Sanitary Sewer Overflow Annual Report
Division of Surface Water

Date: 03/12/2020
Facility name: Village of Woodville WWTP
Ohio NPDES permit no.: 2PB00052*OD
Period covered by report: 12/1/2019-12/31/2019

Contact person
Name: Tom Brickley
Title: ORC
Mailing address: 530 Lime St. Woodville, OH 43469
Telephone: (419)849 - 3031
Email: watertreatment@woodville.net

Certification:
I certify under penalty of law that I have personally examined and am familiar with the information in this report and all attachments. Based on my inquiry of those persons immediately for obtaining the information contained in the report, I believe that the information is true, accurate, and complete.

Name (typed): Tom Brickley
Title: Operator
Signature: [Signature]
Date: 03/12/2020
SSO Annual Report Table 2: SSO Event Information  
Ohio NPDES Permit No.: 2PB00052*OD

<table>
<thead>
<tr>
<th>Date(^A)</th>
<th>Identification No.(^B)</th>
<th>Receiving Water(^C)</th>
<th>Volume(^D)</th>
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</table>

A. Enter date as “MM/DD/YY”. Enter “Various” to summarize overflows of less than 1000 gallons from an SSO location.
B. Enter the unique identification assigned in Table 1.
C. Enter name of receiving water. If an SSO enters a storm sewer, enter “SS to (name of receiving water).” If an SSO does not reach a receiving water, enter “None”.
D. Enter estimate of volume in MG (million gallons). Enter estimate of total volume if summarizing data.

Use additional pages as needed.
No WIB have occurred in Woodville.
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Facility Name: Woodville WWTP
Ohio NPDES Permit Number: 2PB00052*OD
Period Covered by Report: 12/01/2019 - 12/31/2019
Contact Person
    Name: Tom Brickley
    Title: ORC
    Mailing Address: 530 Lime St.
    City: Woodville
    Country: USA
    State: OH
    Zip Code: 43469
Sanitary Sewer Overflows Spreadsheet(attachment):
Water In Basement Occurrences Spreadsheet(attachment):
Narrative analysis of WIB patterns by location, frequency and cause:
Additional Attachments : SSO_annual_report 2019 Due may 31st, 2020.docx

Certification
I certify under penalty of law that I have personally examined and am familiar with the information in this report and all attachments. Based on my inquiry of those persons immediately responsible for obtaining the information contained in the report, I believe that the information is true, accurate, and complete.

Name: Thomas A Brickley
Title: Water Plant Operator
Signature(Electronically submitted by):
Thomas A Brickley (User ID: Tbrick23 )
Submission Date: 03/12/2020