keith Richard | | |
| E-Mail: | keithr@sddcleanwater.org | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | | | |
|--|---------------------------|---------------------|--------------------------------------|-------------|---------------------|---------|---------------|--------------------------------------|--------------------|--------------------------------------|------------------|------------------|---------|-------------|------------------|----------|-----------------------|-------------|-------|--|
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP | | | | | | Facility: | DECATUR SD MAIN STP | | | | | | | | | | |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | | | |
| Permitted Feature: | 004 External Outfall | Discharge: | 004-0 TREATED CSO-SOUTH EDWARD ST | | | | | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | | | | | DMR Due Date: | 03/15/17 | | | Status: | NetDMR Validated | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | | | |
| RECEIVING WATER: SANGAMON RIVER NUMBER 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: | -- | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | |
| 00400 | pH | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | >= | 6 MINIMUM | | | <= | 9 MAXIMUM | 12 - SU | | | | |
| | | | | | Value NODI | | | | | | C - No Discharge | | | | C - No Discharge | | | | | |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | |
| 82220 | Flow, total | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | 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 | | | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | | | | Date/Time: | 2017-03-10 08:25 (Time Zone: -06:00) | | | | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | | | |
|--|---------------------------|---------------------|--------------------------------------|-------------|---------------------|---------|---------------|--------------------------------------|-------|--------------------------|------------------|-------------|--------------------|--------------------------------------|------------------|------------------|-----------------------|-------------|-------|--|
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP | | | | | | | | | | Facility: | DECATUR SD MAIN STP | | | | | | |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | |
| Permitted Feature: | 007 External Outfall | Discharge: | 007-0 TREATED CSO-MCKINLEY AVENUE | | | | | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | | | | | DMR Due Date: | 03/15/17 | | | | | | Status: | NetDMR Validated | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | | | |
| RECEIVING WATER: SANGAMON RIVER NUMBER 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: | -- | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | |
| 00400 | pH | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | >= | 6 MINIMUM | | | | <= | 9 MAXIMUM | 12 - SU | | | |
| | | | | | Value NODI | | | | | | C - No Discharge | | | | | C - No Discharge | | | | |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | |
| 82220 | Flow, total | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | 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 | | | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | | | | Date/Time: | 2017-03-10 08:25 (Time Zone: -06:00) | | | | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | |
|---------------------------|-------------------------|---------------------------|--------------------------------------|---------------------------|--------------------------------------|
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP | Facility: | DECATUR SD MAIN STP |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 |
| Permitted Feature: | 008 External Outfall | Discharge: | 008-0 TREATED CSO-SEVENTH WARD | | |

| Report Dates & Status | | | | | | |
|----------------------------------|---------------------------|--|----------------------|----------|----------------|------------------|
| Monitoring Period: | From 02/01/17 to 02/28/17 | | DMR Due Date: | 03/15/17 | Status: | NetDMR Validated |

Considerations for Form Completion
RECEIVING WATER: SANGAMON RIVER NUMBER 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: --

| 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 | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | |
| 00400 | pH | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | >= | 6 MINIMUM | | | <= | 9 MAXIMUM | 12 - SU | | | |
| | | | | | Value NODI | | | | | | | C - No Discharge | | | | C - No Discharge | | | | |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | Value NODI | | | | | | | | | | | | | | | |
| 82220 | Flow, total | 1 - Effluent Gross | 0 | -- | Sample | | | | | | | | | | | | | | | |
| | | | | | Permit Req. | | | | | | | | | | | | | | | |
| | | | | | 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
DECATUR SD MAIN STP

| | | | |
|---------|--------------------------|------------|--------------------------------------|
| User: | keithr@sddcleanwater.org | Date/Time: | 2017-03-10 08:26 (Time Zone: -06:00) |
| Name: | Keith Richard | | |
| E-Mail: | keithr@sddcleanwater.org | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | |
|--|---------------------------|--------------------|---|---------------------|---------|-------------|--------------------------------------|--------------------|--------------------------------------|--------------|-------------|---------|-------------|----------|-----------------------|-------------|--|
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP | | | | | Facility: | DECATUR SD MAIN STP | | | | | | | | |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | |
| Permitted Feature: | A03 External Outfall | Discharge: | A03-0 CSO-OAKLAND AV TRT BYPAS(003A) | | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | DMR Due Date: | 03/15/17 | | | | Status: | NetDMR Validated | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | |
| RECEIVING WATER:SANGAMON RIVERGF | | | | | | | | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | |
| First Name: | Kent | | Title: | Executive Director | | | | | Telephone: | 217-422-6931 | | | | | | | |
| Last Name: | Newton | | | | | | | | | | | | | | | | |
| No Data Indicator (NODI) | | | | | | | | | | | | | | | | | |
| Form NODI: | -- | | | | | | | | | | | | | | | | |
| Parameter Code | 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 | | |
| 74071 | Flow | 1 - Effluent Gross | 0 | | | | | | | | | | | | | | |
| | | | | Sample Permit Req. | | | | Opt Mon MO TOTAL | 4K - #/mo | | | | | | | | |
| | | | | 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 | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | | | Date/Time: | 2017-03-10 08:26 (Time Zone: -06:00) | | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | |
|--|---------------------------|--------------------|-------------|---------------------|---|-------------|---------|------------------|--------------------------|--------------------------------------|-------------|---------|-------------|----------|-----------------------|-------------|--|--|
| Permit #: | IL0028321 | | | Permittee: | DECATUR SD MAIN STP | | | | Facility: | DECATUR SD MAIN STP | | | | | | | | |
| Major: | Yes | | | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | |
| Permitted Feature: | A04 External Outfall | | | Discharge: | A04-0 CSO-S EDWARD ST TRT BYPS(004A) | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | | DMR Due Date: | 03/15/17 | | | | Status: | NetDMR Validated | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | |
| RECEIVING WATER:SANGAMON RIVERGF | | | | | | | | | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | | |
| First Name: | Kent | | | Title: | Executive Director | | | | Telephone: | 217-422-6931 | | | | | | | | |
| Last Name: | Newton | | | | | | | | | | | | | | | | | |
| No Data Indicator (NODI) | | | | | | | | | | | | | | | | | | |
| Form NODI: | -- | | | | | | | | | | | | | | | | | |
| Parameter Code | 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 | | | |
| 74071 | Flow | 1 - Effluent Gross | 0 | | | | | | | | | | | | | | | |
| | | | | Sample Permit Req. | | | | Opt Mon MO TOTAL | 4K - #/mo | | | | | | | | | |
| | | | | 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 | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | Date/Time: | 2017-03-10 08:27 (Time Zone: -06:00) | | | | | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | | |
|--|---------------------------|--------------------|-------------|---------------------|--------------------------------------|-------------|---------|-------|--------------------------|--------------------------------------|-------------|---------|-------------|----------|-----------------------|-------------|--|--|--|
| Permit #: | IL0028321 | | | Permittee: | DECATUR SD MAIN STP | | | | Facility: | DECATUR SD MAIN STP | | | | | | | | | |
| Major: | Yes | | | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | | |
| Permitted Feature: | A06 External Outfall | | | Discharge: | A06-0 CSO-FAIRVIEW PARK | | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | | DMR Due Date: | 03/15/17 | | | | Status: | NetDMR Validated | | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | | |
| RECEIVING WATER: UNNAMED TRIB OF SPRING CREEK GF | | | | | | | | | | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | | | |
| First Name: | Kent | | | Title: | Executive Director | | | | Telephone: | 217-422-6931 | | | | | | | | | |
| Last Name: | Newton | | | | | | | | | | | | | | | | | | |
| No Data Indicator (NODI) | | | | | | | | | | | | | | | | | | | |
| Form NODI: | -- | | | | | | | | | | | | | | | | | | |
| Parameter Code | 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 | | | | |
| 74071 | Flow | 1 - Effluent Gross | 0 | -- | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | Date/Time: | 2017-03-10 08:27 (Time Zone: -06:00) | | | | | | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | |
|--|---------------------------|--------------------|-------------|---------------------|---|-------------|---------|------------------|--------------------------------------|--------------------------------------|-------------|---------|-------------|----------|-----------------------|-------------|--|--|
| Permit #: | IL0028321 | | | Permittee: | DECATUR SD MAIN STP | | | | Facility: | DECATUR SD MAIN STP | | | | | | | | |
| Major: | Yes | | | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | |
| Permitted Feature: | A07 External Outfall | | | Discharge: | A07-0 CSO-MCKINLEY AV TR BYPAS(007A) | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | | DMR Due Date: | 03/15/17 | | | | Status: | NetDMR Validated | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | |
| RECEIVING WATER:UNNAMED TRIB OF SPRING CREEKGF | | | | | | | | | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | | |
| First Name: | Kent | | | Title: | Executive Director | | | | Telephone: | 217-422-6931 | | | | | | | | |
| Last Name: | Newton | | | | | | | | | | | | | | | | | |
| No Data Indicator (NODI) | | | | | | | | | | | | | | | | | | |
| Form NODI: | -- | | | | | | | | | | | | | | | | | |
| Parameter Code | 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 | | | |
| 74071 | Flow | 1 - Effluent Gross | 0 | | | | | | | | | | | | | | | |
| | | | | Sample Permit Req. | | | | Opt Mon MO TOTAL | 4K - #/mo | | | | | | | | | |
| | | | | 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 | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | | | | | Date/Time: | 2017-03-10 08:27 (Time Zone: -06:00) | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | |
|--|---------------------------|--------------------|-------------|---------------------|---|-------------|---------|------------------|--------------------------------------|--------------------------------------|-------------|---------|-------------|----------|-----------------------|-------------|--|--|
| Permit #: | IL0028321 | | | Permittee: | DECATUR SD MAIN STP | | | | Facility: | DECATUR SD MAIN STP | | | | | | | | |
| Major: | Yes | | | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | | | | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | |
| Permitted Feature: | A08 External Outfall | | | Discharge: | A08-0 CSO-SEVENTH WARD TR BYPS(008A) | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | | | DMR Due Date: | 03/15/17 | | | | Status: | NetDMR Validated | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | |
| RECEIVING WATER:SANGAMON RIVERGF | | | | | | | | | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | | |
| First Name: | Kent | | | Title: | Executive Director | | | | Telephone: | 217-422-6931 | | | | | | | | |
| Last Name: | Newton | | | | | | | | | | | | | | | | | |
| No Data Indicator (NODI) | | | | | | | | | | | | | | | | | | |
| Form NODI: | -- | | | | | | | | | | | | | | | | | |
| Parameter Code | 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 | | | |
| 74071 | Flow | 1 - Effluent Gross | 0 | | | | | | | | | | | | | | | |
| | | | | Sample Permit Req. | | | | Opt Mon MO TOTAL | 4K - #/mo | | | | | | | | | |
| | | | | 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 | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | | | | | | | Date/Time: | 2017-03-10 08:28 (Time Zone: -06:00) | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | |

DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | | |
|--|--|-------------------------|--------------------------------------|--------------------|--------------------------------------|---------|----------------|---------|------------------|--------------------------|---------|-------------|---------|-------------|---------|-----------|---------------------------|-------------|--|
| Permit #: | IL0028321 | Permittee: | DECATUR SD MAIN STP | Facility: | DECATUR SD MAIN STP | | | | | | | | | | | | | | |
| Major: | Yes | Permittee Address: | 501 DIPPER LANE DECATUR, IL 62522 | Facility Location: | 501 DIPPER LANE DECATUR, IL 62522 | | | | | | | | | | | | | | |
| Permitted Feature: | INF Influent Structure | Discharge: | INF-L INFLUENT REPORTING | | | | | | | | | | | | | | | | |
| Report Dates & Status | | | | | | | | | | | | | | | | | | | |
| Monitoring Period: | From 02/01/17 to 02/28/17 | DMR Due Date: | 03/15/17 | Status: | NetDMR Validated | | | | | | | | | | | | | | |
| Considerations for Form Completion | | | | | | | | | | | | | | | | | | | |
| GF | | | | | | | | | | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | | | |
| First Name: | Kent | Title: | Executive Director | Telephone: | 217-422-6931 | | | | | | | | | | | | | | |
| Last Name: | Newton | | | | | | | | | | | | | | | | | | |
| 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 | G - Raw Sewage Influent | 0 | -- | Sample | | | | | = | 130 | | | | | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | | | | | | | | | | | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Value NODI | | | | | | | | | | | | | | |
| 00530 | Solids, total suspended | G - Raw Sewage Influent | 0 | -- | Sample | | | | | = | 262 | | | | | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Permit Req. | | | | | | | | | | | 19 - mg/L | 02/DA - 2 Days Every Week | CP - COMPOS | |
| | | | | | Value NODI | | | | | | | | | | | | | | |
| 50050 | Flow, in conduit or thru treatment plant | G - Raw Sewage Influent | 0 | -- | Sample | = | 22.39 | = | 32.92 | 03 - MGD | | | | | | | 99/99 - Continuous | RT - RCOTOT | |
| | | | | | Permit Req. | | Req Mon MO AVG | | Req Mon DAILY MX | 03 - MGD | | | | | | | 99/99 - Continuous | RT - RCOTOT | |
| | | | | | 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 | | | | | | | | | | | | | | | | | | | |
| DECATUR SD MAIN STP | | | | | | | | | | | | | | | | | | | |
| User: | keithr@sddcleanwater.org | Date/Time: | 2017-03-10 08:29 (Time Zone: -06:00) | | | | | | | | | | | | | | | | |
| Name: | Keith Richard | | | | | | | | | | | | | | | | | | |
| E-Mail: | keithr@sddcleanwater.org | | | | | | | | | | | | | | | | | | |