

DMK Mailing List Update  
 MAJOR  
 7005 3820 0006 7671 8206  
 External Outfall  
 No Discharge

IL0028321  
 PERMIT NUMBER  
 DISCHARGE NUMBER  
 001-0

DECATUR SD MAIN STP  
 501 DIPPER LANE  
 DECATUR, IL 62522  
 DECATUR SD MAIN STP  
 501 DIPPER LANE  
 DECATUR, IL 62522  
 ATTN: TIM KLUGE

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Oxygen, dissolved (DO)									
00300 10 Effluent Gross									
00400 10 Effluent Gross									
00530 10 Effluent Gross									
00610 17 Effluent Gross									
01067 10 Effluent Gross									
01092 10 Effluent Gross									
01092 10 Flow, in conduit or thru treatment plant									
50050 10 Effluent Gross									
50060 10 Effluent Gross									
74055 10 BOD, carbonaceous, 05 day, 20 C									
80082 10 Effluent Gross									

MONITORING PERIOD  
 MM/DD/YYYY TO MM/DD/YYYY  
 10/01/2010 TO 10/31/2010

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*Timothy R. Kluge*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Montie Cherry

TELEPHONE  
 217-422-6931

DATE  
 11/10/2010

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Zinc and Nickel limits not in effect due to variance granted in PCB-2009-125.

EPA Form 3320-1 (Rev. 01/08) Previous editions may be used.

NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522  
 ATTN: TIM KLUGE

ILO028321  
 PERMIT NUMBER

003-0  
 DISCHARGE NUMBER

MONITORING PERIOD  
 MM/DD/YYYY TO MM/DD/YYYY  
 10/01/2010 TO 10/31/2010

MAJOR GF  
 TREATED CSO-OAKLAND AVENUE  
 External Outfall  
 No Discharge

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
BOD 5-day, 20 deg. C	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
Effluent Gross	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
pH	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
00400 1 0 Effluent Gross Solids, total suspended	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
00530 1 0 Effluent Gross Flow, total	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
82220 1 0 Effluent Gross	*****	*****	*****	*****	*****	*****		Daily When Discharging	CONTIN

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER  
 Monte Cherry  
 TYPED OR PRINTED  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 217-422-6931  
 DATE: 11/10/2010  
 AREA CODE: 217  
 NUMBER: 422-6931

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RECEIVING WATER: SANGAMON RIVER. NUMBER OF DAYS OF DISCHARGE: 0

DMR Meeting ZIP CODE: 04324  
 MAJOR (SUBR 04) GF  
 TREATED CSO-SOUTH EDWARD ST  
 External Outfall  
 No Discharge

IL0028321	004-0
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2010	10/31/2010
FROM	TO

NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522  
 ATTN: TIM KLUGE

PARAMETER	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
BOD, 5-day, 20 deg. C	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
Effluent Gross	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
pH	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
00400 1 0	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
Effluent Gross	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
Solids, total suspended	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
00530 1 0	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
Effluent Gross	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	GRAB
Flow, total	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	CONTIN
82220 1 0	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	CONTIN
Effluent Gross	*****	*****	*****	*****	*****	*****	*****	*****	*****	Daily When Discharging	CONTIN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Montie Cherry	217-422-6931	11/10/2010
TYPED OR PRINTED	AREA Code	NUMBER
	*****	*****
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		
<i>Montie Cherry</i>		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RECEIVING WATER: SANGAMON RIVER; NUMBER OF DAYS OF DISCHARGE: 0

NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522

ATTN: TIM KLUGE

IL0028321  
 PERMIT NUMBER

007-0  
 DISCHARGE NUMBER

MAJOR (SUBR 04) GF  
 TREATED CSO-MCKINLEY AVENUE  
 External Outfall

No Discharge  X

MONITORING PERIOD  
 FROM 10/01/2010 TO 10/31/2010

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
BOD 5-day, 20 deg. C	*****	*****	*****	*****	*****	*****			
Effluent Gross	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
pH	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
00400 1 0	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
Effluent Gross	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
Solids, total suspended	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
00530 1 0	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
Effluent Gross	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
Flow, total	*****	*****	*****	*****	*****	*****		Daily When Discharging	GRAB
82220 1 0	*****	*****	*****	*****	*****	*****		Daily When Discharging	CONTIN
Effluent Gross	*****	*****	*****	*****	*****	*****		Daily When Discharging	CONTIN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  Monte Cherry  TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  <i>Timothy R Kluge</i>	TELEPHONE	DATE
		217-422-6931	11/10/2010
		AREA NUMBER	MM/DD/YYYY
		Code	

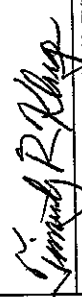
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RECEIVING WATER: UNNAMED TRIB OF SPRING CREEK. NUMBER OF DAYS OF DISCHARGE: 0

DMR Mailing ZIP CODE: MAJOR (SUBR 04) GF TREATED CSO-SEVENTH WARD External Outfall No Discharge

IL0028321	008-0
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2010	10/31/2010
FROM	TO

NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522  
 ATTN: TIM KLUGE

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS			
BOD, 5-day, 20 deg. C	*****	*****	*****	*****			
Effluent Gross	*****	*****	*****	*****		Daily When Discharging	GRAB
pH	*****	*****	*****	*****			
00400 1 0	*****	*****	*****	*****			
Effluent Gross	*****	*****	*****	*****		Daily When Discharging	GRAB
Solids, total suspended	*****	*****	*****	*****			
00530 1 0	*****	*****	*****	*****			
Effluent Gross	*****	*****	*****	*****		Daily When Discharging	GRAB
Flow, total	*****	*****	*****	*****			
82220 1 0	*****	*****	*****	*****			
Effluent Gross	*****	*****	*****	*****		Daily When Discharging	CONTIN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Monte Cherry	217-422-6931	11/10/2010
TYPED OR PRINTED	AREA Code	NUMBER
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		
		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RECEIVING WATER: SANGAMON RIVER. NUMBER OF DAYS OF DISCHARGE: 0

DMR Mailing ZIP CODE:  
 MAJOR (SUBR 04) GF  
 CSO-OAKLAND AVE TRT BYPASS (003A)  
 External Outfall

A03-0  
 DISCHARGE NUMBER

MONITORING PERIOD  
 MM/DD/YYYY TO MM/DD/YYYY  
 10/01/2010 TO 10/31/2010

IL0028321  
 PERMIT NUMBER

FROM  
 MM/DD/YYYY TO MM/DD/YYYY  
 10/01/2010 TO 10/31/2010

NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522  
 ATTN: TIM KLUGE

No Discharge  X

PARAMETER	SAMPLE MEASUREMENT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Flow 10 Effluent Gross		*****		*****		*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NUMBER	DATE
Monte Cherry	<i>Monte Cherry</i>	217-422-6931	11/10/2010
TYPED OR PRINTED		AREA CODE	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RECEIVING WATER: SANGAMON RIVER. NUMBER OF DAYS OF DISCHARGE: 0



NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522  
 ATTN: TIM KLUGE

DMR Mailing ZIP CODE: 62522  
 MAJOR (SUBR 04)  
 CSO-FAIRVIEW PARK  
 External Outfall

IL0028321	A06-0
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
10/01/2010	10/31/2010
FROM	TO

No Discharge  x

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Flow		*****		*****	*****	*****				
7ADZ1 10		*****		*****	*****	*****				
El Gross		*****	#/mo	*****	*****	*****				
		*****	MO TOTAL	*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
Montle Cherry		217-422-6973	11/10/2010
TYPED OR PRINTED		AREA Code	NUMBER
			MM/DD/YYYY

Identify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted, based on my inquiry of the persons or persons who prepare the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RECEIVING WATER: STEVENS CREEK. NUMBER OF DAYS OF DISCHARGE: 0







IL0028321 INF-L  
 PERMIT NUMBER DISCHARGE NUMBER  
 MONITORING PERIOD  
 MM/DD/YYYY TO MM/DD/YYYY  
 10/01/2010 TO 10/31/2010

DMK Training Air Pollution  
 MAJOR (SUBR 04)  
 INFLUENT REPORTING  
 Influent Structure

NAME: DECATUR SD MAIN STP  
 ADDRESS: 501 DIPPER LANE  
 DECATUR, IL 62522  
 FACILITY: DECATUR SD MAIN STP  
 LOCATION: 501 DIPPER LANE  
 DECATUR, IL 62522


ATTN: TIM KLUGE

FROM 10/01/2010 TO 10/31/2010

No Discharge

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
00530 G 0 Raw Sewage Influent	*****	*****	*****	*****	*****	*****	0	2 Days Every Week	COMPOS
00530 G 0 Solids, total suspended	*****	*****	*****	*****	*****	*****	0	2 Days Every Week	COMPOS
00530 G 0 Raw Sewage Influent	*****	*****	*****	*****	*****	*****	0	2 Days Every Week	COMPOS
Flow, in conduit or thru treatment plant	27.23	Mgal/d	32.74	*****	*****	*****	0	Continuous	RCOTOT
50050 G 0 Raw Sewage Influent	*****	*****	*****	*****	*****	*****	0	Continuous	RCOTOT

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Monte Cherry  
 TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE  
 217-422-6931

DATE  
 11/10/2010

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)