



Oregon Department of Environmental Quality SSO Reporting Form



This information must be submitted within 5 days of becoming aware of the overflow.
Please complete online and print for signature. Be sure to fill out all fields.

FACILITY/CONTACT INFORMATION

Name of Permittee: City of Ashland		
Contact Name: Jason Robustelli		
Phone:	Email:	County:
541-552-2339	robustelj@ashland.or.us	Jackson
DEQ Permit # (see permit face page): 101609		DEQ File #:3780
OERS Incident #: 2024-2703	Date Reported to OERS: 10/17/2024	
Date Reported To DEQ: 10/21/2024	Today's Date: 10/21/2024	
Date SSO Started (if known): 10/17/2024	Time Started (if known): 12:45 pm	
Date SSO Stopped (if known): 10/17/2024	Time Stopped (if known): 1:15 pm	
SSO Location: Manhole		
SSO Nearest Address: 1101 Siskiyou Blvd.		
City: Ashland	Zip Code: 97502	
SSO Latitude (if known):	Longitude (if known):	
Estimate of Quantity Overflowed: 150 Gallons	(Gallons) Link to estimation method	
Did the SSO discharge to surface water? No		
Name of waterbody:		

PUBLIC NOTIFICATION

Notified downstream drinking water sources (List Below)?	
Name of drinking water facility:	
Signs Posted?	
Media contacted?	
Who?	
List any other steps taken to notify the public or state/federal agencies:	

CAUSES

Cause or suspected cause of the overflow: Blockage - Other <i>If needed, attach additional sheets</i>	Rags from the SOU college campus, and Art type linen strips
Rainfall in the 24 hours prior to SSO (for storm-related overflows):	(inches)
Source of rainfall data: <i>If needed, attach additional sheets</i>	

RECEIVED

OCT 23 2024

DEQ-SALEM OFFICE

1-in-5 year 24 hour rainfall for the sewerage system area (if known):

(in/24hr)

EMERGENCY RESPONSE AND MITIGATION

List actions taken to stop and mitigate the impact of the SSO.

For overland flow:

Taped off affected area?

Cleaned up affected area? Yes

For SSO to surface water:

Bacteria samples taken to confirm impact?

Follow up bacteria samples taken to confirm end of impact?

Describe monitoring and results:

For SSOs that impact buildings:

Pumped out flooded buildings?

Disinfected?

Other measures taken (describe):

Area was disinfected with a water/bleach solution. Curb and gutter were rinsed and vac. Down stream catch basin was vac and storm drain line was jet rodded and vac.

Steps taken or planned to reduce, eliminate, and prevent the reoccurrence of the overflow and schedule for those steps:

This line will be CCTV to determine if there is a pipe defect causing the spill and it will be fixed or put on a more frequent cleaning schedule

COMMENTS

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 PERSON OR 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.

Authorized Signature

Date

Name (print)

Phone Number

*You may attach additional information to this report before sending to DEQ as needed to explain the circumstances of the overflow. This information may include but is not limited to: maintenance records and bacteria monitoring results.