



Sanitary Sewer Overflow Annual Report Division of Surface Water

Date: 01/10/2025		
Facility Name: Dover WWTP		
Ohio NPDES Permit Number: OPD00005*ND		
Period Covered by Report: 01/01/2024 - 12/31/2024		
Contact Person: Trevor Klar		Title:
Mailing Address: 100 N. Tuscarawas Ave.		
City: Dover	State: OH	Zip Code: 44622
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: Trevor Klar		Title: Water/Wastewater Superintendent
Signature(Electronically submitted by): Trevor Klar (User ID: trevorxl)		Submission Date: 01/10/2025