

## 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:	Noblesvill				MINERIAL IN					Page '	1 of	4		Р	егт	it Number:	INC	020168		
Facility:	Noblesvill	e Wastew	ater Utility								F	Public No	ific	ation Requi	rem	ents Met?	x	1,31		
Monitor	ing Perlod	: Ja	anuary	2024		150					E	nter "x" ii	no	CSO disch	argi	occurred	for 1	he month:	х	
Design	Peak Hour	ly Flow (N	IGD):	20	Design Ave	rage Flow	(MGD):	10		Measured/Metered (M) or Estimated (E) must be specified										
WWT	Influent	Data	2 5 -	Pro	ecipitation D	ata		CS	SO Outfall	003			004							
Day of Month	Average Daily Flow (MGD)	Peak Hourly Flow (MGD)	Time Precip. Began (am/pm)	Pracip. 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)	M or E	Event Discharg e (MG)	M or E	Time Discharge Began	M or E	Event Duration (Hours)	M or E	Event Discharge (MG)	M or E	
1	6.98	13.13	4:15 AM	0.17	0.02	0.01	15 min													
2	6.56	11.90		0.00	0	0.00														
3	7.13	12.56		0.00	0	0.00			П											
4	7.22	12.96		0.00	0	0.00			П											
5	7.74	12.95		0.00	0	0.00														
6	7.34	15.08	11:15 AM	2.08	0.25	0.09	15 min		П								П		П	
7	7.48	13.51	12:15 AM	0.58	0.07	0.02	15 min													
8	6.90	15.69	4:15 PM	0.08	0.01	0.01	15 min													
9	9.03	17.49	12:25 AM	7.83	1.1	0.19	15 min		П				П							
10	7.33	14.35	1:15 AM	0.17	0.02	0.01	15 min													
11	7.96	14.45		0.00	0	0.00			П				П		П		П		П	
12	9.88	22.41	6:55 AM	5.25	0.82	0.21	15 min		П											
13	7.48	14.36	4:45 AM	0.08	0.01	0.01	15 min										П			
14	8.66	14.02		0.00	0	0.00			П									il .		
15	8.52	15.59		0.00	0	0.00			П											
16	6.98	13.81		0.00	0	0.00			П											
17	7.89	13.78		0.00	0	0.00			П											
18	7.52	13.78		0.00	0	0.00			П											
19	8.74	13.10		0.00	0	0.00			П											
20	7.53	14.44		0.00	0	0.00													П	
21	8.16	14.85	11:45 AM	0.17	0.06	0.05	15 min													
22	6.10	13.68	1:25 PM	0.42	0.05	0.03	15 min		П											
23	9.12	14.92	12:00 AM	4.92	0.59	0.10	15 min													
24	8.63	14.26	1:20 AM	2.42	0.29	0.07	15 min													
25	9.49	22.46	3:20 AM	3.00	0.69	0.40	15 min		П								П			
26	9.51	22.70	12:25 AM	0.17	0.02	0.05	15 min		П									i		
27	8.92	15.34	6:10 PM	2.67	0.39	0.14	15 min		П											
28	9.97	16.10	1:45 AM	2.42	0.29	0.06	15 min		П											
29	8.21	14.82		0.00	0	0.00														
30	8.43	14.07	8:40 AM	0.75	0.09	0.04	15 min										П			
31	8.24	13.71		0.00	0	0.00														
Totals:	249.65			33.17	4.77			0	Da ys	0.00		0.000		0	Da ys	0.00		0		
	Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent												Telephone							
I CERTII	YUNDER	PENALT	OFIAWT		nathan Mirge			NTS WEDE	PRI	EDAREDII	NDI	FR MY DI	REC	TION OR S	HDE	317-776-6		COPDAN	`E	

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.

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)



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City:	Noblesville  Iity: Noblesville Wastewater Utility														Page 2 of 4 Permit Number: IN0020168										
acility	: Noblesvi	lle V	Vastewa	ter l	Jtility		,					_		-	ublic No	ific	ation Requ	iren	nents Met?	x					
Aonito	ring Period	:	Janua	iry	2024								Enter "x" if no CSO discharge occurred for the month:											)	
Design	Peak Flow	(Ho	uriy) (MG	D):	20	_	Design F	ow	(MGD):		10		Measured/	Met	ered (M) o	or E	stimated (E	) m	ust be spec	cifle	d				
		CS	O Outfall	No.	005	112		cs	O Outfall	No.	007			CSO Outfall No. 008 CSO Outfall N								No.	lo. 009		
Day of Month	Time Discharge Began		Event Duration (Hours)	M or E	Event Discharge (MG)	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	Time Discharge Began	M			Event Discharge (MG)	M	
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Totals:	0	Da ys	0.00		0		0	Da ys	0.00		0		0	Da ys	0		0		0	Da ys	0.00		0		



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ity:	Noblesvil	loblesville loblesville Wastewater Utility															P	ern	nit Number:	IN	0020168				
acility	Noblesvil	le V	/astewa	ter	Utility	_							Public Notification Requirements Met? x												
lonito	ing Period:		Janua	ary	2024					1			Enter "x" if no CSO discharge occurred for the month:												
esign	Peak Flow	(Hou	ırly) (MG	D):	20		Design Fl	ow	(MGD):		10		Measured/	Met	ered (M)	or E	stimated (	E)	must be sp	ecif	ed		-		
		CSC	Outfall	No.	010			CS	O Outfall	No.	011			CS	Outfall I	No.				C	SO Outfal	No.	lo.		
Day of Month	Time Discharge Began	M or E	Event Duration (Hours)	M	Event Discharge (MG)	Mor	Discharge	M or E	Event Duration (Hours)	M or E	Event Discharge (MG)	Mor	Time Discharge Began	M or E		M or E	Event Discharge (MG)	M or E	Discharge	M or E	Event Duration (Hours)		Event Discharge (MG)	N O E	
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ity:	Noblesvil	lle				_							Page	4 of	4		F	em	nit Number:	IN	0020168			
acility	: Noblesvil	le V	/astewa	ter l	Jtility									P	ublic Not	ifica	ition Requ	iren	nents Met?	×				
lonito	ing Period		Janua	ary	2024										Ent	ег "	x" if no C	so	discharge	oc	curred fo	or th	e month:	. 2
esign	Peak Flow	(Hou	urly) (MG	D):	20		Design F	ow	(MGD):	)-(	10		Measured/Metered (M) or Estimated (E) must be specified											
		CS	O Outfall	No.		B		cs	O Outfall	No.			CSO Outfall No. CSO Outfall No.								No.	o		
Day of Month	Time Discharge Began	M	Event Duration (Hours)	M or E	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)	M or E	Time Discharge Began	M or E	Event Duration (Hours)		Event Discharge (MG)	N
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City:	Noblesville				Page: 4 of 4	Permit Number: IN002	0168
Facility:	Noblesville Wastewater Utility		*		Public Notific	ation Requirements Met? Y	
Monitori	ng Period: January Year:	2024			Enter "x" if no	CSO discharge occurred for the	month: X
Design F	Peak Hourly Flow (MGD):	20	Design Average Flow (MGD):	10			
	out tourist for (most		Boolgii Arciage Flore (mob).	10			
Day of Month	Comments (further explanat	ion as	to why each CSO event occurred	)			
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Typed or	Printed Name and Title of Princip	pal Exe	cutive Officer or Authorized Agent			Telephone	
		Jo	onathan Mirgeaux, Utility Director			317-776-6353	
WITH A SINQUIRY SUBMITT	SYSTEM DESIGNED TO ASSURE OF THE PERSONS WHO MANAG FED IS, TO THE BEST OF MY KNO FING FALSE INFORMATION, INCL	THAT ( THAT ( E THE WLED UDING	DOCUMENT AND ALL ATTACHMEN' QUALIFIED PERSONNEL PROPERLY SYSTEM OR THOSE PERSONS DIRE GE AND BELIEF, TRUE, ACCURATE, THE POSSIBILITY OF FINE AND IMPI	GATHER AN CTLY RESPO AND COMPL	D EVALUATE THE INFORMATIONSIBLE FOR GATHERING TO LETE. I AM AWARE THAT T	TION OR SUPERVISION IN ACCO ATION SUBMITTED. BASED ON N THE INFORMATION; THE INFORM THERE ARE SIGNIFICANT PENAL	IY IATION
Signatur	e of Principal Executive Officer or	Autho	rized Agent			Date (mm/dd/yy)	
	Proatt	1	Musear			02/20/24	