



Sanitary Sewer Overflow Annual Report

Division of Surface Water

Date: 02/12/2026		
Facility Name: Versailles WWTP		
Ohio NPDES Permit Number: 1PB00033*LD		
Period Covered by Report: 01/01/2025 - 12/31/2025		
Contact Person: Doug Jackson		Title:
Mailing Address: 103 W. North St.		
City: Arcanum	State: OH	Zip Code: 45304
Country: USA		
Sanitary Sewer Overflows Spreadsheet(attachment) :		
Water In Basement Occurrences Spreadsheet(attachment) :		
Narrative analysis of WIB patterns by location, frequency and cause:		
ADDITIONAL INFORMATION		
<i>Please add any additional comments or attachments below.</i>		
Certification		
<i>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.</i>		
Name: Doug Jackson		Title: Plant Manager
Signature(Electronically submitted by): Doug Jackson (User ID: dougsfast)		Submission Date: 02/12/2026