

Signed

INDIANA DEPARTMENT OF **ENVIRONMENTAL MANAGEMENT** 

System Name MARYSVILLE-OTISCO-NABB WATER CORPORATION PWSID Number 5210006 For the Month of MAY Year 2024 \_\_\_ IDEM Field Rep. ANNA READLE

Title SUPERINTENDENT

I certify under penalty of law, by this signature that this document was prepared by me, or under my direction, and the information submitted is to the best of my knowledge and belief, true, accurate, and complete.

I am also aware that there are significant penalties for submitting false information.

Certification Number \_DS976939

## PHYSICAL AND CHEMICAL DATA \*

Date	Turbidity		Alk	alinity		pН		CHEMIC		Т					
	Raw	Finished	Raw Finished		Raw	Finished		rdness		ron		ganese	Phosphate	Fluoride	T
1				1 misried	Itaw	rillished	Raw	Finished	Raw	Finished	Raw	Finished	Finished	Finished	I
2															
3															T
4															
5															I
6								N/A							
7															T
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															
19															
20															
21															
22			-												
23															
24															
25															
26															
27															
28															
29							-								
30															
31					_										

Date	Water Treated	Chemicals Used – Pounds								Fi	Chlorine Residual				Remarks		
	1000 gallons	Salt	Alum	Lime	Soda Ash	Carbon	Chlorine	e Fluoride	Phos- phate	Filter Run (hours)	Gallons per wash x 1000	Plant Tap		D	. S.		
1	396								priate	(nours)	wasn x 1000	Free	Total	Free	Total		
2	389											0.9		0.9			
3	459											0.8					and the second s
4	459											0.9		1.0			
5	459																
6	453																
7	343											0.8					
8	429											0.8					
9	395											1.2					
10	395											0.8					
11												0.7					
12	395																
13	395													1.0	· · · · · · · · · · · · · · · · · · ·		
4	437											8.0		1.0	***************************************		
	424											0.9					
5	425											1.2		0.7			
6	438											1.0					
7	437											0.7					
8	437													0.9			
9	437													0.0			
0	437											0.7					
1	484											0.8				Monthly M/-	·
2	457											0.9				Total Gallons	er Treatment
3	456											0.9	_				13468
4	441											1.0	-			Max. Day	484
5	467											1.0				Min. Day	343
3	467													+		Avg. Daily	434
7	467											10	_	1.1		E-Mail To: DWBMRO@idem.i	D 001
3	467											1.0					n.gov
)	395											1.0		_		Mail To: Indiana Departme	nt of
	451											0.7		_		Environmental Ma	nagement
	483 orm 34609 (R11 / 1-											1.0				Drinking Water Bra 100 N. Senate Ave Indianapolis, IN 46	Room N1201