

DMR Copy of Record

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

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<b>Permit #:</b>	IL0027839	<b>Permittee:</b>	CANTON, CITY OF	<b>Facility:</b>	CANTON WEST STP, CITY OF
<b>Major:</b>	Yes	<b>Permittee Address:</b>	2 NORTH MAIN ST CANTON, IL 61520	<b>Facility Location:</b>	350 WEST HICKORY STREET CANTON, IL 61520
<b>Permitted Feature:</b>	001 External Outfall	<b>Discharge:</b>	001-0 STP OUTFALL		
<b>Report Dates &amp; Status</b>		<b>DMR Due Date:</b>	02/25/25	<b>Status:</b>	NotDMR Validated
<b>Monitoring Period:</b>	From 01/01/25 to 01/31/25				
<b>Considerations for Form Completion</b>					

W05702950003 - DMR LOAD LIMITS DISPLAYED

**Principal Executive Officer**  
**Title:**  
**Telephone:**

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

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading			Quantity or Concentration			# of Ex.	Frequency of Analysis	Sample Type
					Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3			
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	1	-	Sample Permit Req. Value NODI		Qualifier 1 Value 1	Qualifier 2 Value 2	Qualifier 3 Value 3	Units			GR - Grab
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	42.8	10.3	131.7	8.0	12 - SU			GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	835.0 MO AVG	1689.0 DAILY MX	26 - l/ld	11.2	19 - mg/L			CP - Composite
00600	Nitrogen, total [as N]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	1.9	10.8	26 - l/ld	5.5	19 - mg/L			CP - Composite
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	118.0 MO AVG	236.0 DAILY MX	26 - l/ld	3.4	19 - mg/L			CP - Composite
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	1.495	2.345	03 - MGD	1.6	19 - mg/L			CP - Composite
50050	Flow, In conduit or thru treatment plant	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	Req Mon MO AVG	Req Mon DAILY MX	03 - MGD	9989 - Continuous				GR - Grab
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI				0.0	19 - mg/L			GR - Grab
80032	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	16.6	35.7	26 - l/ld	3.2	19 - mg/L			CP - Composite

**Submission Note**  
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**Edit Check Errors**

No errors.

**Comments**

**Attachments**

No attachments.

**Report Last Saved By**  
CANTON, CITY OF

**User:**

JMBOHLER

**Name:**

Jared Bohler

**E-Mail:**

jmb984@yahoo.com

**Date/Time:**

2025-02-13 07:43 (Time Zone: -06:00)

**Report Last Signed By**

**User:**

JMBOHLER

**Name:**

Jared Bohler

**E-Mail:**

jmb984@yahoo.com

**Date/Time:**

2025-02-13 07:45 (Time Zone: -06:00)

**DMR Copy of Record**

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<b>Permit #:</b>	IL0027839	<b>Permittee:</b>	CANTON, CITY OF	<b>Facility:</b>	CANTON WEST STP, CITY OF
<b>Major:</b>	Yes	<b>Permittee Address:</b>	2 NORTH MAIN ST CANTON, IL 61520	<b>Facility Location:</b>	350 WEST HICKORY STREET CANTON, IL 61520
<b>Permitted Feature:</b>	002 External Outfall	<b>Discharge:</b>	002-0 MAIN PLANT TREATED CSO		
<b>Report Dates &amp; Status</b>		<b>DMR Due Date:</b>	02/25/25	<b>Status:</b>	NEIDMR Validated
<b>Monitoring Period:</b>	From 01/01/25 to 01/31/25				

**Considerations for Form Completion**

W0570250003 : NUMBER OF DAYS OF DISCHARGE:CS

**Principal Executive Officer**

**First Name:** Kent  
**Last Name:** McDowell

**Title:** Mayor

**Telephone:**

309-647-1391

**No Data Indicator (NODI)**

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading		Quality or Concentration			# of Ex.	Frequency of Analysis	Sample Type
					Qualifier 1 Value 1	Qualifier 2 Value 2	Qualifier 1 Value 1	Qualifier 2 Value 2	Qualifier 3 Value 3			
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI							
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI		>=	6.0 MINIMUM C - No Discharge				
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI							
00610	Nitrogen, ammonia total [as N]	EG - Effluent Gross	0	-	Sample Permit Req. Value NODI				Req Mon MO AVG C - No Discharge			
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI				<=	0.75 MO AVG C - No Discharge		
74055	Coliform, fecal general	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI							
82220	Flow, total	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI				Req Mon MO TOTAL C - No Discharge	80 - Megalim		

**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.

**Comments**  
Attachments

No attachments.

**Report Last Saved By**  
CANTON, CITY OF

User:

JMBOHLER  
Jared Bohler

Name:

Jm984@yahoo.com

E-Mail:

2025-02-13 07:39 (Time Zone: -06:00)

**Report Last Signed By**

User:

JMBOHLER

Name:

Jared Bohler

E-Mail:

Jm984@yahoo.com

Date/Time:

2025-02-13 07:45 (Time Zone: -06:00)

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<b>Permit #:</b>	LD0027839	<b>Permittee:</b>	CANTON, CITY OF	<b>Facility:</b>	CANTON WEST STP, CITY OF
<b>Major:</b>	Yes	<b>Permittee Address:</b>	2 NORTH MAIN ST CANTON, IL 61520	<b>Facility Location:</b>	350 WEST HICKORY STREET CANTON, IL 61520
<b>Permitted Feature:</b>	003 External Outfall	<b>Discharge:</b>	003-0 CSO-STP BYPASS		
<b>Report Dates &amp; Status</b>		<b>DMR Due Date:</b>	02/25/25	<b>Status:</b>	NotDMR Validated
<b>Monitoring Period:</b>	From 01/01/25 to 01/31/25				
<b>Considerations for Form Completion</b>					
W057025003 : RECEIVING WATERMAUVAISTERRE 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(11) CF/DAY MAY-OCTOBER					

**Principal Executive Officer**  
 First Name: Kent  
 Last Name: McDowell  
 Title: Mayor  
 Telephone: 309-647-1391

Code	Parameter Name	Monitoring Location	Season #	Param. NOD1	Sample Permit Req.	Quantity or Loading		Units	Quality or Concentration			# of Ex.	Frequency of Analysis	Sample Type
						Qualifier 1	Value 1		Qualifier 2	Value 2	Qualifier 3			
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	-	Value NOD1				6.0 MINIMUM C - No Discharge			19 - mg/L	D/LDS - Daily When Discharging	GR - Grab
00400	pH	1 - Effluent Gross	0	-	Value NOD1				>=	6.0 MINIMUM C - No Discharge		12 - SU	D/LDS - Daily When Discharging	GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req.					Req Mon MO AVG		19 - mg/L	D/LDS - Daily When Discharging	GR - Grab
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req.					Req Mon MO AVG		19 - mg/L	D/LDS - Daily When Discharging	GR - Grab
82220	Flow, total	1 - Effluent Gross	0	-	Sample Permit Req.					Req Mon MO TOTAL C - No Discharge	80 - Mgd/Day		D/LDS - Daily When Discharging	CN - Continuous

**Submission Note**  
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**Edit Check Errors**  
 No errors.

**Comments**

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

User: JIMBOHLER  
 Name: Jared Bohler  
 E-Mail: jrb984@yahoo.com

Date/Time: 2025-02-13 07:38 (Time Zone: -06:00)  
Report Last Signed By: JIMBOHLER  
User: Jared Bohler  
Name: jimboh4@yahoo.com  
E-Mail: 2025-02-13 07:45 (Time Zone: -06:00)  
Date/Time:

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<b>Permit #:</b> IL0027839	<b>Permittee:</b> CANTON, CITY OF	<b>Facility:</b> CANTON WEST STP, CITY OF
<b>Major:</b> Yes	<b>Permittee Address:</b> 2 NORTH MAIN ST CANTON, IL 61520	<b>Facility Location:</b> 350 WEST HICKORY STREET CANTON, IL 61520
<b>Permitted Feature:</b> 004 External Outfall	<b>Discharge:</b> 004-0 EAST PLANT TREATED CSO	
<b>Report Dates &amp; Status:</b>	<b>DMR Due Date:</b> 02/25/25	<b>Status:</b> NotDMR Validated
<b>Monitoring Period:</b> From 01/01/25 to 01/31/25		

W0570250003 : NUMBER OF DAYS OF DISCHARGE CS

**Principal Executive Officer**

**First Name:** Kent  
**Last Name:** McDowell

**Title:** Mayor

**Telephone:** 309-647-1391

**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	# 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					19 - mg/L	DJDS - Daily When Discharging	GR - Grab
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	<=	9.0 MAXIMUM C - No Discharge					12 - SU	DJDS - Daily When Discharging	GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI							19 - mg/L	DJDS - Daily When Discharging	GR - Grab
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI							19 - mg/L	DJDS - Daily When Discharging	GR - Grab
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	<=	0.75 MG AVG C - No Discharge					19 - mg/L	DJDS - Daily When Discharging	GR - Grab
74055	Coliform, fecal general	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI	<=	400.0 DAILY MX C - No Discharge					13 - #/100mL	DJDS - Daily When Discharging	GR - Grab
82220	Flow, total	1 - Effluent Gross	0	-	Sample Permit Req. Value NODI								DJDS - Daily When Discharging	CN - Continuous

**Submission Note**

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**Edit Check Errors**

No errors

**Comments**

**Attachments**

No attachments

**Report Last Saved By**  
**CANTON, CITY OF**

User: JIMBOHLER  
Name: Jared Bohler  
E-Mail: jimb984@yahoo.com  
Date/Time: 2025-02-13 07:38 (Time Zone: -08:00)

**Report Last Signed By**

User: JIMBOHLER  
Name: Jared Bohler  
E-Mail: jimb984@yahoo.com  
Date/Time: 2025-02-13 07:45 (Time Zone: -08:00)



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<b>Major:</b> Yes	<b>Permit Address:</b> 2 NORTH MAIN ST CANTON, IL 61520	<b>Facility Location:</b> 350 WEST HICKORY STREET CANTON, IL 61520
<b>Permitted Feature:</b> INF Influent Structure	<b>Discharge:</b> INF-L INFLUENT MONITORING	
<b>Report Dates &amp; Status</b>	<b>Monitoring Period:</b> From 01/01/25 to 01/31/25	<b>Status:</b> <b>NE/DMR Validated</b>
<b>Considerations for Form Completion</b>	<b>DMR Due Date:</b> 02/25/25	

**Principal Executive Officer**  
 First Name: Kent Title: Mayor Telephone: 309-647-1391  
 Last Name: McDowell

**No Data Indicator (NOD)**

Code	Parameter Name	Monitoring Location	Season #	Param. NOD1	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 NOD1										81.0			19 - mg/L	02/DA - 2 Days Every Week	CP - Composite	
00630	Solids, total suspended	G - Raw Sewage Influent	0	-	Sample Permit Req. Value NOD1										161.5			19 - mg/L	02/DA - 2 Days Every Week	CP - Composite	
50050	Flow, In conduit or thru treatment plant	G - Raw Sewage Influent	0	-	Sample Permit Req. Value NOD1	1,485	Req Mon MO AVG	2,345	Req Mon DAILY MX	03 - MGD									9999 - Continuous	9999 - Continuous	

**Submission Note**  
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**Comments**

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

User: JIMBOHLER  
 Name: Jared Bohler  
 E-Mail: jmb984@yahoo.com  
 Date/Time: 2025-02-13 07:37 (Time Zone: -05:00)

**Report Last Signed By**  
 User: JIMBOHLER  
 Name: Jared Bohler  
 E-Mail: jmb984@yahoo.com

Date/Time:

2025-02-13 07:45 (Time Zone: -06:00)

