

Department of Public Utilities

Garrett County Sanitary District, Inc.

2008 Maryland Highway, Suite #2, Mtn. Lake Park, Maryland 21550
 Telephone 301-334-6983 • Fax 301-334-6984 • E-mail: publicutilities@garrettcountry.org

TELEPHONE REPORT OF SEWAGE OVERFLOW

EMERGENCY PHONE # 866-633-4686

COPY

In What County did the Overflow Occur	Garrett
Is this a combined sewer overflow (CSO)	YES <input type="radio"/> NO <input checked="" type="radio"/> (CIRCLE ONE)
When did the Overflow Occur	DATE: February 2, 2014 TIME: 12 ⁰⁰ PM AM / PM
Is the Overflow Ongoing or has it been repaired	ONGOING <input type="radio"/> REPAIRED <input checked="" type="radio"/> DURATION OF INCIDENT: (CIRCLE ONE) 12 ⁰⁰ pm - 1 ⁴⁵ pm 2/2/14
Location of the Overflow: Street, Manhole #, Pump Station name, etc.	19638 Garrett Highway, The Inn at Deep Creek, Duplex grinder basin
Cause of the Overflow - Get as much information as possible.	Both pumps in grinder basin went down, kicked main breaker
What has been done to correct the Cause of the Overflow	Grinder basin pumped out with vacuum truck, pulled and cleaned 1 pump, replaced other pump
Did any of the Overflow Waste Water enter Waters of the State (includes storm drains)	<input checked="" type="radio"/> YES <input type="radio"/> NO NAME OF THE BODY OF WATER (IF YES) (CIRCLE ONE) Deep Creek lake
Has/will the public be notified? If yes, how?	Signs Posted & spill area taped off
Has/will the affected water body be posted as being contaminated?	Body of water is froze over, posted signs down to shoreline & taped off spill area
Estimated Quantity of the Overflow in GALLONS	1,200 gallons
What type of Clean-up or other mitigation is being performed or scheduled to be performed	lime stabilization & Ecoli sampling
Name of the Person Reporting the Overflow	NAME: John M.C. Miller PHONE: (301) 501-1109 TITLE: Superintendent
Name and type of Facility	FACILITY NAME: Deep Creek lake TYPE OF FACILITY: Collections
Written Follow-up Notice	REMINDE THE CALLER THAT A WRITTEN FOLLOW-UP IS REQUIRED WITHIN 5 CALENDER DAYS (UNLESS THIS IS A CITIZEN COMPLAINT)
Name of Staff Receiving Report	Carrol Hasselberger
Date and Time of Report	DATE: 2/3/14 TIME: 8 ³⁸ AM PM
Name of Staff Report was referred to for follow-up	
Copy Provided to	Dave Lyons; Bill Lee; Inspection Division Chief; inspector

illed Steve Sherrard with Health Dept @ 8:40 am left message, waiting on return call