

Department of Public Utilities

Garrett County Sanitary District, Inc.

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MAILED
6/20/16
Dave Lyons

TELEPHONE REPORT OF SEWAGE OVERFLOW

EMERGENCY PHONE # 866-633-4686

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: June 19 2016	TIME 10:40 <input checked="" type="radio"/> AM / PM
Is the Overflow Ongoing or has it been repaired	ONGOING <input type="radio"/> REPAIRED <input checked="" type="radio"/> (CIRCLE ONE)	DURATION OF INCIDENT: 10:40 am - 12:20 pm 1 hr. 40 min.
Location of the Overflow: Street, Manhole #, Pump Station name, etc.	1046 Lakeshore Dr. ran into ditch along Lakeshore dr, down ditch line and crossed over lakeshore dr, through culvert between 1003 and 981 lakeshore, then down ditch to Deep Creek lake	
Cause of the Overflow - Get as much information as possible.	Top blew out of 1 1/2" check valve on service line at 1046 lakeshore dr.	
What has been done to correct the Cause of the Overflow	Service line has been dug up and check valve replaced	
Did any of the Overflow Waste Water enter Waters of the State (Includes storm drains)	YES <input checked="" type="radio"/> NO <input type="radio"/> (CIRCLE ONE)	NAME OF THE BODY OF WATER (IF YES) Deep Creek lake
Has/will the public be notified? If yes, how?	informed customers in immediate area	
Has/will the affected water body be posted as being contaminated?	Posted signs at all docks in affected area and started E. coli samples of lake	
Estimated Quantity of the Overflow in GALLONS	2,500 gallons	
What type of Clean-up or other mitigation is being performed or scheduled to be performed	cleaned up ditch with vacuum truck and lime stabilized.	
Name of the Person Reporting the Overflow	NAME: John M.C. Miller	PHONE: (301) 387-9175
	TITLE: Superintendent	(301) 501-1109
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	Val Leton	
Date and Time of Report	DATE: 6/19/16	TIME: 5:50 AM <input checked="" type="radio"/> PM
Name of Staff Report was referred to for follow-up		
Copy Provided to	Dave Lyons; Bill Lee; Inspection Division Chief; inspector	

Pat Hudhall informed Steve Sherard with Garrett County Health Dept. around 1:15 pm