DMR Copy of Record

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

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Permit

Permit #:	**IN0109967**	Permittee:	HIGHLAND LAKES BAPTIST CAMP	Facility:	HIGHLAND LAKES BAPTIST CAMP
Major:	No	Permittee Address:	1591 W HIGHLAND LAKES BAPTIST CAMP N (3 MILES SOUTH OF MONROVIA) MARTINSVILLE, IN 46151	Facility Location:	7605 SR 39 3 MILES SOUTH OF MONROVIA MARTINSVILLE, IN 46157
Permitted Feature:	002 External Outfall	Discharge:	**002-A** 0.0243 MGD CLASS I PACKAGE PLANT - TO HIGHLAND CREEK		

Report Dates & Status

Monitoring Period:	**From 08/01/24 to 08/31/24**	DMR Due Date:	**09/28/24**	Status:	**NetDMR Validated**

Considerations for Form Completion

THE FLOW METER(S) SHALL BE CALIBRATED AT LEAST ONCE ANNUALLY. SEMIPUBLIC MINOR MORGAN COUNTY

Principal Executive Officer

First Name:	Rick	Title:	Director of Operations	Telephone:	317-484-2400
Last Name:	Porter				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	1	--	Sample						=	6.0					19 - mg/L	0	02/07 - Twice Every Week	G2 - GRAB-2
					Permit Req.						>=	6.0 DLYAVMIN					19 - mg/L		02/07 - Twice Every Week	G2 - GRAB-2
					Value NODI															
00400	pH	1 - Effluent Gross	0	--	Sample						=	7.4			=	7.8	12 - SU	0	02/07 - Twice Every Week	GR - GRAB
					Permit Req.						>=	6.0 DAILY MN			<=	9.0 DAILY MX	12 - SU		02/07 - Twice Every Week	GR - GRAB
					Value NODI															
00530	Solids, total suspended	1 - Effluent Gross	1	--	Sample	=	0.169	=	0.267	26 - lb/d			=	11.0	=	14.0	19 - mg/L	0	01/07 - Weekly	GR - GRAB
					Permit Req.	<=	3.7 MO AVG	<=	5.5 MX WK AV	26 - lb/d			<=	18.0 MO AVG	<=	27.0 MX WK AV	19 - mg/L		01/07 - Weekly	GR - GRAB
					Value NODI															
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	1	--	Sample	=	0.0028	=	0.0081	26 - lb/d			=	0.277	=	0.97	19 - mg/L	0	01/07 - Weekly	GR - GRAB
					Permit Req.	<=	0.3 MO AVG	<=	0.4 MX WK AV	26 - lb/d			<=	1.3 MO AVG	<=	2.0 MX WK AV	19 - mg/L		01/07 - Weekly	GR - GRAB
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.0019			03 - MGD								0	05/WK - Five Per Week	TM - TOTALZ
					Permit Req.		Req Mon MO AVG			03 - MGD									05/WK - Five Per Week	TM - TOTALZ
					Value NODI															
51041	E. coli, colony forming units [CFU]	1 - Effluent Gross	0	--	Sample								=	4.0	=	11.0	3Z - CFU/100mL	0	01/07 - Weekly	GR - GRAB
					Permit Req.								<=	125.0 MO GEO	<=	235.0 DAILY MX	3Z - CFU/100mL		01/07 - Weekly	GR - GRAB
					Value NODI															
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	1	--	Sample	=	0.0188	=	0.0334	26 - lb/d			=	1.0	=	2.0	19 - mg/L	0	01/07 - Weekly	GR - GRAB
					Permit Req.	<=	3.0 MO AVG	<=	4.7 MX WK AV	26 - lb/d			<=	15.0 MO AVG	<=	23.0 MX WK AV	19 - mg/L		01/07 - Weekly	GR - GRAB
					Value NODI															
80091	BOD, carb-5 day, 20 deg C, percent removal	K - Percent Removal	0	--	Sample						=	99.0					23 - %	0	01/30 - Monthly	CA - CALCTD
					Permit Req.						>=	85.0 MO AV MN					23 - %		01/30 - Monthly	CA - CALCTD
					Value NODI															
81011	Solids, suspended percent removal	K - Percent Removal	0	--	Sample						=	91.0					23 - %	0	01/30 - Monthly	CA - CALCTD
					Permit Req.						>=	85.0 MO AV MN					23 - %		01/30 - Monthly	CA - CALCTD
					Value NODI															
					Sample			=	0.06	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
IN0109967_002A_MRO_2024_08.pdf	pdf	1092182.0

Report Last Saved By

HIGHLAND LAKES BAPTIST CAMP

User:	cboultbee@pdswireless.com
Name:	Calvin Boultbee
E-Mail:	calvinboultbee42@gmail.com
Date/Time:	2024-09-24 19:31 (Time Zone: -04:00)

Report Last Signed By

User:	cboultbee@pdswireless.com
Name:	Calvin Boultbee
E-Mail:	calvinboultbee42@gmail.com
Date/Time:	2024-09-24 19:31 (Time Zone: -04:00)

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

State Form 53344 (R / 3-14)

Name of Facility	Permit Number	Phone Number:
Highland Lakes Baptist Campground	IN109967	1-812-550-2840

Certified Operator: Name	Class	Certificate Number	Expiration Date	E-mail Address:
Calvin Boultbee	IV	WW019596	6/30/ 2024	

Month: # : 8 Name: August Year 2024

Treatment Plant design flow: 0.0243 mgd

General Information				Bypasses/ Overflows		Raw Wastewater										Aeration Tank						Final Effluent					
Day of the Month	Day of the Week	Man Hours	Precip. - Inches	At Plant Site ("x" if occurred)	Collection System ("x" if occurred)	Influent Flow Rate if Metered (MGD)	pH	CBOD (mg/l)	CBOD (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	WAS Gal.	Effluent Flow Rate (MGD)	pH	CBOD (mg/l)	CBOD (lbs)	TSS (mg/l)	TSS (lbs)
1	Thu																					0.001					
2	Fri																					0.001					
3	Sat																					0.005					
4	Sun																					0.003					
5	Mon	2					7.6															0.002	7.8				
6	Tue																					0.001					
7	Wed	3					7.3	117	1.95	140	2.34	52.8	0.88			400	5180	77				0.002	7.6	1	0.0167	13.5	0.2253
8	Thu																					0					
9	Fri																					0.001					
10	Sat																					0.011					
11	Sun																					0.001					
12	Mon	2					7.4															0.001	7.8				
13	Tue																					0					
14	Wed	3					7.2	189	6.31	125	4.17	44.6	1.49			480	5100	94				0.004	7.4	1	0.0334	8	0.267
15	Thu																					0.001					
16	Fri																					0					
17	Sat																					0.006					
18	Sun																					0.003					
19	Mon	2					7.4															0.003	7.8				
20	Tue																					0					
21	Wed	3					7.4	63	0.53	120	1.00	35.2	0.29			530	5210	102				0.001	7.5	1	0.0083	8	0.0668
22	Thu																					0					
23	Fri																					0.001					
24	Sat																					0.005					
25	Sun																					0.003					
26	Mon	1.5					7.8															0.002	7.6				
27	Tue																					0					
28	Wed	3					7.5	60	0.50	120	1.00	31.9	0.27			20	190	1053				0.001	7.8	2	0.0167	14	0.1168
29	Thu																					0					
30	Fri																					0.001					
31	Sat																					0					
Average		2.4						107	2.32	126	2.13	41	0.73			358	3920	331				0.00194		1.3	0.0188	10.9	0.169
Maximum		3					7.8	189	6.31	140	4.17	52.8	1.49			530	5210	1053				0.011	7.8	2	0.0334	14	0.267
Minimum		1.5					7.2	60	0.50	120	1.00	31.9	0.27			20	190	77				0	7.4	1	0.0083	8	0.0668
Total		19.5	0	0	0																						

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): Calvin Boultbee — Date (*month, day, year*): 9.21.24

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement): Calvin Boultbee — Date (*month, day, year*): 9.21.24

Name of Facility:	Month/Year:
Highland Lakes Baptist Campground	August 2024
Total Monthly Flow	**Percent Capacity** (average flow / design)
0.06 mg	8%

MONTHLY REMOVAL SUMMARY				
	BOD5	S.S.	Ammonia	Phosphorus
Percent Removal	98.8	91.4	99.3	NA

Day of the Month	Final Effluent								
	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									
2									
3									
4									
5	6.1								
6									
7	6.1			3	0.0244	0.00041			
8									
9									
10									
11									
12	6.1								
13									
14	6.1			3	0.069	0.0023			
15									
16									
17									
18									
19	6.4								
20									
21	6.0			3	0.045	0.00038			
22									
23									
24									
25									
26	6.2								
27									
28	6.8			11	0.9685	0.00808			
29									
30									
31									
Avg	6.2			4	0.27673	0.00279			
Max	6.8			11	0.9685	0.00808			
Min	6			3	0.0244	0.00038			

Enter Comments Below:

Send by 28th of the Month to:

Indiana Department of Environmental Management
Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251