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# Report of Discharge (CSO\SSO\RTB)

version 1.11

(Submission #: HP1-C2P8-D47K0, version 1)

## Details

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**Submission ID** HP1-C2P8-D47K0

**Status** Submitted

## Form Input

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### Report Details

**Is this the initial or final discharge report?**

Final

**Site/Facility Name:**

Lake Mitchell Sewer Authority (former Wexford Co DPW) CM

**Permit Number (if applicable):**

3112a-1031

### Sewer System or Treatment Facility Owner

**Organization Name**

Lake Mitchell Sewer Authority

Phone Type	Number	Extension
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Business	2317750155	
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**Email**

operationsoffice@lakemitchellsewer.com

**Fax**

2317750156

3161 South Lake Mitchell Drive

Cadillac, MI 49601

US

### Facility Address

3161 South Lake Mitchell Drive

Cadillac, MI 49601

### Sewer System or Treatment Facility Owner Location

44.2298,-85.5088

3161 South Lake Mitchell Drive, Cadillac, MI

## Discharge Details (1 of 1)

### SSO Discharge from Grinder Pump Station 32A

**Discharge Type:**

SSO Discharge

### SSO Discharge

The reported discharge is from a private or municipal separate sewer collection system (not a wastewater treatment plant) during wet or dry weather, or a dry weather discharge from a municipal combined sewer collection system.

**Is the outfall or discharge area located at a private residential address?**

NO

**Outfall or Discharge Area Name**

Grinder Pump Station 32A

**Outfall or Discharge Area Description**

Grinder Pump Station 32A - 3431 West Lake Mitchell Drive

**Outfall or Discharge Area Location**

44.26506029999999,-85.4923521

3431 W Lake Mitchell Dr, Cadillac, MI 49601, USA

**Has the discharge ended?**

YES

Volume Discharged	Unit	Was the volume estimated?
50	Gallons	Yes

**Quality of Discharge**

Diluted Raw Sewage

**Please describe the discharge, including the reason for Discharge**

The grinder pump station was inoperable due to disposable wipes binding the pumps, that tripped both breakers in the panel. This activated the audio and visual alarm. The responding technician believes the alarm was not reported right away, which also contributed to the SSO.

**Was the land or surface water impacted by the discharge?**

Land impacted only

**Name/description of the land impacted:**

Surrounding ground around the wetwell of 32A

**Discharge Event Start**

Date	Time
7/19/2020	11:36 am

**Discharge Event End**

Date	Time
7/19/2020	12:00 pm

**Name of the wastewater treatment facility that normally receives sewage.**

Cadillac Wastewater Treatment Plant

**Was the reported discharge caused by a party other than the sewer system owner and out of the control or knowledge of the actions which resulted in the discharge?**

YES

**Is the sewer system owner in compliance with applicable discharge permits, laws, rules, and orders?**

YES

**Initial Notification**

Organization	Date	Time
Local Health Department	7/19/2020	01:36 pm
Daily Local Newspaper	7/19/2020	01:36 pm

**Notification that discharge has concluded.**

Organization	Date	Time
Local Health Department	7/19/2020	01:36 pm
Daily Local Newspaper	7/19/2020	01:36 pm

**Precipitation Type(s) (Select none if there was no precipitation)**

Rain

**Has the precipitation ended?**

YES

**Precipitation**

Start Date	Start Time
7/19/2020	03:30 am

Precipitation Amount (Inches)	Precipitation End Date	Precipitation End Time
1.5	7/19/2020	09:00 am

**Precipitation comments**

It rained during the night until morning.

**Actions taken to minimize the impact from the discharge(s):**

As a precautionary measure, the area impacted was raked, broadcast with lime, and taped off to keep the public from entering the area.

**Actions taken, or that will be taken, to prevent this discharge event from reoccurring:**

LMSA sends notices to the sewer customers regarding the non-flushable items to bring more awareness to the issue. LMSA also has information regarding non-flushable items and how to report sewer alarms.

**Additional Details**

**Report Submitter**

**Prefix**

NONE PROVIDED

**First Name      Last Name**

Sheila              Hill

**Title**

Project Manager

**Organization Name**

Lake Mitchell Sewer Authority

**Phone Type      Number              Extension**

Business              2317750155

**Email**

operationsoffice@lakemitchellsewer.com

**Fax**

2317750156

3161 South Lake Mitchell Drive

Cadillac, MI 49601

US

**Do you have any additional comments or uploads you would like to provide?**

YES

**Additional Information**

NONE PROVIDED

**Upload additional information, as needed.**

SSO Notice - July 19, 2020.pdf - 07/19/2020 03:22 PM

**Comment**

NONE PROVIDED

## Attachments

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Date	Attachment Name	Context	User
7/19/2020 3:22 PM	SSO Notice - July 19, 2020.pdf	Attachment	Sheila Hill

## Status History

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	User	Processing Status
7/19/2020 2:57:22 PM	Sheila Hill	Draft
7/19/2020 3:23:32 PM	Sheila Hill	Submitted