

National Pollutant Discharge Elimination System (NPDES) CSO Monthly Report of Operation (CSO MRO) State Form 50546 (R4 / 9-15)

City:	Noblesvil	lle								Page	1 of	4		F	em	ılt Number	: IN	0020168	
Facility	: Noblesvil	le Waste	water Utility								-	Public No	tific	ation Requ	iren	nents Met?	Y		
Monitor	ing Period	i:	July	2024	H W		E	nter "x" i	f no	CSO disch	arg	e occurred	for	the month:	:				
Design	Peak Hour	dy Flow (MGD):	20	Design Ave		Measured/Metered (M) or Estimated (E) must be specified												
WWT	P Influent	Data	EA-TH	Pr	ecipitation D	С	SO Outfall	No.	003		CSO Outfall No. 004								
Day of Month	Average Daily Flow (MGD)	Peak Hourly Flow (MGD)	Time Precip. Began (am/pm)	Precip. Duration (Hours)	Total Daily Precip. (Inches)	Peak Intensity (Inch/hr)	Measureme nt Interval (hr, 30 m, 15 m)	Time Discharge Began	M or E	Event Duration (Hours)	Mor	Event Discharg e (MG)	M or E	Time Discharge Began	M	Event Duration (Hours)	M	Event Discharge (MG)	MorE
1	6.10	13.38		0.00	0	0.00			П				П		Г				T
2	7.39	13.46		0.00	0	0.00			П		Г		П		Г		Т		
3	8.42	14.34	12:40 PM	0.08	0.06	0.06	15 min								Г		П		
4	7.21	14.70	9:45 AM	2.33	0.39	0.18	15 min		П		Г		П		Г		Ħ		Т
5	8.51	24.12	3:05 PM	0.42	0.22	0.22	15 min				Г				Т		П		T
6	7.58	13.23		0.00	0	0.00			П		T				Г		Ħ		T
7	7.91	13.67		0.00	0	0.00					Г						Ħ		T
8	7.09	13.35		0.00	0	0.00					Г				Г		П		Ħ
9	8.94	25.55	10:05 AM	3.42	1.02	0.58	15 min				Г			10:25 PM	м	0.25	м	0.001	м
10	7.92	24.25	2:55 AM	0.50	0.06	0.16	15 min				T			.5125 (11)		0.20	1	0.001	<u> </u>
11	9.84	23.72	2:45 PM	0.75	0.53	0.43	15 min		П		T		П		Г		П		Т
12	9.92	13.99	1:15 AM	0.08	0.01	0.01	15 min				Г						Ħ		
13	8.25	12.44		0.00	0	0.00	,,,,,,,,,,				T		П				Ħ		
14	9.60	23.48	1:35 PM	0.75	0.71	0.71	15 min							2:00 PM	м	0.33	м	0.003	м
15	8.53	11.78	5:20 AM	0.25	0.03	0.02	15 min							2.00 1 101	,	0.00	m	0.003	TV.
16	8.60	21.11	1:00 AM	2.92	0.58	0.27	15 min		П								П		П
17	8.84	10.79		0.00	0	0.00											П		П
18	7.98	11.18		0.00	0	0.00			П				П				П		Г
19	7.72	9.64		0.00	0	0.00											П		Г
20	7.87	11.67		0.00	0	0.00							П				П		
21	8.83	14.08		0.00	0	0.00											П		Г
22	7.38	12.22	4:00 PM	0.33	0.09	0.09	15 min						П				П		
23	7.49	11.64	6:55 AM	0.08	0.01	0.01	15 min												
24	7.31	12.17	1:25 PM	1.25	0.15	0.10	15 min										П		Г
25	8.97	11.73	3:00 AM	0.08	0.01	0.01	15 min				Г		П						П
26	6.28	10.93		0.00	0	0.00													
27	7.93	12.60		0.00	0	0.00					Г		П				П		
28	9.01	13.51	11:35 AM	1.67	0.27	0.12	15 min												
29	7.70	21.69	2:20 AM	0.25	0.23	0.22	15 min												
30	8.43	22.14	2:35 AM	0.33	0.26	0.25	15 min										П		
31	8.14	13.24		0.00	0	0.00													
Totals:	251.69			15.50	4.63			0	Da ys	0.00		0		2	Da ys	0.58		0.004	
	r Printed I	Name and	Title of Prin			r or Author	rized Agent							Telephone	_		_	J.50-	
					nathan Mirge											317-776-6			
WITH A INQUIR	SYSTEM (DESIGNE PERSONS	Y OF LAW T D TO ASSUR S WHO MAN ST OF MY K	RE THAT Q AGE THE S	UALIFIED PI SYSTEM OR	ERSONNEI THOSE PE	L PROPERL ERSONS DIF	Y GATHER RECTLY RE	ANI SPC) EVALUA INSIBLE F	TE 1 OR (HE INFO	RM/ NG	ATION SUB THE INFOR	MIT'	TED. BASI TION; THE	ED O	ON MY ORMATION	

SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

Signature of Principal Executive Officer of Authorized Agent	Date (mm/dd/yy)
Martines Maries	08/21/24



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City:	Noblesvil	le											Page 2	of	4			em	nit Number:	IN	0020168			
acility	Noblesvil	le V	Vastewa	ter l	Jtility		,						9.51	F	ublic No	tific	ation Requ	ilren	nents Met?	Υ			N Bu	
lonito	toring Period: July 2024												Enter "x" if no CSO discharge occurred for the month:											
esign	sign Peak Flow (Hourly) (MGD): 20 Design Flow (MGD): 10								Measured/Metered (M) or Estimated (E) must be specified															
	CSO Outfall No. 005						CSO Outfall No. 007						TE THE	cs	O Outfall	No.	008	V		CS	CSO Outfall No. 009			
Day of Month	Time Discharge Began	M or E	Event Duration (Hours)		Event Discharge (MG)	M or E	Time Discharge Began	M	Event Duration (Hours)	M or E	Event Discharge (MG)	M or E	Time Discharge Began	M or E	Event Duration (Hours)	M or E	Event Discharge (MG)	Mor	Time Discharge Began	M or E	Event Duration (Hours)		Event Discharge (MG)	M or
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National Pollutant Discharge Elimination System (NPDES) CSO Monthly Report of Operation (CSO MRO) State Form 50546 (R4 / 9-15) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City:	Noblesvil	le											Page	3 of	4		Р	err	nit Number	·IN	0020168			
acility	Noblesvil	le V	/astewa	ter	Utility								Public Notification Requirements Met? Y											١
fonito	onitoring Period: July 2024											Enter "x" if no CSO discharge occurred for the month:											Γ	
Design	esign Peak Flow (Hourly) (MGD): 20 Design Flow (MGD): 10									Measured/Metered (M) or Estimated (E) must be specified										Т				
		csc	Outfall I	No.	010		CSO Outfall No. 011					CSO Outfall No.								SO Outfal	I No.		ī	
Day of Month	Time Discharge Began	M or E	Event Duration (Hours)	M or E	Event Discharge (MG)	Mor	Discharge	M	Event Duration (Hours)	M or E	Event Discharge	M	Discharge	M			Event Discharge		Discharge	M	Event Duration	м	Event Discharge	
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City:	Noblesville				Page: 4 of 4	Permit Number: IN0020168				
Facility:	Noblesville Wastewater Utili	ty		Public Notification Requirements Met? Y						
Monitori	ing Period: July	2024			Enter "x" If no	CSO discharge occurred for the month:				
Design F	Peak Hourly Flow (MGD):	20	Design Average Flow (MGD):	10						
Day of Month	Comments (further evel	anation as	to why each CSO event occurred	d).	A 5'S ME 12"-12"					
1	Comments further exp	anauon as	to why each C30 event occurred	4)						
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9	Localized rain event intensit	y caused th	nis line to exceed capacity. We are	currently in th	e LTCP post construction r	monitoring phase to increase the level				
10						of service.				
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13 14	l ocalized rain event intensit	u causad th	rie line to exceed canadity. We are	ourrontly in th	o LTCD most construction r	monitoring phase to increase the level				
15	Localized failt everit interisi	y causeu u	is tille to exceed capacity, we are t	currently in th	e LTCP post construction i	of service.				
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Typed or	r Printed Name and Title of P	rincipal Exe	ecutive Officer or Authorized Agent			Telephone				
			onathan Mirgeaux, Utility Director			317-776-6353				
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Signatur	e of Principal Executive Office	er or Autho	orized Agent			Date (mm/dd/yy)				
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