



Sanitary Sewer Overflow Annual Report

Division of Surface Water

Date: 02/09/2023		
Facility Name: Pataskala WWTP		
Ohio NPDES Permit Number: 4PB00009*KD		
Period Covered by Report: 01/01/2022 - 12/31/2022		
Contact Person: Chris Sharrock		Title:
Mailing Address: 430 S Main Street		
City: Pataskala	State: OH	Zip Code: 43062
Country: USA		
Sanitary Sewer Overflows Spreadsheet(attachment) :		
Water In Basement Occurrences Spreadsheet(attachment) :		
Narrative analysis of WIB patterns by location, frequency and cause:		
ADDITIONAL INFORMATION		
<i>Please add any additional comments or attachments below.</i>		
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>		
Name: Chris Sharrock		Title: Utility Director
Signature(Electronically submitted by): Chris Sharrock (User ID: 1135468)		Submission Date: 02/09/2023