National Pollutant Discharge Elimination System (NPDES)
CSO Monthly Report of Operation (CSO MRO)

State Form 50546 (R5 / 11-21)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City:	**Waterloo**			**Page 1 of [#]**	**Permit Number:** **IN0020711**
Facility:	**Waterloo Waste Pollution Control**			**Public Notification Requirements Met?**	**Y**
Monitoring Period:	**March**	**2025**		**Enter "x" if no CSO discharge occurred for the month:**	
Design Peak Hourly Flow (MGD):	**0.42**	**Design Average Flow (MGD):**	**0.369**	**Measured/Metered (M) or Estimated (E) must be specified**	

WWTP Influent Data			**Precipitation Data**					**CSO Outfall No.**						**CSO Outfall No.**					
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 (Inches/ Measurement Interval)**	**Measurement Interval (hr, 30 m, 15 m)**	**Time Discharge Began**	**M or E**	**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)**	**M or E**
1	0.27	0.31																	
2	0.26	0.30																	
3	0.25	0.51																	
4	0.28	0.45	6:57 AM	0.11	0.37	0.04	15 min												
5	0.51	0.69	12:00 AM	0.07	0.24	0.03	15 min												
6	0.47	0.54																	
7	0.48	0.64	4:11 PM	0.03	0.10	0.03	15 min												
8	0.38	0.62																	
9	0.33	0.40																	
10	0.34	0.61																	
11	0.29	0.53																	
12	0.27	0.34																	
13	0.25	0.36																	
14	0.23	0.62																	
15	0.36	0.58	5:11 AM	0.05	0.61	0.24	15 min												
16	0.46	0.56	2:10 AM	0.07	0.35	0.05	15 min												
17	0.46	0.54																	
18	0.48	0.62																	
19	0.47	0.64	9:16 PM	0.03	0.22	0.11	15 min												
20	0.48	0.61	11:00 AM	0.00	0.01	0.01	15 min												
21	0.46	0.64																	
22	0.42	0.64																	
23	0.32	0.41	5:23 PM	0.04	0.11	0.02	15 min												
24	0.32	0.53																	
25	0.29	0.38																	
26	0.30	0.51																	
27	0.26	0.31																	
28	0.39	0.60	4:42 AM	0.11	1.83	0.45	15 min												
29	0.48	0.55	6:13 PM	0.04	0.13	0.03	15 min	1:25 AM	M	22.00	M	1.904	M						
30	0.50	0.58	2:16 AM	0.08	0.38	0.12	15 min	12:00 AM	M	24.00	M	1.509	M						
31	0.48	0.59						12:00 AM	M	24.00	M	1.156	M						
Totals:	11.53			0.63	4.35			3	Days	70.00		4.569		0	Days	0.00		0	

Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent	**Telephone**
Josh Caudill, Council President	260-438-2287

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 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.

Signature of Principal Executive Officer or Authorized Agent	**Date *(mm/dd/yy)***
Josh Caudill, Council President	04/09/25

National Pollutant Discharge Elimination System (NPDES)
CSO Monthly Report of Operation (CSO MRO)
State Form 50546 (R5 / 11-21)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		**Page 2 of [#]**	**Permit Number:** IN0020711
Facility: Waterloo Waste Pollution Control			**Public Notification Requirements Met?** Y
Monitoring Period: March 2025			**Enter "x" if no CSO discharge occurred for the month:**
Design Peak Flow (Hourly) (MGD): 0.42	**Design Flow (MGD):** 0.369	**Measured/Metered (M) or Estimated (E) must be specified**	

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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Totals:	0	Days	0.00		0		0	Days	0.00		0		0	Days	0.00		0		0	Days	0.00		0	

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	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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City:	**Waterloo**				**Page:**	**9 of 9**	**Permit Number:** **IN0020711**
Facility:	**Waterloo Waste Pollution Control**					**Public Notification Requirements Met?**	**Y**
Monitoring Period:	**March**	**2025**				**Enter "x" if no CSO discharge occurred for the month:**	
Design Peak Hourly Flow (MGD):		**0.42**	**Design Average Flow (MGD):**	**0.369**			

Day of Month	Comments (further explanation as to why each CSO event occurred)
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29	Heavy rainfall from 3/28 caused the plant to start CSOing at 1:25 am
30	Heavy rain
31	Heavy rain

Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent	Telephone
Josh Caudill, Council President	260-438-2287

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 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.

Signature of Principal Executive Officer or Authorized Agent	Date *(mm/dd/yy)*
Josh Caudill, Council President	04/09/25

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City:	**Waterloo**								**Page 1 of [#]**							**Permit Number:**	**IN0020711**					
Facility:	**Waterloo Waste Pollution Control**															**Public Notification Requirements Met?**	**Y**					
Monitoring Period:		**April**	**2025**													**Enter "x" if no CSO discharge occurred for the month:**						
Design Peak Hourly Flow (MGD):			**0.42**	**Design Average Flow (MGD):**			**0.369**		**Measured/Metered (M) or Estimated (E) must be specified**													
WWTP Influent Data			**Precipitation Data**					**CSO Outfall No.**							**CSO Outfall No.**							
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 (Inches/ Measurement Interval)**	**Measurement Interval (hr, 30 m, 15 m)**	**Time Discharge Began**	**M or E**	**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)**	**M or E**		
1	0.47	0.58						12:00 AM	M	24.00	M	0.461	M									
2	0.49	0.59	4:55 AM	0.13	1.96	0.46	15 min	12:00 AM	M	24.00	M	1.399	M									
3	0.48	0.58	12:00 AM	0.01	0.01	0.03	15 min	12:00 AM	M	24.00	M	2.057	M									
4	0.46	0.57	7:06 PM	0.03	0.10	0.02	15 min	12:00 AM	M	24.00	M	1.485	M									
5	0.49	0.54	12:19 AM	0.05	0.20	0.04	15 min	12:00 AM	M	24.00	M	1.12	M									
6	0.49	0.54						12:00 AM	M	24.00	M	0.61	M									
7	0.47	0.53						12:00am	M	24.00	M	0.383	M									
8	0.48	0.55						12:00 AM	M	24.00	M	0.16	M									
9	0.47	0.55	10:26 PM	0.02	0.06	0.02	15 min	12:00 AM	M	24.00	M	0.044	M									
10	0.47	0.61	12:00 AM	0.03	0.09	0.02	15 min	12:00 AM	M	24.00	M	0.042	M									
11	0.41	0.52																				
12	0.38	0.47																				
13	0.37	0.51																				
14	0.37	0.57																				
15	0.34	0.58																				
16	0.31	0.58																				
17	0.36	0.63																				
18	0.44	0.63																				
19	0.44	0.63	1:47 AM	0.04	0.21	0.08	15 min															
20	0.46	0.61																				
21	0.30	0.57	5:05 AM	0.01	0.06	0.04	15 min															
22	0.21	0.26																				
23	0.20	0.24																				
24	0.19	0.28																				
25	0.19	0.27	3:02 PM	0.02	0.09	0.05	15 min															
26	0.18	0.25	6:48 AM	0.00	0.01	0.01	15 min															
27	0.19	0.51																				
28	0.21	0.50																				
29	0.19	0.33																				
30	0.18	0.32																				
Totals:	10.66			0.34	2.79			10	Days	240.00		7.761			0	Days	0.00		0			

Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent	**Telephone**
Josh Caudill, Council President	26-438-2287

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 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.

Signature of Principal Executive Officer or Authorized Agent	**Date *(mm/dd/yy)***
Josh Caudill, Council President	05/07/25

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Monitoring Period: April 2025		**Enter "x" if no CSO discharge occurred for the month:**	
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Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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National Pollutant Discharge Elimination System (NPDES)
CSO Monthly Report of Operation (CSO MRO)
State Form 50546 (R5 / 11-21)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		**Page 3 of [#]**	**Permit Number:** IN0020711
Facility: Waterloo Waste Pollution Control			**Public Notification Requirements Met?** Y
Monitoring Period: Apri 2025			**Enter "x" if no CSO discharge occurred for the month:**
Design Peak Flow (Hourly) (MGD): 0.42	**Design Flow (MGD):** 0.369	**Measured/Metered (M) or Estimated (E) must be specified**	

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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National Pollutant Discharge Elimination System (NPDES)
CSO Monthly Report of Operation (CSO MRO)

State Form 50546 (R5 / 11-21)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		Page 4 of [#]	Permit Number: IN0020711
Facility: Waterloo Waste Pollution Control		Public Notification Requirements Met? Y	
Monitoring Period: April 2025		Enter "x" if no CSO discharge occurred for the month:	
Design Peak Flow (Hourly) (MGD): 0.42	Design Flow (MGD): 0.369	Measured/Metered (M) or Estimated (E) must be specified	

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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National Pollutant Discharge Elimination System (NPDES)
CSO Monthly Report of Operation (CSO MRO)

State Form 50546 (R5 / 11-21)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		Page 5 of [#]	Permit Number: IN0020711
Facility: Waterloo Waste Pollution Control		Public Notification Requirements Met? Y	
Monitoring Period: April 2025		Enter "x" if no CSO discharge occurred for the month:	
Design Peak Flow (Hourly) (MGD): 0.42	Design Flow (MGD): 0.369	Measured/Metered (M) or Estimated (E) must be specified	

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		Page 6 of [#]	Permit Number: IN0020711
Facility: Waterloo Waste Pollution Control			Public Notification Requirements Met? Y
Monitoring Period: April 2025			Enter "x" if no CSO discharge occurred for the month:
Design Peak Flow (Hourly) (MGD): 0.42	Design Flow (MGD): 0.369		Measured/Metered (M) or Estimated (E) must be specified

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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CSO Monthly Report of Operation (CSO MRO)

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		Page 7 of [#]	Permit Number: IN0020711
Facility: Waterloo Waste Pollution Control		Public Notification Requirements Met? Y	
Monitoring Period: April 2025		Enter "x" if no CSO discharge occurred for the month:	
Design Peak Flow (Hourly) (MGD): 0.42	Design Flow (MGD): 0.369	Measured/Metered (M) or Estimated (E) must be specified	

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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CSO Monthly Report of Operation (CSO MRO)
State Form 50546 (R5 / 11-21)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

City: Waterloo		Page 8 of [#]	Permit Number: IN0020711
Facility: Waterloo Waste Pollution Control			Public Notification Requirements Met? Y
Monitoring Period: April 2025			Enter "x" if no CSO discharge occurred for the month:
Design Peak Flow (Hourly) (MGD): 0.42	Design Flow (MGD): 0.369		Measured/Metered (M) or Estimated (E) must be specified

	CSO Outfall No.						CSO Outfall No.						CSO Outfall No.						CSO Outfall No.					
Day of Month	Time Discharge Began	M or E	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)	M or E	Time Discharge Began	M or E	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)	M or E
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City:	**Waterloo**				**Page:**	**9 of 9**	**Permit Number:** **IN0020711**
Facility:	**Waterloo Waste Pollution Control**				**Public Notification Requirements Met?**	**Y**	
Monitoring Period:	**April**	**2025**			**Enter "x" if no CSO discharge occurred for the month:**		
Design Peak Hourly Flow (MGD):	**0.42**	**Design Average Flow (MGD):**	**0.369**				

Day of Month	Comments (further explanation as to why each CSO event occurred)
1	Heavy rainfall and ground saturation caused a CSO at the plant, was already CSOing due to heavy rain at the end of March
2	Heavy rainfall and ground saturation caused a CSO at the plant, total of 1.96 inches of rain this day
3	Heavy rainfall and ground saturation caused a CSO at the plant
4	Heavy rainfall and ground saturation caused a CSO at the plant
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Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent	**Telephone**
Josh Caudill, Council President	260-438-2287

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 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.

Signature of Principal Executive Officer or Authorized Agent	**Date *(mm/dd/yy)***
Josh Caudill, Council President	05/07/25