## New York State Department of Environmental Conservation <u>Division of Water</u>

12 W

## Report Noncompliance Event

10: DEC Water	er Contact:	vai wurakami		DEC Region: 7			
Report Type:	5 day	Permit Violation	Order Violation	Anticipated Noncompli		and the second s	Other
SECTION 2							
SPDES #: NY-	0029106	Fa	cility: Westside V	Vastewater Treatment Pla	ant		
Date of none	compliance:	7/24/17		II, Treatment Unit, or Pump S		Outfall WWTP-SSO	#004
Description of no			Bypass of sani	tary sewer wastewater occu	irred through u	npermitted Outfall #	
discharge line h	sed by stead	y neavy rain fall,	over plant design t	low of 12 mgd. Becaus	e lake levels	are so high our	
- discharge line i	backed up al	id a siliali allioui	nt of now went into	the same bypass area as	s the untreate	d flow.	
Has event ceased	? ( <u>Yes</u> )(No)	If so, when?	7/24/17 Was	event due to plant upset?	(Yes) (No) SF	PDES limits violation	(Yes) (No
Start date, time of	f event:	7/24/17	9:28 (AM	(PM) End date, time of event:	7/24/		(AM)(PM)
Date, time oral no	tification mad	e to DEC?	7/24/17	11:00 (AM)(PM) DEC 0			_(AW <u>)(FW</u> ) urakami
Immediate correc				stem returned to normal.	incial contacted.	Vai ivit	пакатп
Preventive (long to		re actions: O	ngoing separation	projects of the Westside	Collection sys	stem are on sched	ule as
per consent c	iecree.						
SECTION 3							
Complete thi	s section if eve	nt was a bypass:					
E	Bypass amount	5,000,000 gals W	as proir DEC authoriza	tion received for this event?	(Yes)(No)		
DEC Of	ficial contacted		Date of DEC app	proval	_		
Describe even	nt in "Descriptior	of noncompliance an	d cause" area in Section	2. Detail the start and end dates a	and times in Secti	on 2 also.	
SECTION 4			THE VIEW STEAMS			Forms by Envir	oWin (312-244-190
<u>OLOTIOI44</u>							
Facil	lity Representa	ative Gary T.	Hallinan	Title: Superinten	dent Date:	7/24/17	_
	Phone #:	315 342-3777		Fax # 315 342-8	3233	2	
3506-101 (12	2/93)			Signature: Mary	1 Sta	llia	