DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IN0051691**	Permittee:	EASTWAY APARTMENTS WWTP	Facility:	EASTWAY APARTMENTS
Major:	No	Permittee Address:	4529 COLUMBUS AVE ANDERSON, IN 46013	Facility Location:	3 MANOR DR 2 MILES EAST OF CUMBERLAND GREENFIELD, IN 46140
Permitted Feature:	001 External Outfall	Discharge:	**001-A** 0.0334 MGD CLASS I EXTENDED AERATION - TO BREIER DITCH		

Report Dates & Status

Monitoring Period:	**From 04/01/24 to 04/30/24**	DMR Due Date:	**05/28/24**	Status:	**NetDMR Validated**

Considerations for Form Completion

THE FLOW METER(S) SHALL BE CALIBRATED AT LEAST ONCE ANNUALLY. SEMI PUBLIC HANCOCK COUNTY

Principal Executive Officer

First Name:	Ethan	Title:	Owner	Telephone:	765-730-5564
Last Name:	Fernhaber				

No Data Indicator (NODI)

Form NODI: --

Parameter Code	Parameter Name	Monitoring Location	Season #	Param. NODI		Quantity or Loading Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Quality or Concentration Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	2	--	Sample						=	7.6					19 - mg/L		02/07 - Twice Every Week	G2 - GRAB-2
					Permit Req.						>=	5.0 DLY AV MIN					19 - mg/L	0	02/07 - Twice Every Week	G2 - GRAB-2
					Value NODI															
00400	pH	1 - Effluent Gross	0	--	Sample						=	7.4			=	8.0	12 - SU		02/07 - Twice Every Week	GR - GRAB
					Permit Req.						>=	6.0 DAILY MN			<=	9.0 DAILY MX	12 - SU	0	02/07 - Twice Every Week	GR - GRAB
					Value NODI															
00530	Solids, total suspended	1 - Effluent Gross	2	--	Sample	=	1.6	=	2.0	26 - lb/d			=	5.1	=	6.3	19 - mg/L		01/07 - Weekly	24 - COMP24
					Permit Req.	<=	8.4 MO AVG	<=	12.5 MX WK AV	26 - lb/d			<=	30.0 MO AVG	<=	45.0 MX WK AV	19 - mg/L	0	01/07 - Weekly	24 - COMP24
					Value NODI															
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	2	--	Sample	=	0.09	=	0.3	26 - lb/d			=	0.3	=	0.8	19 - mg/L		01/07 - Weekly	24 - COMP24
					Permit Req.	<=	0.5 MO AVG	<=	0.8 MX WK AV	26 - lb/d			<=	1.9 MO AVG	<=	2.8 MX WK AV	19 - mg/L	0	01/07 - Weekly	24 - COMP24
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.042	=	0.054	03 - MGD									05/WK - Five Per Week	TM - TOTALZ
					Permit Req.		Req Mon MO AVG		Req Mon MX WK AV	03 - MGD								0	05/WK - Five Per Week	TM - TOTALZ
					Value NODI															
50060	Chlorine, total residual	1 - Effluent Gross	0	--	Sample								=	0.03	=	0.05	19 - mg/L		02/07 - Twice Every Week	GR - GRAB
					Permit Req.								<	0.06 MO AVG	<	0.06 DAILY MX	19 - mg/L	0	02/07 - Twice Every Week	GR - GRAB
					Value NODI															
50060	Chlorine, total residual	X - End of Chlorine Contact Chamber	0	--	Sample						=	0.67			=	3.0	19 - mg/L		02/07 - Twice Every Week	GR - GRAB
					Permit Req.						>=	0.5 DAILY MN				Req Mon DAILY MX	19 - mg/L	0	02/07 - Twice Every Week	GR - GRAB
					Value NODI															
51041	E. coli, colony forming units [CFU]	1 - Effluent Gross	0	--	Sample								=	1.0	=	1.0	3Z - CFU/100mL		01/07 - Weekly	GR - GRAB
					Permit Req.								<=	125.0 MO GEO	<=	235.0 DAILY MX	3Z - CFU/100mL	0	01/07 - Weekly	GR - GRAB
					Value NODI															
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	2	--	Sample	=	1.3	=	1.8	26 - lb/d			=	4.1	=	4.5	19 - mg/L		01/07 - Weekly	24 - COMP24
					Permit Req.	<=	7.0 MO AVG	<=	11.1 MX WK AV	26 - lb/d			<=	25.0 MO AVG	<=	40.0 MX WK AV	19 - mg/L	0	01/07 - Weekly	24 - COMP24
					Value NODI															
					Sample			=	1.27	80 - Mgal/mo									01/30 - Monthly	RT - RCOTOT

82220	**Flow, total**	1 - Effluent Gross	0	--	Permit Req.				Req Mon MO TOTAL 80 - Mgal/mo									0	01/30 - Monthly	RT - RCOTOT
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Attachments

Name	Type	Size
IN0051691_001A_MRO_2024_04.pdf	pdf	167010.0

Report Last Saved By

EASTWAY APARTMENTS WWTP

User:	turpinjle@yahoo.com
Name:	James Turpin
E-Mail:	turpinjle@yahoo.com
Date/Time:	2024-05-27 23:08 (Time Zone: -04:00)

Report Last Signed By

User:	turpinjle@yahoo.com
Name:	James Turpin
E-Mail:	turpinjle@yahoo.com
Date/Time:	2024-05-27 23:08 (Time Zone: -04:00)

MONTHLY REPORT OF OPERATION
PACKAGE TYPE WASTEWATER
TREATMENT PLANTS LESS THAN 0.05 MGD

State Form 53344 (R3 / 3-23)

Name of Facility				Permit Number
Eastway Court Apartments				IN0051691
Month	Year	Plant Design Flow		Telephone Number
April	2024	0.0350	mgd	765-730-5564
E-mail address:		turpinjle@yahoo.com		
Certified Operator: Name		Class	Certificate Number	Expiration Date
James C Turpin		I	WW013809	6/30/2024

General Information				Bypasses/ Overflows		RAW SEWAGE										AERATION					
Day Of Month	Day of Week	Man Hours	Precip. - Inches	At Plant Site ("x" if occurred)	Collection System ("x" if occurred)	Influent Flow Rate (if metered) MGD	pH	CBOD5 - mg/l	CBOD5 - lbs	TSS (mg/l)	TSS (lbs)	Ammonia - mg/l	Ammonia (lbs)	Phosphorus (mg/l)	Phosphorus (lbs)	30 Minute Settling	MLSS	Sludge Vol. Index (SVI) - ml/gm	D.O.	Temperature - F	WAS Gal.
1	Mon																				
2	Tue	0.5					7.2	38	11.73307	136	41.99204	4.22	1.302988			470	3120	151	5.9		
3	Wed																				
4	Thu	0.5					7.7												6.6		500
5	Fri																				
6	Sat																				
7	Sun																				
8	Mon																				
9	Tue	0.5					7.3	248	86.92152	232	81.31368	24.3	8.516907			420	4640	91	5.3		
10	Wed																				
11	Thu	0.5					7.5												5.2		500
12	Fri																				
13	Sat																				
14	Sun																				
15	Mon																				
16	Tue	0.5					7.2	194	77.70864	98	39.25488	21.12	8.459827			400	350	1143	7.0		
17	Wed																				
18	Thu	0.5					7.6												6.1		
19	Fri																				
20	Sat																				
21	Sun																				
22	Mon																				
23	Tue	0.5					7.8	172	41.62486	86	20.81243	25.78	6.238889			400	3520	114	6.5		500
24	Wed	0.5					7.6												4.4		
25	Thu																				
26	Fri																				
27	Sat																				
28	Sun																				
29	Mon	0.5					7.6	105	28.91543	136	37.45236	18.8	5.177238			460	4840	95	4.7		
30	Tue																				
Average								151	49.3807	138	44.16508	18.844	5.93917			430	3294	319	5.7		500
Maximum								248	86.92152	232	81.31368	25.78	8.516907			470	4840	1143	6.95		500
Minimum								38	11.73307	86	20.81243	4.22	1.302988			400	350	91	4.36		500
# of Data		9	0	0	0	0	9	5	5	5	5	5	5	0	0	5	5	5	9	0	3

Sludge Hauled Off Site (Gal):

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.

Prepared by or under the direction of (Certified Operator):

James Turpin

Date *(month, day, year)*

5/27/2024

Signature of principal executive officer or authorized agent
(or attested by NetDMR subscriber agreement)

Ethan Fernhaber

Date *(month, day, year)*

5/27/2024

MONTHLY REPORT OF OPERATION
PACKAGE TYPE WASTEWATER
TREATMENT PLANTS LESS THAN 0.05 MGD

State Form 53344 (R3 / 3-23)

Name of Facility	Permit Number	For Month Of:	Year	Total Monthly Flow	Percent Capacity (average flow / design)
astway Court Apartmen	IN0051691	April	2024	1.2700 mg	121%

FINAL EFFLUENT

Day Of Month	Effluent Flow Rate (MGD)	pH	CBOD (mg/l)	CBOD (lbs)	TSS (mg/l)	TSS (lbs)	D.O. (mg/l)	Residual Chlorine (mg/l) - Contact	Residual Chlorine (mg/l) - Final	E. Coli colony/100 ml	Ammonia (mg/l)	Ammonia (lbs)	Phosphorus (mg/l)	Phosphorus (lbs)	
1	0.024														
2	0.037	7.4	3.8	1.173307	3.16	0.975697	8.66	3	0.01	1	0.183	0.056504			
3	0.033														
4	0.047	7.8					9.26	1.61	0.02						
5	0.061														
6	0.055														
7	0.051														
8	0.048														
9	0.042	7.5	4.2	1.472058	5.66	1.983773	10.01	2.2	0.05	1	0.1	0.035049			
10	0.045														
11	0.086	7.8					10.24	1.89	0.04						
12	0.056														
13	0.056														
14	0.057														
15	0.061														
16	0.048	7.5	4.5	1.80252	5	2.0028	8.61	2.2	0.01	1	0.765	0.306428			
17	0.044														
18	0.031	7.8					8.97	0.67	0.01						
19	0.035														
20	0.035														
21	0.039														
22	0.032														
23	0.029	8	4	0.96802	5.5	1.331026	9.21	1.87	0.03	1	0.1	0.024201			
24	0.031	7.8					8.42	1.58	0.05						
25	0.03														
26	0.03														
27	0.034														
28	0.03														
29	0.033	7.7	3.8	1.046463	6.33	1.743187	7.56	1.73	0.04	1	0.177	0.048743			
30	0.03														
Avg	0.0423		4.06	1.292474	5.13	1.607297	8.993	1.86111	0.02889	1	0.265	0.094185			
Max	0.086	8	4.5	1.80252	6.33	2.0028	10.24	3	0.05	1	0.765	0.306428			
Min	0.024	7.4	3.8	0.96802	3.16	0.975697	7.56	0.67	0.01	1	0.1	0.024201			
Daily Max										1					
# of Days above 235										0					
Data	30	9	5	10	10	5	9	9	9	5	5	5	0	0	0

Enter Comments Below:

MONTHLY REMOVAL SUMMARY

	BOD5	S.S.	Ammonia	Phosphorus
Percent Removal	97.3	96.3	98.59371683	NA

Once Completed, this form should be converted to a pdf document, named appropriately and attached to the corresponding netDMR for submittal.