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80082	50060	50050	00665	00610	00600	00530	00400	00300	Code	Form NODI:	Last Name:	First Name:	Principa	W05702	Monitor	Report	Permitt	Major:	Permit #:	Permit
BOD, carbonaceous [5 day, 20 C]	Chlorine, total residual	Flow, in conduit or thru treatment plant	Phosphorus, total [as P]	Nitrogen, ammonia total [as N]	00600 Nitrogen, total [as N]	Solids, total suspended	PH	Oxygen, dissolved [DO]	Parameter Name	Caron (mone)			Principal Executive Officer	W0570250003; DMF LOAD LIMITS DISPLAYED.	Monitoring Period:	Report Dates & Status	Permitted Feature:		*	
1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	1 - Effluent Gross	Monitoring Location Season # Param. NODI	Total State	McDowell	Kent		YED.	From 04/01/25 to 04/30/25	External Cuttail	001 External Outfall	Yes	IL0027839	
0	0	ı	1	ω 1	1	0 -	0	0	Season # Para						THE PERSON NAMED IN					
Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	Sample Permit Req. Value NODI	am. NODI											
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î "		G II		1		^ "		2 54	Quantity or Loading Qualifier 2											
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26 - lb/d 26 - lb/d		03-MGD X 03-MGD		26 - lb/d 26 - lb/d		26 - lb/d 26 - lb/d	X n		Units Qual			or .			5/25	OUTFALL	001-0	2 NORTH MAIN ST CANTON, IL 61520	CANTON, CITY OF	
						= 1 1	7.7 6.0 MINIMUM		Units Qualifier 1 Value 1											
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î "	^ "		VG =	^ "	u	^ "	^ "		centration Qualifier 3											
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19 - mg/L 19 - mg/L	19 - mg/L 19 - mg/L		19-mg/L /X 19-mg/L	19 - mg/L 19 - mg/L	19 - mg/L /X 19 - mg/L	19 - mg/L 19 - mg/L	12 - SU 12 - SU	19 - mg/L 19 - mg/L	Unite #			309-647-1391			NetDMR Validated			350 WEST HICKORY STREET CANTON, IL 61520	CANTON WEST STP, CITY OF	
02/DA - 2 Days Every Week 02/DA - 2 Days Every Week	CL/OC - Chlorination/Occurances CL/OC - Chlorination/Occurances	99/99 - Continuous 99/99 - Continuous	01/30 - Monthly 01/30 - Monthly	02/DA - 2 Days Every Week 02/DA - 2 Days Every Week	01/30 - Monthly 01/30 - Monthly	02/DA - 2 Days Every Week 02/DA - 2 Days Every Week	02/DA - 2 Days Every Week 02/DA - 2 Days Every Week	02/DA - 2 Days Every Week 02/DA - 2 Days Every Week	# of Ex. Frequency of Analysis						選が 日本語の 対			RY STREET	TP, CITY OF	
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Submission Note

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No errors. Edit Check Errors

Comments

No attachments.
Report Last Saved By
CANTON, CITY OF Attachments

E-Mail: Date/Time:

Name: User:

Report Last Signed By

JMBOHLER

Jared Bohler

jmb984@yahoo.com 2025-05-19 07:37 (Time Zone: -05:00)

JMBOHLER
Jared Bohler 2025-05-19 08:00 (Time Zone: -05:00) jmb984@yahoo.com

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0		82220		74055		50060		00610		00530			00400			00310		Code		Form NODI:	No Dat	Last Name:	First Name:	Princip	W0570	Consid	Monito	Report	Permit	Major:	Permit #:	Fernit
alan Mad	ion, iom	Flow total		Coliform, fecal general		Chlorine, total residual		Nitrogen, ammonia total [as N]		Solids, total suspended			PH			00310 BOD, 5-day, 20 deg. C		Name	Parameter		No Data Indicator (NODI)	ame:		Principal Executive Officer	W0570250003; NUMBER OF DAYS OF DISCHARGE:CS	Considerations for Form Completion	Monitoring Period:	Report Dates & Status	Permitted Feature:		**	
The second secon	- Fillingin Gloss	1 - Efficient Gross		1 - Effluent Gross		1 - Effluent Gross		EG - Effluent Gross		1 - Effluent Gross			1 - Effluent Gross			1 - Effluent Gross			Monitoring Location			McDowell	Kent		DISCHARGE:CS		From 04/01/25 to 04/30/25		002 External Outfall	Yes	IL0027839	
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				13-#/100mL		19 - mg/L		19 - mg/L					12 - SU			19 - mg/L		Units	# of Ex.				309-647-1391				NetDMR Validated			350 WEST HICKORY STREET CANTON, IL 61520	CANTON WEST STP, CITY OF	
	CECS - Daily when Discharging	DI /DS - Dsilv When Discharging		DUDS - Daily When Discharging		DL/DS - Daily When Discharging		DUDS - Daily When Discharging		DL/DS - Daily When Discharging			DL/DS - Daily When Discharging			DL/DS - Daily When Discharging			Frequency of Analysis								a			ORY STREET	STP, CITY OF	
	CN - Continuous	ON O		GR - Grab		GR - Grab		GR - Grab		GR - Grab			GR - Grab			GR - Grab		adf. and	Sample Type													

Submission Note

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No errors

No errors.

Comments

Attachments

No attachments.
Report Last Saved By
CANTON, CITY OF User:
Name:
E-Mail:
Date/Time: E-Mail: Date/Time:
Report Last Signed By JMBOHLER

Jared Bohler

jmb984@yahoo.com JAREN Bohler jmb984@yahoo.com 2025-05-19 07:38 (Time Zone: -05:00)

2025-05-19 08:00 (Time Zone: -05:00)

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		C - No Discharge			
	/gal/mo	Req Mon MO TOTAL 80 - Mgal/mo	Sample Sample Permit Req.	1 - Effluent Gross	82220 Flow, total
C - No Discharge	C-		Value NODI		
0.75 MO AVG 19 - mg/L	~ = 0.		Sample Sample	1 - Effluent Gross	50060 Chlorine, total residual
C - No Discharge			Value NODI		
Reg Mon MO AVG 19 - mg/L			0	1 - Effluent Gross	00530 Solids, total suspended
C - No Discharge	C - No Discharge		Value NODI		
<= 9.0 MAXIMUM 12 - SU	MUMINIM 0.8		0	1 - Effluent Gross	00400 рН
C - No Discharge			Value NODI		
Req Mon MO AVG			Sample Sample Permit Req.	1 - Effluent Gross	00310 BOD, 5-day, 20 deg. C
ler 2 Value 2 Qualifier 3 Value 3 Units	Units Qualifier 1 Value 1 Qualifier 2	2			Code Name
Quality or Concentration		Quantity or Loading	Monitoring Location Season# Param. NODI	Monitoring Local	Parameter
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					No Data Indicator (NODI)
			vell	McDowell	Last Name:
Telephone: 309-647-1391	Mayor	Title:		Kent	First Name:
Principal Executive Officer	OUTFALLS 002,003, AND 004 SHALL N	ISCHARGE EFF 11/01/2015 THE GEO MEAN FOR	ARE CREENNOMBER OF DATA OF D	VIEW.WACANIOIEN	Principal Executive Officer
				oletion	Considerations for Form Completion
Status: NetDMR Validated	05/25/25	DMR Due Date:	From 04/01/25 to 04/30/25	From 0	Monitoring Period:
					Report Dates & Status
	003-0 CSO-STP BYPASS	Discharge:	003 External Outfall	003 Externa	Permitted Feature:
Facility Location: 350 WEST HICKORY STREET CANTON, IL 61520	2 NORTH MAIN ST CANTON, IL 61520	Permittee Address:		Yes	Major:
Facility: CANTON WEST STP, CITY OF	CANTON, CITY OF	Permittee:	7839	IL0027839	Permit #:
					Permit

Submission Note

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No errors.

Edit Check Errors

No attachments. Report Last Saved By Attachments

CANTON, CITY OF

Name:

jmb984@yahoo.com Jared Bohler

JMBOHLER

E-Mail: Date/Time: Date/Time: Report Last Signed By 2025-05-19 07:38 (Time Zone: -05:00) Jared Bohler jmb984@yahoo.com 2025-05-19 08:00 (Time Zone: -05:00) **JMBOHLER**

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Permit

82220 Flow, total	74055 Coliform, fecal general		50060 Chlorine, total residual		00530 Solids, total suspended 00610 Nitrogen, ammonia total 50060 Chlorine, total residual	00400 pH 00530 Solids, total susp 00510 Nitrogen, ammon	00310 BOD, 5-day, 20 deg, C 00400 pH 00530 Solids, total suspende	Ocade Name Ocade	Form NODI: Parameter Code Nam 00310 BOD, 5-day, 20 de 00400 pH 00530 Solids, total suspe	Mo Data Indicator (WODI) Form NODI: Parameter Code PARAMETER Nam 00310 BOD, 5-day, 20 dej 00400 pH 00530 Solids, total suspe	First Name: Last Name: No Data Inclicator (NOD) Form NODI: Parameter Code Nam 00310 BOD, 5-day, 20 d 00400 pH 00530 Solids, total susp 00530 Nitrogen, ammon	Principal Executive Officer First Name: Last Name: No Data Indicator (NODI) Form NODI: Parameter Code Parameter Name 00310 BOD, 5-day, 20 deg. 00400 pH 00530 Solids, total suspend 00510 Nitrogen, ammonia to	Monitoring Period: Considerations for Form Completion W0570250003 : NUMBER OF DAYS O Principal Executive Officer First Name: Last Name: No Data Indicator (NODI) Form NODI: Parameter Code D0310 BOD, 5-day, 20 deg. C 00400 pH 00530 Solids, total suspended 00530 Nitrogen, ammonia total [as N]	Permitted Feature: Report Dates & Status Monitoring Period: Considerations for Forr W0570250003 : NUMBEI Principal Executive Off First Name: No Data Indicator (NOD) Form NODI: Perameter Code Name 00310 BOD, 5-day, 20 d 00400 pH 00530 Solids, total susp
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No errors.

Comments

Attachments

 No attachments.
 No attachments.

 Report Last Saved By CANTON, CITY OF
 JMBOHLER

 User:
 Jared Bohler

 E-Mall:
 Jmb84@yahoo.com

 Date/Time:
 2025-05-19 07:39 (Time Zone: -05:00)

 Report Last Signed By
 JMBOHLER

 Name:
 Jared Bohler

 E-Mail:
 JmBOHLER

 Jared Bohler
 Jmb984@yahoo.com

 Date/Time:
 Jone Jone: -05:00)

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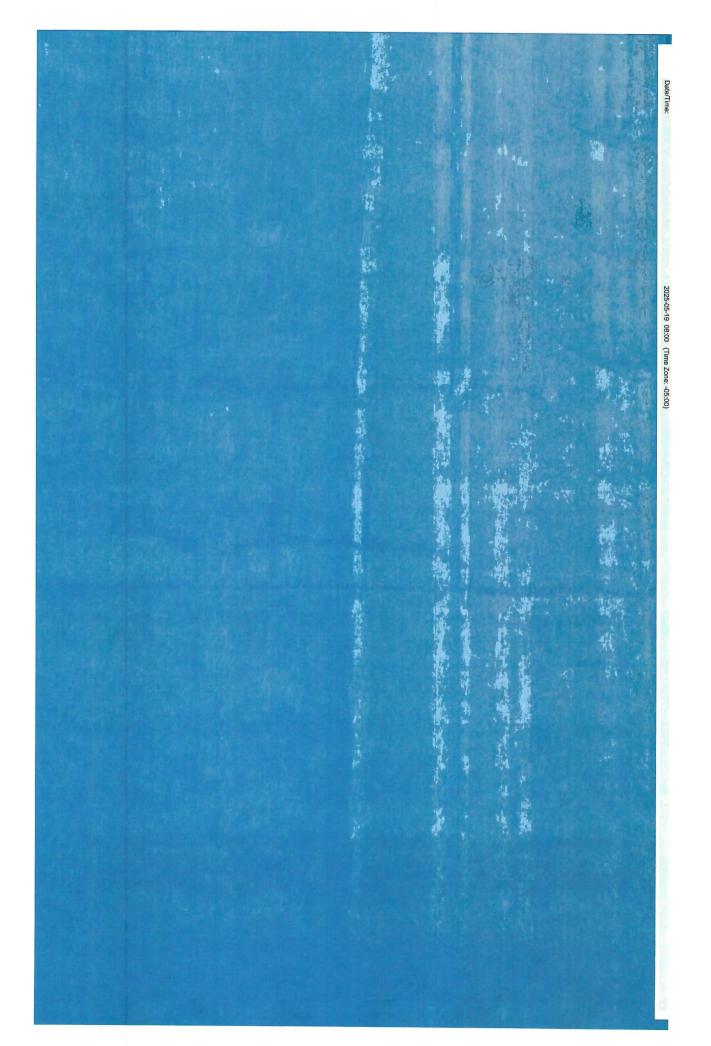
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Trust Name: Kort Cart Name: Kort Cart Name: C	es for the Sample nor Effluent Trading, the	Comments Attachments No attachments. Report Last Saved By CANTON, CITY OF User:
309-647-1391 Concentration Value 2 Qualifler 3 Value 3 Units 19 - mg/L 19 - mg/L 19 - mg/L 02/DA - 2 Days Every Week On MO AVG 19 - mg/L 02/DA - 2 Days Every Week 19 - mg/L 02/DA - 2 Days Every Week 9999 - Confinuous 9999 - Confinuous	es for the Sample nor Effluent Trading, the	Comments Attachments No attachments Report Last Saved By CANTON, CITY OF
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Monitoring Location Season # Param. NODI Sample G. Raw Sewage Influent O		Submission Note
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Monitoring Location Season # Param. NODI G. Raw Sewage Influent O	G - Raw Sewage Influent	50050 Flow, in conduit or thru treatment plant
Monitoring Location Mayor Cuantity or Location Cuantity or Concentration Cualifier 1 Value 1 Qualifier 1 Value 1 Qualifier 2 Value 2 Cuantity or Concentration Cuantity or		
Mayor Telephone: 309-647-1391 Mayor Telephone: 309-647-1391 Mayor Telephone: 309-647-1391 Cualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 3 Value 3 Units 1 - mg/L 02DA - 2 Days Every Weak (S-Raw Sewage Influent 0 - Value NDD) Title: Mayor Telephone: 309-647-1391		00530 Solids, total suspended
Mayor Telephone: 309-647-1391 Monitoring Location Season# Param. NODI Monitoring Location Season# Param. NODI Countifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 2 Value 2 Qualifier 3 Value 3 Units Countifier 2 Value 2 Qualifier 3 Value 3 Units Countifier 3 Value 3 Units Countifier 4 Value 1 Qualifier 2 Value 2 Qualifier 3 Value 3 Units Countifier 5 Value 2 Qualifier 3 Value 3 Units Countifier 6 Value 7 Qualifier 9 Value 6 Telephone: Countifier 1 Value 1 Qualifier 9 Value 2 Units Qualifier 9 Value 2 Qualifier 9 Value 9 Telephone: Countifier 1 Value 1 Qualifier 9 Value 9 Qualifier 9 Va		
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Mayor Telephone: 309-647-1391		Code Name
Title: Mayor Telephone:	Monitoring Location	Parameter
Title: Mayor Telephone:		Form NODI:
Title: Mayor Telephone:		licator (NODI)
Title: Mayor Talanhone.	McDowell	
	Kent	
		Principal Executive Officer
		W0570250003
		Considerations for Form Completion
n 04/01/25 to 04/30/25 DMR Due Dato: 05/25/25 Status: NetDMR Validated	From 04/01/25 to 04/30/25	Monitoring Period: Fi
		Report Dates & Status
ent Structure Discharge: INF-L INFLUENT MONITORING	INF Influent Structure	Permitted Feature: IN
Permittee Address: 2 NORTH MAIN ST CANTON, IL 61520 Facility Location:	Yes	Major: Y
27839 Permittee: CANTON CITY OF Facility: CANTON WEST STP, CITY OF	IL0027839	Permit #:
		Permit

User: Name: E-Mail:

JMBOHLER
Jared Bohler
jmb984@yahoo.com

Report Last Signed By



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Qualify or Loading Qualifier 1 Value 1 Qualifier 2 Value 2 Qualifier 3 Value 1 Qualifier 2 Value 2 Qualifier 3	nits Qualifier 1
Mayor	
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Permittee: CANTON, CITY OF Permittee Address: 2 NORTH MAIN ST CANTON, IL 61520	

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0.024 Req Mon DAILY MX 0.013 Req Mon DAILY MX 0.001 Req Mon DAILY MX 0.017 Req Mon DAILY MX 0.005 Req Mon DAILY MX 0.005 Req Mon DAILY MX		Sample					
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0.024 Req Mon DAILY MX		Sample					
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		Permit Req.	ı	1 - Effluent Gross 0	1-Ef	iron, total [as Fe]	01045
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Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type. **Edit Check Errors**

No errors.

No attachments.

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E-Mail:

Report Last Signed By Date/Time:

jmb984@yahoo.com 2025-05-19 07:57 (Time Zone: -05:00)

Jared Bohler

Date/Time:

Jared Bohler **JMBOHLER**

2025-05-19 08:00 (Time Zone: -05:00)

jmb984@yahoo.com