

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit #:	IL0027839	Permittee:	CANTON, CITY OF	Facility:	CANTON WEST STP, CITY OF
Major:	Yes	Permittee Address:	2 NORTH MAIN ST CANTON, IL 61520	Facility Location:	350 WEST HICKORY STREET CANTON, IL 61520
Permitted Feature:	001 External Outfall	Discharge:	001-0 STP OUTFALL		
Report Dates & Status				Status:	NotDMR Validated
Monitoring Period:	From 04/01/24 to 04/30/24	DMR Due Date:	05/29/24		

W05F7Q250003 : DMF LOAD LIMITS DISPLAYED.

Principal Executive Officer

First Name:	Kent	Title:	Mayor	Telephone:	309-647-1391
Last Name:	McDowell				

No Data Indicator (NODI)

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Sample Permit Req.	Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00300	Oxygen dissolved [DO]	1 - Effluent Gross	0	-	Value NODI					=	7.7					6.0 MINIMUM			12 - SU	GR - GRAB
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req.					=						9.0 MAXIMUM			12 - SU	GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req.	83.4	83.0 MO AVG	<=	194.8	26 - Bld		2.7				6.0	19 - ng/L		02DA - 2 Days Every Week	CP - COMPOS
00600	Nitrogen, total [as N]	1 - Effluent Gross	0	-	Sample Permit Req.	5.7	104.0 MO AVG	<=	16.5	26 - Bld		0.17				0.49	19 - ng/L		02DA - 2 Days Every Week	CP - COMPOS
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	3	-	Value NODI				209.0 DAILY MX	26 - Bld		1.3 MO AVG	<=		3.0 DAILY MX		19 - ng/L		02DA - 2 Days Every Week	CP - COMPOS
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	-	Sample Permit Req.							0.49				0.49	19 - ng/L		0130 - Monthly	CP - COMPOS
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	-	Sample Permit Req.	4.036	Req Mon MO AVG	=	6.804	03 - MGD									9999 - Continuous	GR - GRAB
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req.											0.0	19 - ng/L		02DA - 2 Days Every Week	CP - COMPOS
80092	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	-	Sample Permit Req.	38.0	650.0 MO AVG	<=	65.9	26 - Bld		1.2				2.0	19 - ng/L		02DA - 2 Days Every Week	CP - COMPOS

Submission Note
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Edit Check Errors

No errors.

Comments

Attachments

No attachments.

Report Last Saved By
CANTON, CITY OF

User:

Name:

E-Mail:

Date/Time:

Report Last Signed By

User:

Name:

E-Mail:

Date/Time:

CANTONWWTP

Joseph Carruthers

jcarruthers@cantoncityhall.org

2024-05-13 11:02 (Time Zone: -05:00)

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Joseph Carruthers

jcarruthers@cantoncityhall.org

2024-05-13 11:04 (Time Zone: -05:00)

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Permit #: IL0027839 | **Permittee:** CANTON, CITY OF
Major: Yes | **Permittee Address:** 2 NORTH MAIN ST
 CANTON, IL 61520 | **Facility Location:** CANTON WEST STP, CITY OF
 CANTON, IL 61520
Permitted Features: 001 External Outfall | **Discharge:** 001-S SEMI ANNUAL SAMPLING @ 001
Report Dates & Status: | **DMR Due Date:** 05/25/24 | **Status:** NEIDMR Validated
Monitoring Period: From 11/01/23 to 04/30/24
Considerations for Form Completion:

W0570250003

Principal Executive Officer

First Name: Kent | **Title:** Mayor
Last Name: McDowell

No Data Indicator (NODI)

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Sample Permit Req. Value NODI	Qualifier 1 Value 1	Qualifier 2 Value 2	Qualifier 3 Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00565	Oil & Grease	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	5.0	<	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	GR - GSAB	24 - COMF24
00720	Cyanide, total [as CN]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	5.0	<	Reg Mon DAILY MX	28 - ug/L	09/99 - See Permit	GR - GSAB	24 - COMF24
00722	Cyanide, free [amenable to chlorination]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	5.0	<	Reg Mon DAILY MX	28 - ug/L	09/99 - See Permit	GR - GSAB	24 - COMF24
00951	Fluoride, total [as F]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.469	=	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	24 - COMF24	24 - COMF24
01002	Arsenic, total [as As]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.001	<	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	24 - COMF24	24 - COMF24
01007	Barium, total [as Ba]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.066	=	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	24 - COMF24	24 - COMF24
01027	Cadmium, total [as Cd]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.001	<	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	24 - COMF24	24 - COMF24
01032	Chromium, hexavalent [as Cr]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.005	<	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	GR - GSAB	24 - COMF24
01034	Chromium, total [as Cr]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.004	<	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	24 - COMF24	24 - COMF24
01042	Copper, total [as Cu]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	0.003	<	Reg Mon DAILY MX	19 - mg/L	09/99 - See Permit	24 - COMF24	24 - COMF24

No attachments

Report Last Saved By
CANTON CITY OF

User:

Name:

E-Mail:

Date/Time:

Report Last Signed By

User:

Name:

E-Mail:

Date/Time:

CANTONWWTP

Joseph Carruthers

jcarruthers@cantoncityhall.org

2024-05-13 10:40 (Time Zone: -05:00)

CANTONWWTP

Joseph Carruthers

jcarruthers@cantoncityhall.org

2024-05-13 11:04 (Time Zone: -05:00)

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Permit #:	IL0027839	Permittee:	CANTON, CITY OF	Facility:	CANTON WEST STP, CITY OF
Major:	Yes	Permittee Address:	2 NORTH MAIN ST CANTON, IL 61520	Facility Location:	350 WEST HICKORY STREET CANTON, IL 61520
Permitted Feature:	003 External Outfall	Discharge:	003-0 CSO-STP BYPASS		
Report Dates & Status		DMR Due Date:	05/29/24	Status:	NotDMR Validated
Monitoring Period:	From 04/01/24 to 04/30/24				

Considerations for Form Completion
 W057250003 : RECEIVING WATER MAUVAISTERRE CREEKNUMBER OF DAYS OF DISCHARGE EFF 11/01/2015 THE GEO MEAN FOR OUTFALLS 002,003, AND 004 SHALL NOT EXCEED A DAILY MAX VALUE OF 4.5 x 10⁽¹⁾ CF/DAY MAY-OCTOBER

Principal Executive Officer
 First Name: Kent Title: Mayor Telephone: 309-647-1391
 Last Name: McDowell
 No Data Indicator (NODI) -

Code	Parameter Name	Monitoring Location	Season #	Permit NODI	Sample Permit Req. Value NODI	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI								19 - mg/L	DL/D5 - Daily When Discharging	GR - GSA8
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI		>=	6.0 MINIMUM				C - No Discharge	12 - SU	DL/D5 - Daily When Discharging	GR - GSA8
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI								19 - mg/L	DL/D5 - Daily When Discharging	GR - GSA8
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI								0.75 MG AVG	DL/D5 - Daily When Discharging	GR - GSA8
82220	Flow, total	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI								Req Mon MO TOTAL	DL/D5 - Daily When Discharging	CN - CONTIN
														C - No Discharge	

Submission Note
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Edit Check Errors
 No errors.
Comments

Attachments
 No attachments.
Report Last Saved By
 CANTON, CITY OF
User: CANTONWMTF
 Name: Joseph Caruthers
 E-Mail: jcaruthers@cantoncityhall.org

Date/Time: 2024-05-13 10:39 (Time Zone: -05:00)
Report Last Signed By
User: CANTONWW/TP
Name: Joseph Caruthers
E-Mail: jcaruthers@cantonohiohall.org
Date/Time: 2024-05-13 11:04 (Time Zone: -05:00)

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Permit #: IL0027839 | **Permittee:** CANTON, CITY OF
Major: Yes | **Permittee Address:** 2 NORTH MAIN ST
 CANTON, IL 61520 | **Facility Location:** CANTON WEST STP, CITY OF
 350 WEST HICKORY STREET
 CANTON, IL 61520
Permitted Feature: 004 External Outfall | **Discharge:** 004-0 EAST PLANT TREATED CSO
Monitoring Period: From 04/01/24 to 04/30/24 | **DMR Due Date:** 05/25/24 | **Status:** NotDMR Validated
Considerations for Form Completion

W0570250003 : NUMBER OF DAYS OF DISCHARGE:CS
Principal Executive Officer: Kerl, Mayor | **Title:** Mayor | **Telephone:** 309-647-1391
Last Name: McDowell

No Data Indicator (NODI): -
Form NODI: -

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Sample Permit Req. Value NODI	Qualifier 1 Value 1	Qualifier 2 Value 2	Qualifier 3 Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	>=	6.0 MINIMUM C - No Discharge		Req Mon DAILY MX 19 - mg/L C - No Discharge	12 - SU	D/D/S - Daily When Discharging	GR - GRAB
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI			<=	9.0 MAXIMUM C - No Discharge		D/D/S - Daily When Discharging	GR - GRAB
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI				Req Mon DAILY MX 19 - mg/L C - No Discharge		D/D/S - Daily When Discharging	GR - GRAB
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI				Req Mon MO AVG 0.75 MO AVG C - No Discharge		D/D/S - Daily When Discharging	GR - GRAB
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI			<=	0.75 MO AVG C - No Discharge		D/D/S - Daily When Discharging	GR - GRAB
74055	Coliform, fecal general	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI			<=	400.0 DAILY MX 13 - #/100mL C - No Discharge		D/D/S - Daily When Discharging	GR - GRAB
82220	Flow, total	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI				Req Mon MO TOTAL 80 - Mgal/mo C - No Discharge		D/D/S - Daily When Discharging	CN - CONTIN

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Edit Check Errors
 No errors
 Comments
 Attachments

No attachments.

Report Last Saved By
CANTON, CITY OF

User:
Name:
E-Mail:
Date/Time:

CANTONWWTP
Joseph Carruthers
jcarruthers@cantoncityhall.org
2024-05-13 10:39 (Time Zone: -05:00)

Report Last Signed By

User:
Name:
E-Mail:
Date/Time:

CANTONWWTP
Joseph Carruthers
jcarruthers@cantoncityhall.org
2024-05-13 11:04 (Time Zone: -05:00)

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Major:	Yes	Permittee Address:	2 NORTH MAIN ST CANTON, IL 61520	Facility Location:	350 WEST HICKORY STREET CANTON, IL 61520
Permitted Features:	INF Influent Structure	Discharge:	INF-L INFLUENT MONITORING		
Reporting Period:	From 04/01/24 to 04/30/24	DMR Due Date:	05/25/24	Status:	NECDMR Validated
Monitoring Period:	From 04/01/24 to 04/30/24				
Considerations for Form Completion					

W06570250003

Principal Executive Officer

First Name: Kent

Last Name: McDowell

No Data Indicator (NODI)

Form NODI:

Code

00310 BOD, 5-day, 20 deg. C

00530 Solids, total suspended

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Sample Permit Req. Value NODI	Qualifier 1	Value 1	Quantity or Loading	Qualifier 2	Value 2	Units	Qualifier 1 Value 1	Qualifier 2 Value 2	Quality or Concentration	Qualifier 3 Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00310	BOD, 5-day, 20 deg. C	G - Raw Sewage Influent	0	-	Sample Permit Req. Value NODI	Qualifier 1	Value 1	Quantity or Loading	Qualifier 2	Value 2	Units	Qualifier 1 Value 1	Qualifier 2 Value 2	Quality or Concentration	Qualifier 3 Value 3	Units	19	02/DA - 2 Days Every Week	CP - COMPOS
00530	Solids, total suspended	G - Raw Sewage Influent	0	-	Sample Permit Req. Value NODI	Qualifier 1	Value 1	Quantity or Loading	Qualifier 2	Value 2	Units	Qualifier 1 Value 1	Qualifier 2 Value 2	Quality or Concentration	Qualifier 3 Value 3	Units	19	02/DA - 2 Days Every Week	CP - COMPOS
50050	Flow, in conduit or thru treatment plant	G - Raw Sewage Influent	0	-	Sample Permit Req. Value NODI	Qualifier 1	Value 1	Quantity or Loading	Qualifier 2	Value 2	Units	Qualifier 1 Value 1	Qualifier 2 Value 2	Quality or Concentration	Qualifier 3 Value 3	Units	19	02/DA - 2 Days Every Week	CP - COMPOS

Submission Note

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Comments

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Report Last Signed By

User:

Name:

E-Mail:

CANTONWWTP
Joseph Carruthers
jcarruthers@cantoncityhall.org
2024-05-13 10:38 (Time Zone: -05:00)

CANTONWWTP
Joseph Carruthers
jcarruthers@cantoncityhall.org

Date/Time:

2024-05-13 11:04 (Time Zone: -05:00)

