



CERTIFIED WASTEWATER  
CONTRACT OPERATOR  
CONSULTING SERVICES

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WASTEWATER TREATMENT OPERATOR  
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FACILITY : **VILLAGE OF HOFFMAN**  
DATE : **APRIL 28, 2018**  
REPORTING MONTH : **APRIL 2018**

DEAR SIR :

Below is a summary of test results on your wastewater facility. These results should be kept on file at your office. **Do not send this sheet to IEPA. See IEPA reporting information below.**

DATE	SAMPLE POINT	* BOD 5 (PPM)	S. S. (PPM)	p H (UNITS)	NH3-N (PPM)	D. O. (PPM)	Fecal Coli. (N/100 ml.)
4/1/18	INF	18.5	21	—	—	—	—
“	EFF	5.8	9.5	7.98	3.07	6.92	
							(May—Oct)
3 days	Lag. checks						
<b>BILL :</b>							

**Using the NetDMR reporting system, I will electronically sign and submit your DMR reports to IEPA by the 25th of this following month... Robert Risley / ROInC**

If there are any questions, please advise.  
Comments:

(V. Hoff.)

(\* CBOD 5 if applicable )