

**SANITARY SEWER OVERFLOW
ANNUAL REPORT**

DATE: 03/20/09

FACILITY NAME: Lake Darby Estates Wastewater Treatment Works

OHIO NPDES PERMIT NO: 4PU00001*GD

PERIOD COVERED BY REPORT: 1/1/08 to 12/31/08

CONTACT PERSON

NAME: Thomas Schwing

TITLE: Superintendent of Operations

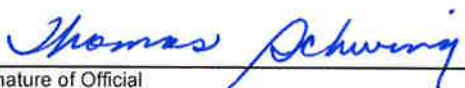
MAILING ADDRESS:

5481 Buenos Aires Blvd.
Westerville, OH 43081

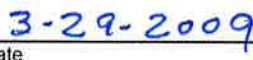
TELEPHONE: 614-882-6586 ext. 1001

EMAIL: thomas.schwing@amwater.com

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.



Signature of Official



Date

Superintendent of Operations

Title

Enter narrative analysis of WIB patterns by location, frequency and cause.

none