



# Sanitary Sewer Overflow Annual Report Division of Surface Water

**Date:** 02/22/2021

**Facility Name:** Steubenville WWTP

**Ohio NPDES Permit Number:** OPD00014\*MD

**Period Covered by Report:** 01/01/2020 - 12/31/2020

**Contact Person**

**Name:** CHARLES MURPHY

**Title:** Utility Director

**Mailing Address:** 100 NORTH WATER STREET

**City:** STEUBENVILLE

**State:** OH

**Zip Code:** 43952

**Country:** USA

**Sanitary Sewer Overflows Spreadsheet(attachment) :** 2020 Steubenville Wastewater Department Annual SSO Overflow Report.xlsm

**Water In Basement Occurrences Spreadsheet(attachment) :**

**Narrative analysis of WIB patterns by location, frequency and cause:**

**Additional Attachments :**

Certification	
<i>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.</i>	
<b>Name:</b> Charles Murphy	<b>Title:</b> Utility Director
<b>Signature(Electronically submitted by):</b> Charles Murphy (User ID: SteubenvilleWWTP )	<b>Submission Date:</b> 02/22/2021



