



eBusiness Center

Sanitary Sewer Overflow Annual Report

[Form Instructions \(\)](#)

General Information

Report Date

February 13, 2018

Facility Name

Covington WWTP

Ohio NPDES Permit Number

1PB00013*HD

Period Covered By Report**From**

January 01, 2017

To

December 31, 2017

Contact Person**First Name**

MIKE

Last Name

BUSSE

Title

VILLAGE ADMINISTRATOR

Email

administrator@covington-ohio.gov

Phone

(937) 473-3420

Address

1 S. HIGH ST.

City

COVINGTON

State

OH ▼

Zip Code

45318

Country

USA ▼

Sanitary Sewer Overflows

Have any Sanitary Sewer Overflows occurred during the reporting period?

Yes No

Water In Basement Occurrences

Were there any Water In Basement Occurrences during the reporting period?

Yes No

Additional Information

Additional Attachments

You may add another attachment



Sanitary Sewer Overflow Annual Report

Division of Surface Water

Date: 02/13/2018

Facility Name: Covington WWTP

Ohio NPDES Permit Number: 1PB00013*HD

Period Covered by Report: 01/01/2017 - 12/31/2017

Contact Person

Name: MIKE BUSSE

Title: VILLAGE ADMINISTRATOR

Mailing Address: 1 S. HIGH ST.

City: COVINGTON

State: OH

Zip Code: 45318

Country: USA

Sanitary Sewer Overflows Spreadsheet(attachment) :

Water In Basement Occurrences Spreadsheet(attachment) :

Narrative analysis of WIB patterns by location, frequency and cause:

Additional Attachments :

Certification

I certify under penalty of law that I have personally examined and am familiar with the information in this report and all attachments. Based on my inquiry of those persons immediately responsible for obtaining the information contained in the report, I believe that the information is true, accurate, and complete.

Name:

Ralph L Boehringer, Jr

Title:

Signature(Electronically submitted by):

Ralph L Boehringer, Jr (User ID: DSW-1480822031)

Submission Date:

02/13/2018