

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

State Form 50546 (R4 / 9-15)

City:	Noblesvil	le		,					_	Page	1 of	4		F	erm	It Number	IN	0020168	
Facility	Noblesvil	le Wastev	vater Utility								F	ublic No	tific	ation Requ	ìrem	ents Met?	Y	W.	
Monitor	ing Period		June	2024						BARE	E	nter "x" i	f no	CSO disch	argo	e occurred	for	the month	: x
Design	Peak Hour	ly Flow (I	MGD):	20	Design Ave	erage Flow	(MGD):	10		Measured/	Met	ered (M)	or E	stimated (E	) m	ust be spe	ifie	đ	
wwTi	Influent	Data	- LXV	Pr	ecipitation D	ata			C	SO Outfall	No.	003			С	SO 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)	M or E	Event Discharg e (MG)	M or	Time Discharge Began	M	Event Duration (Hours)	M	Event Discharge (MG)	M
1	7.16	14.18	2:15 PM	2.00	0.25	0.10	15 min						П				Ī	()	T
2	8.90	14.04	12:00 AM	0.50	0.06	0.03	15 min		П		П		П		П		T		+
3	7.87	13.95		0.00	0.00	0.00	10		Н		П						T		+
4	7.48	13.98		0.00	0.00	0.00			Н		П		П				H		+
5	8.77	23.64	5:10 PM	0.92	0.28	0.26	15 min		H		П		П		П		H		+
6	7.59	14.44	0.101 til	0.00	0.00	0.00	10 111111		Н		П		Н						t
7	8.21	12.62		0.00	0.00	0.00			Н		Н		Н		Н		Н		+
8	7.76	15.03		0.00	0.00	0.00			H		Н						Н		╁
9	7.96	14.94		0.00	0.00	0.00			H				H		Н		Н		╁
10	6.93	13.45		0.00	0.00	0.00			H		Н		H		Н		H		+
11	7.19	12.97		0.00	0.00	0.00			H		Н		Н		Н		Н		$\vdash$
12	7.18	12.97		0.00	0.00	0.00					Н		H				Н	_	$\vdash$
13	8.46			0.00					H		Н		H				Н		$\vdash$
14		13.24	12:05 414		0.00	0.00	45 min		H		Н	_	Н		Н		Н		⊢
15	7.16	15.46	12:05 AM	1.83	0.38	0.18	15 min						Н		Н		Н		╁
16	7.65	15.94		0.00	0.00	0.00	-		$\vdash$		Н		Н		Н		Н		⊢
17	7.51	11.86		0.00	0.00	0.00			Н		Н		Н				Н		H
18	6.28	12.37		0.00	0.00	0.00		=	H		Н		Н		Н		Н		╁
19	7.35	14.20	9:20 AM	0.92	0.13	0.13	15 min		$\vdash$		Н		Н						-
20	7.54	12.48		0.00	0.00	0.00			Н		Н		Н		Н		Н		┝
21	7.57	12.28		0.00	0.00	0.00			Н		Н		Н		Н		Н		$\vdash$
22	8.17	14.14		0.00	0.00	0.00			Н		Н		Н		H		Н	-	⊢
23	7.74	12.97	E 00 444	0.00	0.00	0.00			Н		Н		Н		Н		Н		-
24	8.03	21.78	5:30 AM	1.08	0.40	0.37	15 min						H		H		Н		-
25	6.56	12.01	10.15.5	0.00	0.00	0.00			$\vdash$				Н		Н		Н		-
26	7.26	12.51	12:15 PM	0.17	0.02	0.02	15 min						Н		H		H		-
27	8.44	24.39	8:20 AM	1.25	0.51	0.26	15 min		+				Н		H		Н		-
28	7.37	13.98		0.00	0.00	0.00			$\vdash$		H		Н		H		H		-
	8.14	13.09		0.00	0.00	0.00			$\vdash$		H		Н		Н		Н		-
30	7.76	15.03	8:30 AM	1.92	0.35	0.15	15 min		$\vdash$				H		Н		Н		-
30	7.98	14.60		0.00	0.00	0.00			$\vdash$		H		H		H		H		-
Fotals:	230.37	RI'S		10.59	2.38		EFE	0	Da ys	0.00		0		0	Da ys	0.00		0	
Typed o	r Printed N	lame and	Title of Prin	cipal Exec	utive Office	or Author	rized Agent							Telephone	*				_

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)
long that Hurgera	07/18/24



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City:	Noblesvi	le											Page :	2 of	4			еп	nit Number:	·IN	0020168			
acility	Noblesvil	le V	Vastewa	ter l	Jtility								Public Notification Requirements Met? Y											
Aonitoring Period: June 2024												Enter "x" if no CSO discharge occurred for the month:											,	
Design 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								CSO Outfall No. 008 CSO Outfall No. 009															
Day of Month	Time Discharge Began	M or E	Event Duration (Hours)		Event Discharge (MG)	Mor	Time Discharge Began	M or E	Event Duration	M or E	Event Discharge (MG)	M or E		M or E	Event Duration	M	Event Discharge			M	Duration	М	Event Discharge	м
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otals:	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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sville																								
facility: Noblesville Wastewater Utility  Ionitoring Period: June 2024											Public Notification Requirements Met? Y													
											Enter "x" if no CSO discharge occurred for the month:													
											Measured/Metered (M) or Estimated (E) must be specified													
C	SO Out	fall No		010		- 19	CS	O Outfall	No.	011			csc	Outfall I	No.			CSO Outfall No.						
	r Dura		Dis	Event scharge (MG)	M or E	Time Discharge Began	M or E	Event Duration (Hours)	M or E	Discharge	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		M or E	Event Discharge (MG)		
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City: Noble	esville				Page: 4 of 4	Permit Number: IN0020168
Facility: Noble	esville Wastewater Utility				Public Not	tification Requirements Met? Y
Monitoring Pe	eriod: June	2024			Enter "x" II	no CSO discharge occurred for the month:
Design Peak I	Hourly Flow (MGD):	20	Design Average Flow (MGD):	10		
Day of						
	mments (further expla	nation as	to why each CSO event occurred		METERNIE I	
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Typed or Prin	ted Name and Title of Pri	incipal Exe	cutive Officer or Authorized Agent		KALUUL EK	Telephone
		Jo	onathan Mirgeaux, Utility Director			317-776-6353
WITH A SYST	EM DESIGNED TO ASSU THE PERSONS WHO MAI	IRE THAT ( NAGE THE	QUALIFIED PERSONNEL PROPERLY SYSTEM OR THOSE PERSONS DIRE	GATHER AN	D EVALUATE THE INFOI ONSIBLE FOR GATHER!	RECTION OR SUPERVISION IN ACCORDANC RMATION SUBMITTED. BASED ON MY NG THE INFORMATION; THE INFORMATION AT THERE ARE SIGNIFICANT PENALTIES FO
SUBMITTING	FALSE INFORMATION, I	NCLUDING	THE POSSIBILITY OF FINE AND IMP	RISONMENT	FOR KNOWING VIOLAT	ions.
Signature of P	Principal Executive Office	er or Autho	rized Agent			Date (mm/dd/yy)
	1/2	rath	a Museux			17/11/21