



**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: Noblesville		Page 1 of 4		Permit Number: IN0020168																
Facility: Noblesville Wastewater Utility				Public Notification Requirements Met? Y																
Monitoring Period: June 2024		Enter "x" if no CSO discharge occurred for the month: X																		
Design Peak Hourly Flow (MGD): 20		Design Average Flow (MGD): 10		Measured/Metered (M) or Estimated (E) must be specified																
WWTP Influent Data			Precipitation Data					CSO 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)	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	7.16	14.18	2:15 PM	2.00	0.25	0.10	15 min													
2	8.90	14.04	12:00 AM	0.50	0.06	0.03	15 min													
3	7.87	13.95		0.00	0.00	0.00														
4	7.48	13.98		0.00	0.00	0.00														
5	8.77	23.64	5:10 PM	0.92	0.28	0.26	15 min													
6	7.59	14.44		0.00	0.00	0.00														
7	8.21	12.62		0.00	0.00	0.00														
8	7.76	15.03		0.00	0.00	0.00														
9	7.96	14.94		0.00	0.00	0.00														
10	6.93	13.45		0.00	0.00	0.00														
11	7.19	12.97		0.00	0.00	0.00														
12	7.58	12.97		0.00	0.00	0.00														
13	8.46	13.24		0.00	0.00	0.00														
14	7.16	15.46	12:05 AM	1.83	0.38	0.18	15 min													
15	7.65	15.94		0.00	0.00	0.00														
16	7.51	11.86		0.00	0.00	0.00														
17	6.28	12.37		0.00	0.00	0.00														
18	7.35	14.20	9:20 AM	0.92	0.13	0.13	15 min													
19	7.54	12.48		0.00	0.00	0.00														
20	7.57	12.28		0.00	0.00	0.00														
21	8.17	14.14		0.00	0.00	0.00														
22	7.74	12.97		0.00	0.00	0.00														
23	8.03	21.78	5:30 AM	1.08	0.40	0.37	15 min													
24	6.56	12.01		0.00	0.00	0.00														
25	7.26	12.51	12:15 PM	0.17	0.02	0.02	15 min													
26	8.44	24.39	8:20 AM	1.25	0.51	0.26	15 min													
27	7.37	13.98		0.00	0.00	0.00														
28	8.14	13.09		0.00	0.00	0.00														
29	7.76	15.03	8:30 AM	1.92	0.35	0.15	15 min													
30	7.98	14.60		0.00	0.00	0.00														
<b>Totals:</b>	230.37			10.59	2.38			0	Days	0.00		0		0	Days	0.00		0		
Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent												Telephone								
Jonathan Mirgeaux, Utility Director												317-776-6353								
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)								
<i>Jonathan Mirgeaux</i>												07/18/24								



**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: Noblesville										Page 2 of 4					Permit Number: IN0020168										
Facility: Noblesville Wastewater Utility										Public Notification Requirements Met? Y															
Monitoring Period: June 2024										Enter "x" if no CSO discharge occurred for the month: x															
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)	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	
1																									
2																									
3																									
4																									
5																									
6																									
7																									
8																									
9																									
10																									
11																									
12																									
13																									
14																									
15																									
16																									
17																									
18																									
19																									
20																									
21																									
22																									
23																									
24																									
25																									
26																									
27																									
28																									
29																									
30																									
31																									
<b>Totals:</b>	0	Days	0.00		0		0	Days	0.00		0		0	Days	0		0		0	Days	0.00		0		



**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: Noblesville										Page 3 of 4					Permit Number: IN0020168									
Facility: Noblesville Wastewater Utility										Public Notification Requirements Met? Y														
Monitoring Period: June 2024										Enter "x" if no CSO discharge occurred for the month: x														
Design Peak Flow (Hourly) (MGD): 20					Design Flow (MGD): 10					Measured/Metered (M) or Estimated (E) must be specified														
CSO Outfall No. 010					CSO Outfall No. 011					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
1																								
2																								
3																								
4																								
5																								
6																								
7																								
8																								
9																								
10																								
11																								
12																								
13																								
14																								
15																								
16																								
17																								
18																								
19																								
20																								
21																								
22																								
23																								
24																								
25																								
26																								
27																								
28																								
29																								
30																								
<b>Totals:</b>	0	Da ys	0.00		0		0	Da ys	0.00		0		0	Da ys	0.00		0		0	Da ys	0.00		0	



**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: Noblesville	Page: 4 of 4	Permit Number: IN0020168
Facility: Noblesville Wastewater Utility	Public Notification Requirements Met? Y	
Monitoring Period: June 2024	Enter "x" if no CSO discharge occurred for the month: X	
Design Peak Hourly Flow (MGD): 20	Design Average Flow (MGD): 10	

Day of Month	Comments (further explanation as to why each CSO event occurred)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	

Typed or Printed Name and Title of Principal Executive Officer or Authorized Agent Jonathan Mirgeaux, Utility Director	Telephone 317-776-6353
---	---------------------------

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 <i>Jonathan Mirgeaux</i>	Date (mm/dd/yy) 07/18/24
--	-----------------------------