



**Alabama Department of Environmental Management**  
**adem.alabama.gov**

**MAY 24, 2022** 1400 Coliseum Blvd. 36110-2400 ■ Post Office Box 301463  
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HONORABLE JAMES E. BALL  
CHAIRMAN – BALDWIN COUNTY COMMISSION  
BALDWIN COUNTY COMMISSION  
PO BOX 1488  
BAY MINETTE, AL 36507

RE: **REVISED DRAFT PERMIT**  
**NPDES PERMIT NUMBER AL0069345**

Dear Mr. Ball:

Transmitted herein is a revised draft of the referenced permit.

We would appreciate your comments on the permit within **30 days** of the date of this letter. Please direct any comments of a technical or administrative nature to the undersigned.

By copy of this letter and the draft permit, we are also requesting comments within the same time frame from EPA.

Our records indicate that have utilized the Department's web-based electronic environmental (E2) reporting system for submittal of discharge monitoring reports (DMRs). The Department transitioned from the E2 Reporting System to the Alabama Environmental Permitting and Compliance System (AEPACS) for the submittal of DMRs on November 15, 2021. AEPACS is an electronic system that allows facilities to apply for and maintain permits as well as submit other required applications, registrations, and certifications. In addition, the system allows facilities to submit required compliance reports or other information to the Department. The Department has used the E2 User account information to set up a similar User Profile in AEPACS based on the following criteria:

1. The user has logged in to E2 since October 1, 2019; and
2. The E2 user account is set up using a unique email address.

E2 users that met the above criteria will only need to establish an ADEM Web Portal account (<https://prd.adem.alabama.gov/awp>) under the same email address as their E2 account to have the same permissions in AEPACS as they did in E2. They will also automatically be linked to the same facilities they were in E2.

The Alabama Department of Environmental Management encourages you to voluntarily consider pollution prevention practices and alternatives at your facility. Pollution Prevention may assist you in complying with effluent limitations, and possibly reduce or eliminate monitoring requirements.

If you have questions regarding this permit or monitoring requirements, please contact Isabelle Berry by e-mail at [isabelle.berry@adem.alabama.gov](mailto:isabelle.berry@adem.alabama.gov) or by phone at (334) 271-7851.

Sincerely,

Scott Ramsey, Chief  
Industrial Section  
Industrial/Municipal Branch  
Water Division

Enclosure: Draft Permit

pc via website: Montgomery Field Office  
EPA Region IV  
U.S. Fish & Wildlife Service  
AL Historical Commission  
Advisory Council on Historic Preservation  
Department of Conservation and Natural Resources



# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: BALDWIN COUNTY COMMISSION

FACILITY: MAGNOLIA SANITARY LANDFILL  
15140 COUNTY ROAD 49  
SUMMERDALE, ALABAMA 36580  
BALDWIN COUNTY

PERMIT NUMBER: AL0069345

RECEIVING WATERS: DSN001 - UNNAMED TRIBUTARY TO BARNER BRANCH  
DSN002 - UNNAMED TRIBUTARY TO SCHOOLHOUSE BRANCH

*In accordance with and subject to the provisions of the Federal Water Pollution Control Act, as amended, 33 U.S.C. §§1251-1388 (the "FWPCA"), the Alabama Water Pollution Control Act, as amended, Code of Alabama 1975, §§ 22-22-1 to 22-22-14 (the "AWPCA"), the Alabama Environmental Management Act, as amended, Code of Alabama 1975, §§22-22A-1 to 22-22A-17, and rules and regulations adopted thereunder, and subject further to the terms and conditions set forth in this permit, the Permittee is hereby authorized to discharge into the above-named receiving waters.*

ISSUANCE DATE:

EFFECTIVE DATE:

EXPIRATION DATE:

## Revised Draft

Alabama Department of Environmental Management

**INDUSTRIAL SECTION**  
**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT**

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**PART I DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS****A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS****DSN 0011: Stormwater runoff that contains landfill wastewater as defined by 40 CFR 445. 3/ 4/**

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq	Sample Type	Seasonal
BOD, 5-Day (20 Deg. C) (00310) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
pH (00400) Effluent Gross Value	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Monthly	Grab	All Months
Solids, Total Suspended (00530) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Oil & Grease (00556) Effluent Gross Value	*****	*****	*****	*****	*****	15 Maximum Daily	mg/l	Monthly	Grab	All Months
Nitrogen, Total (As N) (00600) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Phosphorus, Total (As P) (00665) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Monthly	Instantaneous	All Months
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Monthly	Grab	All Months

**THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.



**DSN 0011 (Continued): Stormwater runoff that contains landfill wastewater as defined by 40 CFR 445. 3/ 4/**

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq	Sample Type	Seasonal
Solids, Total Dissolved (70295) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Chemical Oxygen Demand (COD) (2) (81017) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months

**THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE  
OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.

## DSN 001A Landfill wastewater as defined by 40 CFR 445. 3/ 4/

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq	Sample Type	Seasonal
BOD, 5-Day (20 Deg. C) (00310) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
pH (00400) Effluent Gross Value	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Once per Weekly Discharge	Grab	All Months
Solids, Total Suspended (00530) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Zinc, Total (As Zn) (01092) 5/ Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Phenol, Single Compound (34694) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Once per Weekly Discharge	Measured	All Months
P-Cresol (77146) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months

**THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE  
OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ This outfall is to be monitored only when there has been no discharge to DSN0011 for the monitoring period. During those monitoring periods when a discharge is reported for DSN0011, this outfall is not applicable and the permittee shall report NODI=9 or \*9 on the eDMR for DSN001A.
- 5/ For the purpose of compliance with this parameter, "Total" and "Total Recoverable" shall be considered equivalent.

**DSN 001A (Continued): Landfill wastewater as defined by 40 CFR 445.3/ 4/**

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq	Sample Type	Seasonal
Benzoic Acids - Total (77247) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Alpha-Terpineol (1) (77493) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months

**THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE  
OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ This outfall is to be monitored only when there has been no discharge to DSN0011 for the monitoring period. During those monitoring periods when a discharge is reported for DSN0011, this outfall is not applicable and the permittee shall report NODI=9 or \*9 on the eDMR for DSN001A.



## DSN 001B Landfill wastewater as defined by 40 CFR 445. 3/ 4/

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq	Sample Type	Seasonal
BOD, 5-Day (20 Deg. C) (00310) Effluent Gross Value	*****	*****	*****	*****	37 Monthly Average	140 Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	9.0 Maximum Daily	S.U.	Once per Weekly Discharge	Grab	All Months
Solids, Total Suspended (00530) Effluent Gross Value	*****	*****	*****	*****	27 Monthly Average	88 Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	*****	*****	*****	*****	4.9 Monthly Average	10 Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Zinc, Total (As Zn) (01092) S/ Effluent Gross Value	*****	*****	*****	*****	0.11 Monthly Average	0.20 Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Phenol, Single Compound (34694) Effluent Gross Value	*****	*****	*****	*****	0.015 Monthly Average	0.026 Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Once per Weekly Discharge	Measured	All Months
P-Cresol (77146) Effluent Gross Value	*****	*****	*****	*****	0.014 Monthly Average	0.025 Maximum Daily	mg/l	Once per Weekly Discharge	Grab	All Months

**THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE  
OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ This outfall is to be monitored only when there has been no discharge to DSN0011 for the monitoring period. During those monitoring periods when a discharge is reported for DSN0011, this outfall is not applicable and the permittee shall report NODI=9 or \*9 on the eDMR for DSN001A.
- 5/ For the purpose of compliance with this parameter, "Total" and "Total Recoverable" shall be considered equivalent.

**DSN 001B (Continued): Landfill wastewater as defined by 40 CFR 445.3/ 4/**

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration		Units	Sample Freq	Sample Type	Seasonal
Benzoic Acids - Total (77247) Effluent Gross Value	*****	*****	*****	*****	0.071 Monthly Average	0.12 Maximum Daily	mg/l	Once per Weekly Discharge	Grab  All Months
Alpha-Terpineol (1) (77493) Effluent Gross Value	*****	*****	*****	*****	0.016 Monthly Average	0.033 Maximum Daily	mg/l	Once per Weekly Discharge	Grab  All Months

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OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ This outfall is to be monitored only when there has been no discharge to DSN0011 for the monitoring period. During those monitoring periods when a discharge is reported for DSN0011, this outfall is not applicable and the permittee shall report NODI=9 or \*9 on the eDMR for DSN001A.

**DSN 0021: Stormwater runoff associated with industrial activity. 3/ 4/**

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from DSN 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq	Sample Type	Seasonal
BOD, 5-Day (20 Deg. C) (00310) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
pH (00400) Effluent Gross Value	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Monthly	Grab	All Months
Solids, Total Suspended (00530) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Oil & Grease (00556) Effluent Gross Value	*****	*****	*****	*****	*****	15 Maximum Daily	mg/l	Monthly	Grab	All Months
Nitrogen, Total (As N) (00600) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Phosphorus, Total (As P) (00665) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Monthly	Instantaneous	All Months
Solids, Total Dissolved (70295) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months
Chemical Oxygen Demand (COD) (2) (81017) Effluent Gross Value	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Monthly	Grab	All Months

**THE DISCHARGE SHALL HAVE NO SHEEN, AND THERE SHALL BE NO DISCHARGE  
OF VISIBLE OIL, FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.**

- 1/ Samples collected to comply with the monitoring requirements specified above shall be collected at the following location: At the nearest accessible location just prior to discharge and after final treatment. Unless otherwise specified, composite samples shall be time composite samples collected using automatic sampling equipment or a minimum of eight (8) equal volume grab samples collected over equal time intervals. All composite samples shall be collected for the total period of discharge not to exceed 24 hours.
- 2/ If only one sampling event occurs during a month, the sample result shall be reported on the discharge monitoring report as both the monthly average and daily maximum value for all parameters with a monthly average limitation.
- 3/ See Part IV.A for Best Management Practices (BMP) Plan Requirements.
- 4/ See Part IV.B for Stormwater Measurement and Sampling Requirements.



**B. DISCHARGE MONITORING AND RECORD KEEPING REQUIREMENTS**

1. Representative Sampling

Samples and measurements taken as required herein shall be representative of the volume and nature of the monitored discharge and shall be in accordance with the provisions of this permit.

2. Test Procedures

For the purpose of reporting and compliance, permittees shall use one of the following procedures:

- a. For parameters with an EPA established Minimum Level (ML), report the measured value if the analytical result is at or above the ML and report "0" for values below the ML. Test procedures for the analysis of pollutants shall conform to 40 CFR Part 136 and guidelines published pursuant to Section 304(h) of the FWPCA, 33 U.S.C. Section 1314(h). If more than one method for analysis of a substance is approved for use, a method having a minimum level lower than the permit limit shall be used. If the minimum level of all methods is higher than the permit limit, the method having the lowest minimum level shall be used and a report of less than the minimum level shall be reported as zero and will constitute compliance; however, should EPA approve a method with a lower minimum level during the term of this permit the permittee shall use the newly approved method.

- b. For pollutants parameters without an established ML, an interim ML may be utilized. The interim ML shall be calculated as 3.18 times the Method Detection Level (MDL) calculated pursuant to 40 CFR Part 136, Appendix B.

Permittees may develop an effluent matrix-specific ML, where an effluent matrix prevents attainment of the established ML. However, a matrix specific ML shall be based upon proper laboratory method and technique. Matrix-specific MLs must be approved by the Department, and may be developed by the permittee during permit issuance, reissuance, modification, or during compliance schedule.

In either case the measured value should be reported if the analytical result is at or above the ML and "0" reported for values below the ML.

- c. For parameters without an EPA established ML, interim ML, or matrix-specific ML, a report of less than the detection limit shall constitute compliance if the detection limit of all analytical methods is higher than the permit limit using the most sensitive EPA approved method. For the purpose of calculating a monthly average, "0" shall be used for values reported less than the detection limit.

The Minimum Level utilized for procedures A and B above shall be reported on the permittee's DMR. When an EPA approved test procedure for analysis of a pollutant does not exist, the Director shall approve the procedure to be used.

3. Recording of Results

For each measurement or sample taken pursuant to the requirements of this permit, the permittee shall record the following information:

- a. The facility name and location, point source number, date, time and exact place of sampling;
- b. The name(s) of person(s) who obtained the samples or measurements;
- c. The dates and times the analyses were performed;
- d. The name(s) of the person(s) who performed the analyses;
- e. The analytical techniques or methods used, including source of method and method number; and
- f. The results of all required analyses.

4. Records Retention and Production

The permittee shall retain records of all monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by the permit, and records of all data used to complete the above reports or the application for this permit, for a period of at least three years from the date of the sample measurement, report or application. This period may be extended by request of the Director at any time. If litigation or other enforcement action, under the AWPCA and/or the FWPCA, is ongoing which involves any of the above records, the records shall be kept until the litigation is resolved. Upon the written request of the Director or his designee, the permittee shall provide the Director with a copy of any record required to be retained by this paragraph. Copies of these records shall not be submitted unless requested.

All records required to be kept for a period of three years shall be kept at the permitted facility or an alternate location approved by the Department in writing and shall be available for inspection.

5. Monitoring Equipment and Instrumentation

All equipment and instrumentation used to determine compliance with the requirements of this permit shall be installed, maintained, and calibrated in accordance with the manufacturer's instructions or, in the absence of manufacturer's instructions, in accordance with accepted practices. The permittee shall develop and maintain quality assurance procedures to ensure proper operation and maintenance of all equipment and instrumentation. The quality assurance procedures shall include the proper use, maintenance, and installation, when appropriate, of monitoring equipment at the plant site.

C. DISCHARGE REPORTING REQUIREMENTS

1. Reporting of Monitoring Requirements

- a. The permittee shall conduct the required monitoring in accordance with the following schedule:

**MONITORING REQUIRED MORE FREQUENTLY THAN MONTHLY AND MONTHLY** shall be conducted during the first full month following the effective date of coverage under this permit and every month thereafter.

**QUARTERLY MONITORING** shall be conducted at least once during each calendar quarter. Calendar quarters are the periods of January through March, April through June, July through September, and October through December. The permittee shall conduct the quarterly monitoring during the first complete calendar quarter following the effective date of this permit and is then required to monitor once during each quarter thereafter. Quarterly monitoring may be done anytime during the quarter, unless restricted elsewhere in this permit, but it should be submitted with the last DMR due for the quarter, i.e., (March, June, September and December DMR's).

**SEMIANNUAL MONITORING** shall be conducted at least once during the period of January through June and at least once during the period of July through December. The permittee shall conduct the semiannual monitoring during the first complete calendar semiannual period following the effective date of this permit and is then required to monitor once during each semiannual period thereafter. Semiannual monitoring may be done anytime during the semiannual period, unless restricted elsewhere in this permit, but it should be submitted with the last DMR for the month of the semiannual period, i.e. (June and December DMR's).

**ANNUAL MONITORING** shall be conducted at least once during the period of January through December. The permittee shall conduct the annual monitoring during the first complete calendar annual period following the effective date of this permit and is then required to monitor once during each annual period thereafter. Annual monitoring may be done anytime during the year, unless restricted elsewhere in this permit, but it should be submitted with the December DMR.

- b. The permittee shall submit discharge monitoring reports (DMRs) on the forms provided by the Department and in accordance with the following schedule:

**REPORTS OF MORE FREQUENTLY THAN MONTHLY AND MONTHLY TESTING** shall be submitted on a **monthly** basis. The first report is due on the **28th day of (MONTH, YEAR)**. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period.

**REPORTS OF QUARTERLY TESTING** shall be submitted on a **quarterly** basis. The first report is due on the **28th day of [Month, Year]**. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period.

**REPORTS OF SEMIANNUAL TESTING** shall be submitted on a semiannual basis. The reports are due on the 28th day of JANUARY and the 28th day of JULY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period.

**REPORTS OF ANNUAL TESTING** shall be submitted on an annual basis. The first report is due on the 28th day of JANUARY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period.

- c. Except as allowed by Provision I.C.1.c.(1) or (2), the permittee shall submit all Discharge Monitoring Reports (DMRs) required by Provision I.C.1.b. electronically.

- (1) If the permittee is unable to complete the electronic submittal of DMR data due to technical problems originating with the Department's electronic system (this could include entry/submittal issues with an entire set of DMRs or individual parameters), the permittee is not relieved of their obligation to submit DMR data to the Department by the date specified in Provision I.C.1.b., unless otherwise directed by the Department.

the Department's electronic system is down on the 28<sup>th</sup> day of the month in which the DMR is due or is down for an extended period of time, as determined by the Department, when a DMR is required to be submitted, the permittee may submit the data in an alternate manner and format acceptable to the Department. Preapproved alternate acceptable methods include faxing, e-mailing, mailing, or hand-delivery of data such that they are received by the required reporting date. Within five calendar days of the Department's electronic system resuming operation, the permittee shall enter the data into the Department's electronic system, unless an alternate timeframe is approved by the Department. A comment should be included on the electronic DMR submittal verifying the original submittal date (date of the fax, copy of dated e-mail, or hand-delivery stamped date), if applicable.

- (2) The permittee may submit a request to the Department for a temporary electronic reporting waiver for DMR submittals. The waiver request should include the permit number; permittee name; facility/site name; facility address; name, address, and contact information for the responsible official or duly authorized representative; a detailed statement regarding the basis for requesting such a waiver; and the duration for which the waiver is requested. Approved electronic reporting waivers are not transferrable.

A permittee with an approved electronic reporting waiver for DMRs may submit hard copy DMRs for the period that the approved electronic reporting waiver request is effective. The permittee shall submit the Department-approved DMR forms to the address listed in Provision I.C.1.e.

- (3) If a permittee is allowed to submit a hard copy DMR, the DMR must be legible and bear an original signature. Photo and electronic copies of the signature are not acceptable and shall not satisfy the reporting requirements of this permit.
- (4) If the permittee, using approved analytical methods as specified in Provision I.B.2, monitors any discharge from a point source for a limited substance identified in Provision I.A. of this permit more frequently than required by this permit, the results of such monitoring shall be included in the calculation and reporting of values on the DMR and the increased frequency shall be indicated on the DMR.
- (5) In the event no discharge from a point source identified in Provision I.A. of this permit and described more fully in the permittee's application occurs during a monitoring period, the permittee shall report "No Discharge" for such period on the appropriate DMR.

- d. All reports and forms required to be submitted by this permit, the AWPCA and the Department's Rules, shall be electronically signed (or, if allowed by the Department, traditionally signed) by a "responsible official" of the permittee as defined in ADEM Administrative Code Rule 335-6-6-.09 or a "duly authorized representative" of such official as defined in ADEM Administrative Code Rule 335-6-6-.09 and shall bear the following certification:

*"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."*

- e. Discharge Monitoring Reports required by this permit, the AWPCA, and the Department's Rules that are being submitted in hard copy shall be addressed to:

**Alabama Department of Environmental Management  
Permits and Services Division  
Environmental Data Section  
Post Office Box 301463  
Montgomery, Alabama 36130-1463**

Certified and Registered Mail containing Discharge Monitoring Reports shall be addressed to:

**Alabama Department of Environmental Management  
Permits and Services Division  
Environmental Data Section  
1400 Coliseum Boulevard  
Montgomery, Alabama 36110-2400**

- f. All other correspondence and reports required to be submitted by this permit, the AWPCA, and the Department's Rules shall be addressed to:

**Alabama Department of Environmental Management  
Water Division**



**Post Office Box 301463**  
**Montgomery, Alabama 36130-1463**

Certified and Registered Mail shall be addressed to:

**Alabama Department of Environmental Management**  
**Water Division**  
**1400 Coliseum Boulevard**  
**Montgomery, Alabama 36110-2400**

- g. If this permit is a re-issuance, then the permittee shall continue to submit DMRs in accordance with the requirements of their previous permit until such time as DMRs are due as discussed in Part I.C.1.b above.

**2. Noncompliance Notification**

**a. 24-Hour Noncompliance Reporting**

The permittee shall report to the Director, within 24-hours of becoming aware of the noncompliance, any noncompliance which may endanger health or the environment. This shall include but is not limited to the following circumstances:

- (1) does not comply with any daily minimum or maximum discharge limitation for an effluent characteristic specified in Provision I. A. of this permit which is denoted by an "(X)";
- (2) threatens human health or welfare, fish or aquatic life, or water quality standards;
- (3) does not comply with an applicable toxic pollutant effluent standard or prohibition established under Section 307(a) of the FWPCA, 33 U.S.C. Section 1317(a);
- (4) contains a quantity of a hazardous substance which has been determined may be harmful to public health or welfare under Section 311(b)(4) of the FWPCA, 33 U.S.C. Section 1321(b)(4);
- (5) exceeds any discharge limitation for an effluent characteristic as a result of an unanticipated bypass or upset; and
- (6) is an unpermitted direct or indirect discharge of a pollutant to a water of the state (unpermitted discharges properly reported to the Department under any other requirement are not required to be reported under this provision).

The permittee shall orally report the occurrence and circumstances of such discharge to the Director within 24-hours after the permittee becomes aware of the occurrence of such discharge. In addition to the oral report, the permittee shall submit to the Director or Designee a written report as provided in Part I.C.2.c no later than five (5) days after becoming aware of the occurrence of such discharge.

- b. If for any reason, the permittee's discharge does not comply with any limitation of this permit, the permittee shall submit to the Director or Designee a written report as provided in Part I.C.2.c below, such report shall be submitted with the next Discharge Monitoring Report required to be submitted by Part I.C.1 of this permit after becoming aware of the occurrence of such noncompliance.

- c. Any written report required to be submitted to the Director or Designee by Part I.C.2 a. or b. shall be submitted using a Noncompliance Notification Form (ADEM Form 421) available on the Department's website (<http://adem.alabama.gov/DeptForms/Form421.pdf>) and include the following information:

- (1) A description of the discharge and cause of noncompliance;
- (2) The period of noncompliance, including exact dates and times or, if not corrected, the anticipated time the noncompliance is expected to continue; and
- (3) A description of the steps taken and/or being taken to reduce or eliminate the noncomplying discharge and to prevent its recurrence.

**D. OTHER REPORTING AND NOTIFICATION REQUIREMENTS**

**1. Anticipated Noncompliance**

The permittee shall give the Director written advance notice of any planned changes or other circumstances regarding a facility which may result in noncompliance with permit requirements.

**2. Termination of Discharge**

The permittee shall notify the Director, in writing, when all discharges from any point source(s) identified in Provision I. A. of this permit have permanently ceased. This notification shall serve as sufficient cause for instituting procedures for modification or termination of the permit.

**3. Updating Information**

- a. The permittee shall inform the Director of any change in the permittee's mailing address, telephone number or in the permittee's designation of a facility contact or office having the authority and responsibility to prevent and abate violations of the AWPCA, the Department's Rules, and the terms and conditions of this permit, in writing, no later than ten (10) days after such change. Upon request of the Director or his designee, the permittee shall furnish the Director with an update of any information provided in the permit application.
- b. If the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Director, it shall promptly submit such facts or information with a written explanation for the mistake and/or omission.

**4. Duty to Provide Information**

The permittee shall furnish to the Director, within a reasonable time, any information which the Director or his designee may request to determine whether cause exists for modifying, revoking and re-issuing, suspending, or terminating this permit, in whole or in part, or to determine compliance with this permit.

**5. Cooling Water and Boiler Water Additives**

- a. The permittee shall notify the Director in writing not later than thirty (30) days prior to instituting the use of any biocide corrosion inhibitor or chemical additive in a cooling or boiler system, not identified in the application for this permit, from which discharge is allowed by this permit. Notification is not required for additives that do not contain a heavy metal(s) as an active ingredient and that pass through a wastewater treatment system prior to discharge nor is notification required for additives that should not reasonably be expected to cause the cooling water or boiler water to exhibit toxicity as determined by analysis of manufacturer's data or testing by the permittee. Such notification shall include:
  - (1) name and general composition of biocide or chemical;
  - (2) 96-hour median tolerance limit data for organisms representative of the biota of the waterway into which the discharge will ultimately reach;
  - (2) quantities to be used;
  - (3) frequencies of use;
  - (4) proposed discharge concentrations; and
  - (6) EPA registration number, if applicable.
- b. The use of a biocide or additive containing tributyl tin, tributyl tin oxide, zinc, chromium or related compounds in cooling or boiler system(s), from which a discharge regulated by this permit occurs, is prohibited except as exempted below. The use of a biocide or additive containing zinc, chromium or related compounds may be used in special circumstances if (1) the permit contains limits for these substances, or (2) the applicant demonstrates during the application process that the use of zinc, chromium or related compounds as a biocide or additive will not pose a reasonable potential to violate the applicable State water quality standards for these substances. The use of any additive, not identified in this permit or in the application for this permit or not exempted from notification under this permit is prohibited, prior to a determination by the Department that permit modification to control discharge of the additive is not required or prior to issuance of a permit modification controlling discharge of the additive.

**6. Permit Issued Based On Estimated Characteristics**

- a. If this permit was issued based on estimates of the characteristics of a process discharge reported on an EPA NPDES Application Form 2D (EPA Form 3510-2D), the permittee shall complete and submit an EPA NPDES Application Form 2C (EPA Form 3510-2C) no later than two years after the date that discharge begins. Sampling required for completion of the Form 2C shall occur when a discharge(s) from the process(s) causing the new or increased discharge is occurring. If this permit was issued based on estimates concerning the composition of a stormwater discharge(s), the

permittee shall perform the sampling required by EPA NPDES Application Form 2F (EPA Form 3510-2F) no later than one year after the industrial activity generating the stormwater discharge has been fully initiated.

- b. This permit shall be reopened if required to address any new information resulting from the completion and submittal of the Form 2C and or 2F.

**E. SCHEDULE OF COMPLIANCE**

- 1. The permittee shall achieve compliance with the discharge limitations specified in Provision I. A. in accordance with the following schedule:

**COMPLIANCE SHALL BE ATTAINED ON THE EFFECTIVE DATE OF THIS PERMIT**

- 2. No later than 14 calendar days following a date identified in the above schedule of compliance, the permittee shall submit either a report of progress or, in the case of specific actions being required by identified dates, a written notice of compliance or noncompliance. In the latter case, the notice shall include the cause of noncompliance, any remedial actions taken, and the probability of meeting the next scheduled requirement.



**PART II OTHER REQUIREMENTS, RESPONSIBILITIES, AND DUTIES**

**A. OPERATIONAL AND MANAGEMENT REQUIREMENTS**

1. Facilities Operation and Maintenance

The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee to achieve compliance with the conditions of the permit. Proper operation and maintenance includes effective performance, adequate funding, adequate operator staffing and training, and adequate laboratory and process controls, including appropriate quality assurance procedures. This provision requires the operation of backup or auxiliary facilities only when necessary to achieve compliance with the conditions of the permit.

2. Best Management Practices

- a. Dilution water shall not be added to achieve compliance with discharge limitations except when the Director or his designee has granted prior written authorization for dilution to meet water quality requirements.
- b. The permittee shall prepare, implement, and maintain a Spill Prevention, Control and Countermeasures (SPCC) Plan in accordance with 40 C.F.R. Section 112 if required thereby.
- c. The permittee shall prepare, submit for approval and implement a Best Management Practices (BMP) Plan for containment of any or all process liquids or solids, in a manner such that these materials do not present a significant potential for discharge, if so required by the Director or his designee. When submitted and approved, the BMP Plan shall become a part of this permit and all requirements of the BMP Plan shall become requirements of this permit.

3. Spill Prevention, Control, and Management

The permittee shall provide spill prevention, control, and/or management sufficient to prevent any spills of pollutants from entering a water of the state or a publicly or privately owned treatment works. Any containment system used to implement this requirement shall be constructed of materials compatible with the substance(s) contained and which shall prevent the contamination of groundwater and such containment system shall be capable of retaining a volume equal to 110 percent of the capacity of the largest tank for which containment is provided.

**B. OTHER RESPONSIBILITIES**

1. Duty to Mitigate Adverse Impacts

The permittee shall promptly take all reasonable steps to mitigate and minimize or prevent any adverse impact on human health or the environment resulting from noncompliance with any discharge limitation specified in Provision I. A. of this permit, including such accelerated or additional monitoring of the discharge and/or the receiving waterbody as necessary to determine the nature and impact of the noncomplying discharge.

2. Right of Entry and Inspection

The permittee shall allow the Director, or an authorized representative, upon the presentation of proper credentials and other documents as may be required by law to:

- a. enter upon the permittee's premises where a regulated facility or activity or point source is located or conducted, or where records must be kept under the conditions of the permit;
- b. have access to and copy, at reasonable times, any records that must be kept under the conditions of the permit;
- c. inspect any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under the permit; and
- d. sample or monitor, for the purposes of assuring permit compliance or as otherwise authorized by the AWPCA, any substances or parameters at any location.

**C. BYPASS AND UPSET**

1. Bypass

- a. Any bypass is prohibited except as provided in b. and c. below:
- b. A bypass is not prohibited if:
  - (1) It does not cause any discharge limitation specified in Provision I. A. of this permit to be exceeded;

- (2) It enters the same receiving stream as the permitted outfall; and
    - (3) It is necessary for essential maintenance of a treatment or control facility or system to assure efficient operation of such facility or system.
  - c. A bypass is not prohibited and need not meet the discharge limitations specified in Provision I. A. of this permit if:
    - (1) It is unavoidable to prevent loss of life, personal injury, or severe property damage;
    - (2) There are no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime (this condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance); and
    - (3) The permittee submits a written request for authorization to bypass to the Director at least ten (10) days prior to the anticipated bypass (if possible), the permittee is granted such authorization, and the permittee complies with any conditions imposed by the Director to minimize any adverse impact on human health or the environment resulting from the bypass.
  - d. The permittee has the burden of establishing that each of the conditions of Provision II.C.1.b. or c. have been met to qualify for an exception to the general prohibition against bypassing contained in a. and an exemption, where applicable, from the discharge limitations specified in Provision I. A. of this permit.
- 2. Upset
  - a. A discharge which results from an upset need not meet the discharge limitations specified in Provision I. A. of this permit if:
    - (1) No later than 24-hours after becoming aware of the occurrence of the upset, the permittee orally reports the occurrence and circumstances of the upset to the Director or his designee; and
    - (2) No later than five (5) days after becoming aware of the occurrence of the upset, the permittee furnishes the Director with evidence, including properly signed, contemporaneous operating logs, or other relevant evidence, demonstrating that (i) an upset occurred; (ii) the permittee can identify the specific cause(s) of the upset; (iii) the permittee's facility was being properly operated at the time of the upset; and (iv) the permittee promptly took all reasonable steps to minimize any adverse impact on human health or the environment resulting from the upset.
  - b. The permittee has the burden of establishing that each of the conditions of Provision II. C.2.a. of this permit have been met to qualify for an exemption from the discharge limitations specified in Provision I.A. of this permit.

**D. DUTY TO COMPLY WITH PERMIT, RULES, AND STATUTES**

- 1. Duty to Comply
  - a. The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of the AWPCA and the FWPCA and is grounds for enforcement action, for permit termination, revocation and reissuance, suspension, modification; or denial of a permit renewal application.
  - b. The necessity to halt or reduce production or other activities in order to maintain compliance with the conditions of the permit shall not be a defense for a permittee in an enforcement action.
  - c. The discharge of a pollutant from a source not specifically identified in the permit application for this permit and not specifically included in the description of an outfall in this permit is not authorized and shall constitute noncompliance with this permit.
  - d. The permittee shall take all reasonable steps, including cessation of production or other activities, to minimize or prevent any violation of this permit or to minimize or prevent any adverse impact of any permit violation.
  - e. Nothing in this permit shall be construed to preclude and negate the permittee's responsibility or liability to apply for, obtain, or comply with other ADEM, Federal, State, or Local Government permits, certifications, licenses, or other approvals.
- 2. Removed Substances

Solids, sludges, filter backwash, or any other pollutant or other waste removed in the course of treatment or control of wastewaters shall be disposed of in a manner that complies with all applicable Department Rules.

3. Loss or Failure of Treatment Facilities

Upon the loss or failure of any treatment facilities, including but not limited to the loss or failure of the primary source of power of the treatment facility, the permittee shall, where necessary to maintain compliance with the discharge limitations specified in Provision I. A. of this permit, or any other terms or conditions of this permit, cease, reduce, or otherwise control production and/or all discharges until treatment is restored. If control of discharge during loss or failure of the primary source of power is to be accomplished by means of alternate power sources, standby generators, or retention of inadequately treated effluent, the permittee must furnish to the Director within six months a certification that such control mechanisms have been installed.

4. Compliance with Statutes and Rules

- a. This permit has been issued under ADEM Administrative Code, Chapter 335-6-6. All provisions of this chapter, that are applicable to this permit, are hereby made a part of this permit. A copy of this chapter may be obtained for a small charge from the Office of General Counsel, Alabama Department of Environmental Management, 1400 Coliseum Blvd., Montgomery, AL 36130.
- b. This permit does not authorize the noncompliance with or violation of any Laws of the State of Alabama or the United States of America or any regulations or rules implementing such laws. FWPCA, 33 U.S.C. Section 1319, and Code of Alabama 1975, Section 22-22-14.

**E. PERMIT TRANSFER, MODIFICATION, SUSPENSION, REVOCATION, AND REISSUANCE**

1. Duty to Reapply or Notify of Intent to Cease Discharge

- a. If the permittee intends to continue to discharge beyond the expiration date of this permit, the permittee shall file a complete permit application for reissuance of this permit at least 180 days prior to its expiration. If the permittee does not intend to continue discharge beyond the expiration of this permit, the permittee shall submit written notification of this intent which shall be signed by an individual meeting the signatory requirements for a permit application as set forth in ADEM Administrative Code Rule 335-6-6-.09.
- b. Failure of the permittee to apply for reissuance at least 180 days prior to permit expiration will void the automatic continuation of the expiring permit provided by ADEM Administrative Code Rule 335-6-6-.06 and should the permit not be reissued for any reason any discharge after expiration of this permit will be an unpermitted discharge.

2. Change in Discharge

- a. The permittee shall apply for a permit modification at least 180 days in advance of any facility expansion, production increase, process change, or other action that could result in the discharge of additional pollutants or increase the quantity of a discharged pollutant such that existing permit limitations would be exceeded or that could result in an additional discharge point. This requirement applies to pollutants that are or that are not subject to discharge limitations in this permit. No new or increased discharge may begin until the Director has authorized it by issuance of a permit modification or a reissued permit.
- b. The permittee shall notify the Director as soon as it is known or there is reason to believe:
  - (1) That any activity has occurred or will occur which would result in the discharge on a routine or frequent basis, of any toxic pollutant which is not limited in this permit, if that discharge will exceed the highest of the following notification levels:
    - (a) one hundred micrograms per liter;
    - (b) two hundred micrograms per liter for acrolein and acrylonitrile; five hundred micrograms per liter for 2,4-dinitrophenol and for 2-methyl-4,6-dini-trophenol; and one milligram per liter for antimony;
    - (c) five times the maximum concentration value reported for that pollutant in the permit application; or
  - (2) That any activity has occurred or will occur which would result in any discharge, on a non-routine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following notification levels:
    - (a) five hundred micrograms per liter;
    - (b) one milligram per liter for antimony;
    - (c) ten times the maximum concentration value reported for that pollutant in the permit application.



3. Transfer of Permit

This permit may not be transferred or the name of the permittee changed without notice to the Director and subsequent modification or revocation and reissuance of the permit to identify the new permittee and to incorporate any other changes as may be required under the FWPCA or AWPCA. In the case of a change in name, ownership or control of the permittee's premises only, a request for permit modification in a format acceptable to the Director is required at least 30 days prior to the change. In the case of a change in name, ownership or control of the permittee's premises accompanied by a change or proposed change in effluent characteristics, a complete permit application is required to be submitted to the Director at least 180 days prior to the change. Whenever the Director is notified of a change in name, ownership or control, he may decide not to modify the existing permit and require the submission of a new permit application.

4. Permit Modification and Revocation

a. This permit may be modified or revoked and reissued, in whole or in part, during its term for cause, including but not limited to, the following:

- (1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to revoke and reissue this permit instead of terminating the permit;
- (2) If a request to transfer this permit has been received, the Director may decide to revoke and reissue or to modify the permit; or
- (3) If modification or revocation and reissuance is requested by the permittee and cause exists, the Director may grant the request.

b. This permit may be modified during its term for cause, including but not limited to, the following:

- (1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to modify this permit instead of terminating this permit;
- (2) There are material and substantial alterations or additions to the facility or activity generating wastewater which occurred after permit issuance which justify the application of permit conditions that are different or absent in the existing permit;
- (3) The Director has received new information that was not available at the time of permit issuance and that would have justified the application of different permit conditions at the time of issuance;
- (4) A new or revised requirement(s) of any applicable standard or limitation is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA;
- (5) Errors in calculation of discharge limitations or typographical or clerical errors were made;
- (6) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, when the standards or regulations on which the permit was based have been changed by promulgation of amended standards or regulations or by judicial decision after the permit was issued;
- (7) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, permits may be modified to change compliance schedules;
- (8) To agree with a granted variance under 301(c), 301(g), 301(h), 301(k), or 316(a) of the FWPCA or for fundamentally different factors;
- (9) To incorporate an applicable 307(a) FWPCA toxic effluent standard or prohibition;
- (10) When required by the reopener conditions in this permit;
- (11) When required under 40 CFR 403.8(e) (compliance schedule for development of pretreatment program);
- (12) Upon failure of the state to notify, as required by Section 402(b)(3) of the FWPCA, another state whose waters may be affected by a discharge permitted by this permit;
- (13) When required to correct technical mistakes, such as errors in calculation, or mistaken interpretations of law made in determining permit conditions; or
- (14) When requested by the permittee and the Director determines that the modification has cause and will not result in a violation of federal or state law, regulations or rules.

**5. Permit Termination**

This permit may be terminated during its term for cause, including but not limited to, the following:

- a. Violation of any term or condition of this permit;
- b. The permittee's misrepresentation or failure to disclose fully all relevant facts in the permit application or during the permit issuance process or the permittee's misrepresentation of any relevant facts at any time;
- c. Materially false or inaccurate statements or information in the permit application or the permit;
- d. A change in any condition that requires either a temporary or permanent reduction or elimination of the permitted discharge;
- e. The permittee's discharge threatens human life or welfare or the maintenance of water quality standards;
- f. Permanent closure of the facility generating the wastewater permitted to be discharged by this permit or permanent cessation of wastewater discharge;
- g. New or revised requirements of any applicable standard or limitation that is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA that the Director determines cannot be complied with by the permittee; or
- h. Any other cause allowed by the ADEM Administrative Code, Chapter 335-6-6.

**6. Permit Suspension**

This permit may be suspended during its term for noncompliance until the permittee has taken action(s) necessary to achieve compliance.

**7. Request for Permit Action Does Not Stay Any Permit Requirement**

The filing of a request by the permittee for modification, suspension or revocation of this permit, in whole or in part, does not stay any permit term or condition.

**F. COMPLIANCE WITH TOXIC POLLUTANT STANDARD OR PROHIBITION**

If any applicable effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition) is established under Section 307(a) of the FWPCA, 33 U.S.C. Section 1317(a), for a toxic pollutant discharged by the permittee and such standard or prohibition is more stringent than any discharge limitation on the pollutant specified in Provision I. A. of this permit, or controls a pollutant not limited in Provision I. A. of this permit, this permit shall be modified to conform to the toxic pollutant effluent standard or prohibition and the permittee shall be notified of such modification. If this permit has not been modified to conform to the toxic pollutant effluent standard or prohibition before the effective date of such standard or prohibition, the permittee shall attain compliance with the requirements of the standard or prohibition within the time period required by the standard or prohibition and shall continue to comply with the standard or prohibition until this permit is modified or reissued.

**G. DISCHARGE OF WASTEWATER GENERATED BY OTHERS**

The discharge of wastewater, generated by any process, facility, or by any other means not under the operational control of the permittee or not identified in the application for this permit or not identified specifically in the description of an outfall in this permit is not authorized by this permit.

**PART III      OTHER PERMIT CONDITIONS**

**A.      CIVIL AND CRIMINAL LIABILITY**

**1.      Tampering**

Any person who falsifies, tampers with, or knowingly renders inaccurate any monitoring device or method required to be maintained or performed under the permit shall, upon conviction, be subject to penalties as provided by the AWPCA.

**2.      False Statements**

Any person who knowingly makes any false statement, representation, or certification in any record or other document submitted or required to be maintained under this permit, including monitoring reports or reports of compliance or noncompliance shall, upon conviction, be subject to penalties as provided by the AWPCA.

**3.      Permit Enforcement**

a.      Any NPDES permit issued or reissued by the Department is a permit for the purpose of the AWPCA and the FWPCA and as such any terms, conditions, or limitations of the permit are enforceable under state and federal law.

b.      Any person required to have a NPDES permit pursuant to ADEM Administrative Code Chapter 335-6-6 and who discharges pollutants without said permit, who violates the conditions of said permit, who discharges pollutants in a manner not authorized by the permit, or who violates applicable orders of the Department or any applicable rule or standard of the Department, is subject to any one or combination of the following enforcement actions under applicable state statutes.

(1)      An administrative order requiring abatement, compliance, mitigation, cessation, clean-up, and/or penalties;

(2)      An action for damages;

(3)      An action for injunctive relief; or

(4)      An action for penalties.

c.      If the permittee is not in compliance with the conditions of an expiring or expired permit the Director may choose to do any or all of the following provided the permittee has made a timely and complete application for reissuance of the permit:

(1)      initiate enforcement action based upon the permit which has been continued;

(2)      issue a notice of intent to deny the permit reissuance. If the permit is denied, the owner or operator would then be required to cease the activities authorized by the continued permit or be subject to enforcement action for operating without a permit;

(3)      reissue the new permit with appropriate conditions; or

(4)      take other actions authorized by these rules and AWPCA.

**4.      Relief from Liability**

Except as provided in Provision II.C.1 (Bypass) and Provision II.C.2 (Upset), nothing in this permit shall be construed to relieve the permittee of civil or criminal liability under the AWPCA or FWPCA for noncompliance with any term or condition of this permit.

**B.      OIL AND HAZARDOUS SUBSTANCE LIABILITY**

Nothing in this permit shall be construed to preclude the institution of any legal action or relieve the permittee from any responsibilities, liabilities or penalties to which the permittee is or may be subject under Section 311 of the FWPCA, 33 U.S.C. Section 1321.

**C.      PROPERTY AND OTHER RIGHTS**

This permit does not convey any property rights in either real or personal property, or any exclusive privileges, nor does it authorize any injury to persons or property or invasion of other private rights, trespass, or any infringement of federal, state, or local laws or regulations, nor does it authorize or approve the construction of any physical structures or facilities or the undertaking of any work in any waters of the state or of the United States.



**D. AVAILABILITY OF REPORTS**

Except for data determined to be confidential under Code of Alabama 1975, Section 22-22-9(c), all reports prepared in accordance with the terms of this permit shall be available for public inspection at the offices of the Department. Effluent data shall not be considered confidential.

**E. EXPIRATION OF PERMITS FOR NEW OR INCREASED DISCHARGES**

1. If this permit was issued for a new discharger or new source, this permit shall expire eighteen months after the issuance date if construction of the facility has not begun during the eighteen-month period.
2. If this permit was issued or modified to allow the discharge of increased quantities of pollutants to accommodate the modification of an existing facility and if construction of this modification has not begun during the eighteen month period after issuance of this permit or permit modification, this permit shall be modified to reduce the quantities of pollutants allowed to be discharged to those levels that would have been allowed if the modification of the facility had not been planned.
3. Construction has begun when the owner or operator has:
  - a. begun, or caused to begin as part of a continuous on-site construction program:
    - (1) any placement, assembly, or installation of facilities or equipment; or
    - (2) significant site preparation work including clearing, excavation, or removal of existing buildings, structures, or facilities which is necessary for the placement, assembly, or installation of new source facilities or equipment; or
  - b. entered into a binding contractual obligation for the purpose of placement, assembly, or installation of facilities or equipment which are intended to be used in its operation within a reasonable time. Options to purchase or contracts which can be terminated or modified without substantial loss, and contracts for feasibility, engineering, and design studies do not constitute a contractual obligation under the paragraph. The entering into a lease with the State of Alabama for exploration and production of hydrocarbons shall also be considered beginning construction.

**F. COMPLIANCE WITH WATER QUALITY STANDARDS**

1. On the basis of the permittee's application, plans, or other available information, the Department has determined that compliance with the terms and conditions of this permit should assure compliance with the applicable water quality standards.
2. Compliance with permit terms and conditions notwithstanding, if the permittee's discharge(s) from point sources identified in Provision I. A. of this permit cause or contribute to a condition in contravention of state water quality standards, the Department may require abatement action to be taken by the permittee in emergency situations or modify the permit pursuant to the Department's Rules, or both.
3. If the Department determines, on the basis of a notice provided pursuant to this permit or any investigation, inspection or sampling, that a modification of this permit is necessary to assure maintenance of water quality standards or compliance with other provisions of the AWPCA or FWPCA, the Department may require such modification and, in cases of emergency, the Director may prohibit the discharge until the permit has been modified.

**G. GROUNDWATER**

Unless specifically authorized under this permit, this permit does not authorize the discharge of pollutants to groundwater. Should a threat of groundwater contamination occur, the Director may require groundwater monitoring to properly assess the degree of the problem and the Director may require that the Permittee undertake measures to abate any such discharge and/or contamination.

**H. DEFINITIONS**

1. Average monthly discharge limitation - means the highest allowable average of "daily discharges" over a calendar month, calculated as the sum of all "daily discharges" measured during a calendar month divided by the number of "daily discharges" measured during that month (zero discharge days shall not be included in the number of "daily discharges" measured and a less than detectable test result shall be treated as a concentration of zero if the most sensitive EPA approved method was used).
2. Average weekly discharge limitation - means the highest allowable average of "daily discharges" over a calendar week, calculated as the sum of all "daily discharges" measured during a calendar week divided by the number of "daily discharges" measured during that week (zero discharge days shall not be included in the number of "daily discharges" measured and a less than detectable test result shall be treated as a concentration of zero if the most sensitive EPA approved method was used).
3. Arithmetic Mean – means the summation of the individual values of any set of values divided by the number of individual values.

4. AWPCA - means the Alabama Water Pollution Control Act.
5. BOD – means the five-day measure of the pollutant parameter biochemical oxygen demand.
6. Bypass - means the intentional diversion of waste streams from any portion of a treatment facility.
7. CBOD – means the five-day measure of the pollutant parameter carbonaceous biochemical oxygen demand.
8. Daily discharge - means the discharge of a pollutant measured during any consecutive 24-hour period in accordance with the sample type and analytical methodology specified by the discharge permit.
9. Daily maximum - means the highest value of any individual sample result obtained during a day.
10. Daily minimum - means the lowest value of any individual sample result obtained during a day.
11. Day - means any consecutive 24-hour period.
12. Department - means the Alabama Department of Environmental Management.
13. Director - means the Director of the Department.
14. Discharge - means "[t]he addition, introduction, leaking, spilling or emitting of any sewage, industrial waste, pollutant or other wastes into waters of the state". Code of Alabama 1975, Section 22-22-1(b)(8).
15. Discharge Monitoring Report (DMR) - means the form approved by the Director to accomplish reporting requirements of an NPDES permit.
16. DO – means dissolved oxygen.
17. 8HC – means 8-hour composite sample, including any of the following:
  - a. The mixing of at least 5 equal volume samples collected at constant time intervals of not more than 2 hours over a period of not less than 8 hours between the hours of 6:00 a.m. and 6:00 p.m. If the sampling period exceeds 8 hours, sampling may be conducted beyond the 6:00 a.m. to 6:00 p.m. period.
  - b. A sample continuously collected at a constant rate over period of not less than 8 hours between the hours of 6:00 a.m. and 6:00 p.m. If the sampling period exceeds 8 hours, sampling may be conducted beyond the 6:00 a.m. to 6:00 p.m. period.
18. EPA - means the United States Environmental Protection Agency.
19. FC – means the pollutant parameter fecal coliform.
20. Flow – means the total volume of discharge in a 24-hour period.
21. FWPCA - means the Federal Water Pollution Control Act.
22. Geometric Mean – means the Nth root of the product of the individual values of any set of values where N is equal to the number of individual values. The geometric mean is equivalent to the antilog of the arithmetic mean of the logarithms of the individual values. For purposes of calculating the geometric mean, values of zero (0) shall be considered one (1).
23. Grab Sample – means a single influent or effluent portion which is not a composite sample. The sample(s) shall be collected at the period(s) most representative of the discharge.
24. Indirect Discharger – means a nondomestic discharger who discharges pollutants to a publicly owned treatment works or a privately owned treatment facility operated by another person.
25. Industrial User – means those industries identified in the Standard Industrial Classification manual, Bureau of the Budget 1967, as amended and supplemented, under the category "Division D – Manufacturing" and such other classes of significant waste producers as, by regulation, the Director deems appropriate.
26. MGD – means million gallons per day.
27. Monthly Average – means, other than for fecal coliform bacteria, the arithmetic mean of the entire composite or grab samples taken for the daily discharges collected in one month period. The monthly average for fecal coliform bacteria is the geometric mean of daily discharge samples collected in a one month period. The monthly average for flow is the arithmetic mean of all flow measurements taken in a one month period.

28. New Discharger – means a person, owning or operating any building, structure, facility or installation:
- from which there is or may be a discharge of pollutants;
  - that did not commence the discharge of pollutants prior to August 13, 1979, and which is not a new source; and
  - which has never received a final effective NPDES permit for dischargers at that site.
29. NH3-N – means the pollutant parameter ammonia, measured as nitrogen.
30. Permit application - means forms and additional information that is required by ADEM Administrative Code Rule 335-6-6-.08 and applicable permit fees.
31. Point source - means "any discernible, confined and discrete conveyance, including but not limited to any pipe, channel, ditch, tunnel, conduit, well, discrete fissure, container, rolling stock, concentrated animal feeding operation, or vessel or other floating craft, . . . from which pollutants are or may be discharged." Section 502(14) of the FWPCA, 33 U.S.C. Section 1362(14).
32. Pollutant - includes for purposes of this permit, but is not limited to, those pollutants specified in Code of Alabama 1975, Section 22-22-1(b)(3) and those effluent characteristics specified in Provision I. A. of this permit.
33. Privately Owned Treatment Works – means any devices or system which is used to treat wastes from any facility whose operator is not the operator of the treatment works, and which is not a "POTW".
34. Publicly Owned Treatment Works – means a wastewater collection and treatment facility owned by the State, municipality, regional entity composed of two or more municipalities, or another entity created by the State or local authority for the purpose of collecting and treating municipal wastewater.
35. Receiving Stream – means the "waters" receiving a "discharge" from a "point source".
36. Severe property damage - means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.
37. Significant Source – means a source which discharges 0.025 MGD or more to a POTW or greater than five percent of the treatment work's capacity, or a source which is a primary industry as defined by the U.S. EPA or which discharges a priority or toxic pollutant.
38. Solvent – means any virgin, used or spent organic solvent(s) identified in the F-Listed wastes (F001 through F005) specified in 40 CFR 261.31 that is used for the purpose of solubilizing other materials.
39. TKN – means the pollutant parameter Total Kjeldahl Nitrogen.
40. TON – means the pollutant parameter Total Organic Nitrogen.
41. TRC – means Total Residual Chlorine.
42. TSS – means the pollutant parameter Total Suspended Solids.
43. 24HC – means 24-hour composite sample, including any of the following:
- the mixing of at least 12 equal volume samples collected at constant time intervals of not more than 2 hours over a period of 24 hours;
  - a sample collected over a consecutive 24-hour period using an automatic sampler composite to one sample. As a minimum, samples shall be collected hourly and each shall be no more than one twenty-fourth (1/24) of the total sample volume collected; or
  - a sample collected over a consecutive 24-hour period using an automatic composite sampler composited proportional to flow.
44. Upset - means an exceptional incident in which there is an unintentional and temporary noncompliance with technology-based permit discharge limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, or careless or improper operation.



45. Waters - means "[a]ll waters of any river, stream, watercourse, pond, lake, coastal, ground or surface water, wholly or partially within the state, natural or artificial. This does not include waters which are entirely confined and retained completely upon the property of a single individual, partnership or corporation unless such waters are used in interstate commerce." Code of Alabama 1975, Section 22-22-1(b)(2). Waters "include all navigable waters" as defined in Section 502(7) of the FWPCA, 22 U.S.C. Section 1362(7), which are within the State of Alabama.
46. Week - means the period beginning at twelve midnight Saturday and ending at twelve midnight the following Saturday.
47. Weekly (7-day and calendar week) Average – is the arithmetic mean of all samples collected during a consecutive 7-day period or calendar week, whichever is applicable. The calendar week is defined as beginning on Sunday and ending on Saturday. Weekly averages shall be calculated for all calendar weeks with Saturdays in the month. If a calendar week overlaps two months (i.e., the Sunday is in one month and the Saturday in the following month), the weekly average calculated for the calendar week shall be included in the data for the month that contains the Saturday.

#### **I. SEVERABILITY**

The provisions of this permit are severable, and if any provision of this permit or the application of any provision of this permit to any circumstance is held invalid, the application of such provision to other circumstances, and the remainder of this permit, shall not be affected thereby.

**PART IV      ADDITIONAL REQUIREMENTS, CONDITIONS, AND LIMITATIONS**

**A.      BEST MANAGEMENT PRACTICES (BMP) PLAN REQUIREMENTS**

1.      BMP Plan

The permittee shall develop and implement a Best Management Practices (BMP) Plan which prevents, or minimizes the potential for, the release of pollutants from ancillary activities, including material storage areas; plant site runoff; in-plant transfer, process and material handling areas; loading and unloading operations, and sludge and waste disposal areas, to the waters of the State through plant site runoff; spillage or leaks; sludge or waste disposal; or drainage from raw material storage.

2.      Plan Content

The permittee shall prepare and implement a best management practices (BMP) plan, which shall:

a.                      Establish specific objectives for the control of pollutants:

- (1)                      Each facility component or system shall be examined for its potential for causing a release of significant amounts of pollutants to waters of the State due to equipment failure, improper operation, natural phenomena such as rain or snowfall, etc.

- (2)                      Where experience indicates a reasonable potential for equipment failure (e.g., a tank overflow or leakage), natural condition (e.g. precipitation), or circumstances to result in significant amounts of pollutants reaching surface waters, the plan should include a prediction of the direction, rate of flow, and total quantity of pollutants which could be discharged from the facility as a result of each condition or circumstance.

b.                      Establish specific best management practices to meet the objectives identified under paragraph a. of this section, addressing each component or system capable of causing a release of significant amounts of pollutants to the waters of the State, and identifying specific preventative or remedial measures to be implemented;

c.                      Establish a program to identify and repair leaking equipment items and damaged containment structures, which may contribute to contaminated stormwater runoff. This program must include regular visual inspections of equipment, containment structures and of the facility in general to ensure that the BMP is continually implemented and effective;

d.                      Prevent the spillage or loss of fluids, oil, grease, gasoline, etc. from vehicle and equipment maintenance activities and thereby prevent the contamination of stormwater from these substances;

e.                      Prevent or minimize stormwater contact with material stored on site;

f.                      Designate by position or name the person or persons responsible for the day to day implementation of the BMP;

g.                      Provide for routine inspections, on days during which the facility is manned, of any structures that function to prevent stormwater pollution or to remove pollutants from stormwater and of the facility in general to ensure that the BMP is continually implemented and effective;

h.                      Provide for the use and disposal of any material used to absorb spilled fluids that could contaminate stormwater;

i.                      Develop a solvent management plan, if solvents are used on site. The solvent management plan shall include as a minimum lists of the solvents on site; the disposal method of solvents used instead of dumping, such as reclamation, contract hauling; and the procedures for assuring that solvents do not routinely spill or leak into the stormwater;

j.                      Provide for the disposal of all used oils, hydraulic fluids, solvent degreasing material, etc. in accordance with good management practices and any applicable state or federal regulations;

k.                      Include a diagram of the facility showing the locations where stormwater exits the facility, the locations of any structure or other mechanisms intended to prevent pollution of stormwater or to remove pollutants from stormwater, the locations of any collection and handling systems;

l.                      Provide control sufficient to prevent or control pollution of stormwater by soil particles to the degree required to maintain compliance with the water quality standard for turbidity applicable to the waterbody(s) receiving discharge(s) under this permit;

- m. Provide spill prevention, control, and/or management sufficient to prevent or minimize contaminated stormwater runoff. Any containment system used to implement this requirement shall be constructed of materials compatible with the substance(s) contained and shall prevent the contamination of groundwater. The containment system shall also be capable of retaining a volume equal to 110 percent of the capacity of the largest tank for which containment is provided;
- n. Provide and maintain curbing, diking or other means of isolating process areas to the extent necessary to allow segregation and collection for treatment of contaminated stormwater from process areas;
- o. Be reviewed by plant engineering staff and the plant manager; and
- p. Bear the signature of the plant manager.
- 3. Compliance Schedule

The permittee shall have reviewed (and revised if necessary) and fully implemented the BMP plan as soon as practicable but no later than six months after the effective date of this permit.
- 4. Department Review
  - a. When requested by the Director or his designee, the permittee shall make the BMP available for Department review.
  - b. The Director or his designee may notify the permittee at any time that the BMP is deficient and require correction of the deficiency.
- c. The permittee shall correct any BMP deficiency identified by the Director or his designee within 30 days of receipt of notification and shall certify to the Department that the correction has been made and implemented.
  - 5. Administrative Procedures
    - a. A copy of the BMP shall be maintained at the facility and shall be available for inspection by representatives of the Department.
    - b. A log of the routine inspection required above shall be maintained at the facility and shall be available for inspection by representatives of the Department. The log shall contain records of all inspections performed for the last three years and each entry shall be signed by the person performing the inspection.
    - c. The permittee shall provide training for any personnel required to implement the BMP and shall retain documentation of such training at the facility. This documentation shall be available for inspection by representatives of the Department. Training shall be performed prior to the date that implementation of the BMP is required.
    - d. BMP Plan Modification. The permittee shall amend the BMP plan whenever there is a change in the facility or change in operation of the facility which materially increases the potential for the ancillary activities to result in a discharge of significant amounts of pollutants.
    - e. BMP Plan Review. The permittee shall complete a review and evaluation of the BMP plan at least once every three years from the date of preparation of the BMP plan. Documentation of the BMP Plan review and evaluation shall be signed and dated by the Plant Manager.



**B. STORMWATER FLOW MEASUREMENT AND SAMPLING REQUIREMENTS**

1. Stormwater Flow Measurement

- a. All stormwater samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inches.
- b. The total volume of stormwater discharged for the event must be monitored, including the date and duration (in hours) and rainfall (in inches) for storm event(s) sampled. The duration between the storm event sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm event must be a minimum of 72 hours. This information must be recorded as part of the sampling procedure and records retained according to Part I.B. of this permit.
- c. The volume may be measured using flow measuring devices, or estimated based on a modification of the Rational Method using total depth of rainfall, the size of the drainage area serving a stormwater outfall, and an estimate of the runoff coefficient of the drainage area. This information must be recorded as part of the sampling procedure and records retained according to Part I.B. of this permit.

2. Stormwater Sampling

- a. A grab sample, if required by this permit, shall be taken during the first thirty minutes of the discharge (or as soon thereafter as practicable); and a flow-weighted composite sample, if required by this permit, shall be taken for the entire event or for the first three hours of the event.
- b. All test procedures will be in accordance with part I.B. of this permit.

## ADEM PERMIT RATIONALE

PREPARED DATE: October 6, 2021

PREPARED BY: Isabelle Berry

REVISED: February 24, 2022

Permittee Name: Baldwin County Commission

Facility Name: Magnolia Sanitary Landfill

Permit Number: AL0069345

PERMIT IS REISSUANCE DUE TO EXPIRATION

### DISCHARGE SERIAL NUMBERS & DESCRIPTIONS:

DSN001: Stormwater runoff that contains landfill wastewater as defined by 40 CFR 445.

DSN001A & DSN001B: Landfill wastewater as defined by 40 CFR 445.

DSN002 (To be added): Stormwater runoff associated with industrial activity.

**INDUSTRIAL CATEGORY:** 40 CFR 445 Landfills Point Source Category  
40 CFR 445.21 Subpart B – RCRA Subtitle D Non-Hazardous Waste Landfill

**MAJOR:** N

### STREAM INFORMATION:

Outfall:	DSN001	DSN002
Receiving Stream:	UT to Barner Branch	UT to Schoolhouse Branch
Classification:	Fish & Wildlife	Fish & Wildlife
River Basin:	Mobile River	Mobile River
7Q10:	0 cfs	0 cfs
7Q2:	0 cfs	0 cfs
Annual Average Flow:	0 cfs	0 cfs
303(d) List:	NO	NO
Impairment:	N/A	N/A
TMDL:	NO	NO

### DISCUSSION:

Facility operations consist primarily of municipal solid waste and construction/demolition waste landfilling. Leachate generated and collected in the municipal solid waste portion of the facility is treated through a three-stage aeration pond, two-stage constructed wetlands, and a holding pond prior to discharge into the stormwater control system. Leachate treatment and discharge are regulated under UIC Permit ALS19902554. However, it is possible during heavy prolonged rain events for the leachate to discharge via the storm water system at the facility. This permit addresses this situation at the facility.

ADEM Administrative Rule 335-6-10-.12 requires applicants to new or expanded discharges to Tier II waters demonstrate that the proposed discharge is necessary for important economic or social development in the area in which the waters are located. The Department has reviewed the application and determined that the applicant has demonstrated that the proposed new discharges to Tier 2 waters are necessary for important economic and social development. The anti-degradation rationale is attached.

0011:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
BOD, 5-Day (20 Deg. C)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
pH	-	-	REPORT S.U.	-	REPORT S.U.	Monthly	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Monthly	Grab	BPJ
Nitrogen, Total (As N)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Nitrogen, Ammonia Total (As N)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Phosphorus, Total (As P)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	-	REPORT MGD	-	-	-	Monthly	Instantaneous	BPJ
E. Coli	-	-	-	-	REPORT col/100mL	Monthly	Grab	BPJ
Solids, Total Dissolved	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Chemical Oxygen Demand (COD)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ

001A:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
BOD, 5-Day (20 Deg. C)	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ
pH	-	-	REPORT S.U.	-	REPORT S.U.	Once per Weekly Discharge	Grab	BPJ
Solids, Total Suspended	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ
Nitrogen, Ammonia Total (As N)	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ
Zinc, Total (As Zn)	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly	Grab	BPJ



						Discharge		
Phenol, Single Compound	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Once per Weekly Discharge	Measured	BPJ
P-Cresol	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ
Benzoic Acids - Total	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ
Alpha-Terpineol	-	-	-	REPORT mg/l	REPORT mg/l	Once per Weekly Discharge	Grab	BPJ

001B:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
BOD, 5-Day (20 Deg. C)	-	-	-	37 mg/l	140 mg/l	Once per Weekly Discharge	Grab	EGL
pH	-	-	6.0 S.U.	-	9.0 S.U.	Once per Weekly Discharge	Grab	EGL
Solids, Total Suspended	-	-	-	27 mg/l	88 mg/l	Once per Weekly Discharge	Grab	EGL
Nitrogen, Ammonia Total (As N)	-	-	-	4.9 mg/l	10 mg/l	Once per Weekly Discharge	Grab	EGL
Zinc, Total (As Zn)	-	-	-	0.11 mg/l	0.20 mg/l	Once per Weekly Discharge	Grab	EGL
Phenol, Single Compound	-	-	-	0.015 mg/l	0.026 mg/l	Once per Weekly Discharge	Grab	EGL
Flow, In Conduit or Thru Treatment Plant	REPORT MGD	REPORT MGD	-	-	-	Once per Weekly Discharge	Measured	BPJ
P-Cresol	-	-	-	0.014 mg/l	0.025 mg/l	Once per Weekly Discharge	Grab	EGL

Benzoic Acids - Total	-	-	-	0.071 mg/l	0.12 mg/l	Once per Weekly Discharge	Grab	EGL
Alpha-Terpineol	-	-	-	0.016 mg/l	0.033 mg/l	Once per Weekly Discharge	Grab	EGL

0021:

<u>Parameter</u>	<u>Monthly Avg Loading</u>	<u>Daily Max Loading</u>	<u>Daily Min Concentration</u>	<u>Monthly Avg Concentration</u>	<u>Daily Max Concentration</u>	<u>Sample Frequency</u>	<u>Sample Type</u>	<u>Basis*</u>
BOD, 5-Day (20 Deg. C)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
pH	-	-	REPORT S.U.	-	REPORT S.U.	Monthly	Grab	BPJ
Solids, Total Suspended	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Oil & Grease	-	-	-	-	15 mg/l	Monthly	Grab	BPJ
Nitrogen, Total (As N)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Nitrogen, Ammonia Total (As N)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Phosphorus, Total (As P)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Flow, In Conduit or Thru Treatment Plant	-	REPORT MGD	-	-	-	Monthly	Instantaneous	BPJ
Solids, Total Dissolved	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ
Chemical Oxygen Demand (COD)	-	-	-	-	REPORT mg/l	Monthly	Grab	BPJ

**\*Basis for Permit Limitation**

- BPJ – Best Professional Judgment
- WQBEL – Water Quality Based Effluent Limits
- EGL – Federal Effluent Guideline Limitations
- 303(d) – 303(d) List of Impaired Waters
- TMDL – Total Maximum Daily Load Requirements

## **Discussion**

### **DSN0011: Stormwater runoff that contains landfill wastewater as defined by 40 CFR 445.**

#### **Best Professional Judgment (BPJ)**

The parameters of concern for this facility are based on the parameters of concern listed in EPA Form 2C, EPA Form 2F, and from the current permit. These parameters are consistent with similar facilities in the state and have been proven to be reflective of the operations at this facility. The parameters with specific limits are discussed below:

#### **Oil & Grease**

The daily maximum limit of 15 mg/l for Oil and Grease should prevent the occurrence of a visible sheen in the stream and has been shown to be achievable through the use of proper BMPs.

Due to the stormwater storage capacity at this site, outfall DSN0011 rarely discharges. In the previous permit issuance, internal monitoring points DSN001A and DSN001B were added to monitor the discharge of regulated landfill wastewater before it is discharged into the stormwater pond. See below for discussion of monitoring and limitations for the internal outfalls.

### **DSN001A & DSN001B: Landfill wastewater as defined by 40 CFR 445.**

DSN001A and DSN001B represent the same internal monitoring point. During the times when the facility does not experience a discharge to surface water (DSN0011), the permittee will report monitoring results via DSN001A. When the site reports a discharge to surface water (DSN0011), the permittee must report results via internal monitoring point DSN001B.

#### **Federal Effluent Guideline Limitations (EGL)**

Parameters based upon EGL have had effluent guidelines established under the 40 CFR 445 Subpart B - RCRA Subtitle D Non-Hazardous Waste Landfill. Limitations for the discharge of landfill leachate must be met prior to comingling with stormwater. Therefore, limitations for parameters under 40 CFR 445.21, Effluent limitations attainable by the application of the best practicable control technology currently available (BPT), apply to monitoring point DSN001B prior to wastewater discharging out of DSN0011. The same parameters regulated under 40 CFR 445.21 will be monitored as "Report Only" when the landfill leachate does not discharge to surface water (DSN0011).

#### **Best Management Practices Plan**

Best Management Practices (BMPs) are believed to be the most effective way to control the contamination of stormwater from areas of industrial activities. This facility is required to maintain a BMP plan. The requirements of the BMP plan call for minimization of stormwater contact with waste materials, products and by-products, and for prevention of spills or loss of fluids from equipment maintenance activities. The effectiveness of the BMPs will be measured through the monitoring of the pollutants of concern.

#### **Reporting Requirements**

The Part I.C.1.c permit language has been updated to reflect the electronic discharge monitoring reporting requirements due to the transition to the Department's new Alabama Environmental Permitting and Compliance System (AEPACS) from the e2 Reporting System.

#### **Revision: February 24, 2022**

In the process of drafting the permit, the facility requested an additional outfall, DSN002, be added to accommodate stormwater runoff associated with an expansion area of the site. Stormwater runoff from a new entrance drive and scale house will discharge out of DSN002 to an unnamed tributary to Schoolhouse Branch. Because construction for the new entrance drive is already underway, the permittee was able to submit sampling data for the new outfall in an updated EPA Form 2F. It is believed that the parameters of concern in EPA Form 2F will accurately represent the potential pollutants after construction is completed. A monthly monitoring frequency is proposed for the new outfall to ensure the Department has enough loading data to evaluate the impact of the new outfall on the receiving stream.



**Best Professional Judgment (BPJ)**

The parameters of concern for the new outfall facility are based on the parameters of concern listed in EPA Form 2F. These parameters are consistent with similar facilities in the state. The parameters with specific limits are discussed below:

**Oil & Grease**

The daily maximum limit of 15 mg/l for Oil and Grease should prevent the occurrence of a visible sheen in the stream and has been shown to be achievable through the use of proper BMPs.

**Total Zinc, Phenol, P-Cresol, Total Benzoic Acids, & Alpha-Terpineol**

The facility sampled for total zinc, phenol, p-cresol, total benzoic acids, & alpha-terpineol in the stormwater that would discharge from the new outfall DSN002. These parameters are limited in the facility's DSN001B discharge according to 40 CFR 445 Non-hazardous Waste Landfills. However, the facility does not expect these pollutants to be present in the scale house and entrance drive areas, and reported no detection of these pollutants in the entrance drive and scale house stormwater discharge. Therefore, monitoring for these parameters at DSN002 is not required at this time.

## **ANTIDEGRADATION RATIONALE**

**Permit Number:** AL0069345  
**Facility Name:** Magnolia Sanitary Landfill  
**Receiving water:** Unnamed tributary to Schoolhouse Branch  
**Stream Category:** Tier 2 as defined by ADEM Admin. Code 335-6-10-.12  
**Discharge Description:** Stormwater runoff associated with industrial activity.

**The following preliminary determination was prepared in accordance with ADEM Admin. Code 335-6-10-.12 (7) (c):**

The Department has reviewed the information submitted by applicant in accordance with ADEM Admin. Code 335-6-10-.12 (9). The applicant has demonstrated that there are no alternative options which are economically feasible or technically viable.

The permit applicant has indicated that the following economic and/or social benefits will result from the issuance of this permit:

- The expanded discharge will reduce traffic and sedimentation tracking onto the County Road and therefore prevent runoff onto adjacent properties or into waters of the State.
- The discharge allows the facility to increase its current workforce by 1-2 additional personnel.
- The discharge allows the facility to continue providing a public service to the surrounding community and environment as a municipal landfill.

The Department has determined that the discharge as proposed by the permit applicant is necessary for important economic and social development in the area in which the receiving water is located.

**Prepared By:** Scott Ramsey  
**Date:** May 16, 2022

## Berry, Isabelle J

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**From:** Charlie Rogers <Charlie.Rogers@cdge.com>  
**Sent:** Tuesday, May 10, 2022 2:32 PM  
**To:** Berry, Isabelle J  
**Subject:** RE: Anti-Deg Eval for Magnolia Sanitary Landfill (AL0069345)  
**Attachments:** Magnolia Landfill\_Form312.pdf; Form 311 (signed).pdf; Form187\_updated for antidegradation.pdf

Isabelle,

See attached the requested documents (Form 311, Form 312, and Form 187) related to Anti-Degradation for the Magnolia Sanitary Landfill. I only updated the information on pages 6 and 7 and left the remainder blank so that the revised pages could be inserted into the previous submittal.

Thanks,

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**Subject:** Anti-Deg Eval for Magnolia Sanitary Landfill (AL0069345)

Good morning Charlie,

Per our phone discussion this morning, attached are the forms that need to be completed in order to conduct an Anti-Degradation Evaluation for the expanded discharge at Magnolia Sanitary Landfill (AL0069345). The attached forms are ADEM Form 311, Form 313, and Form 187. On Form 187, only pages 6 and 7 need to be completed at this time. Like I mentioned, you may return these forms via email attachment. Let me know if you have trouble viewing any of the forms or have questions in the meantime.

Thank you,  
Izzy

**Isabelle Berry**  
she/her/hers  
Industrial Section  
Industrial/Municipal Branch  
Water Division  
Alabama Department of Environmental Management  
Post Office Box 301463  
Montgomery, Alabama 36130-1463

Work: (334) 271-7851  
Cell: (616) 822-3502  
Email: [isabelle.berry@adem.alabama.gov](mailto:isabelle.berry@adem.alabama.gov)



**NEW ADEM ELECTRONIC SYSTEM: Alabama Environmental Permitting and Compliance System (AEPACS)**

AEPACS is an electronic system that allows facilities to apply for and maintain permits as well as submit other required applications, registrations, and certifications. In addition, the system allows facilities to submit required compliance reports or other information to the Department. For general information about AEPACS, go to: <http://adem.alabama.gov/egov/AEPACS.cnt>. For NPDES and SID program specific information about AEPACS, go to <http://adem.alabama.gov/egov/AEPACSwater.cnt>.

If you have questions or need assistance with AEPACS, please contact the ADEM Web Portal/AEPACS Help Desk at [ademwebportal@adem.alabama.gov](mailto:ademwebportal@adem.alabama.gov). The email box is monitored Monday through Friday, 7:00 am –5:00 pm.

**Charlie Rogers**  
*Environmental Scientist*



224 Broad Street, Suite 201, Gadsden, AL 35901  
**Office** 256.543.9431 | **Cell** 256.571.5465  
**E-mail** [Charlie.Rogers@cdge.com](mailto:Charlie.Rogers@cdge.com)





Information required for new or increased discharges to high quality waters:

A. What environmental or public health problem will the discharger be correcting?

The new discharge is associated with new construction of a facility entrance drive and scalehouse. The entrance drive will be paved and will reduce traffic and sedimentation tracking onto the County Road currently used to access the landfill. The new road grading is designed to retain stormwater on the landfill property and to prevent runoff onto adjacent properties or into waters of the State.

B. How much will the discharger be increasing employment (at its existing facility or as the result of locating a new facility)?

The proposed scalehouse will require one to two additional personnel to operate the scalehouse during normal operating hours.

C. How much reduction in employment will the discharger be avoiding?

There will be no reduction in employment.

D. How much additional state or local taxes will the discharger be paying?

The existing landfill and new entrance facility is owned by the Baldwin County Commission and is a public service. There will be no change in state or local taxes.

E. What public service to the community will the discharger be providing?

The facility is an existing sanitary landfill. The entrance facility and scalehouse will improve the efficiency of the daily operations for the landfill.

F. What economic or social benefit will the discharger be providing to the community?

The new construction will improve the efficiency of the existing landfill. The new entrance will reduce tracking onto the county road and improve the appearance of the landfill for nearby residential properties.

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## SECTION H – EPA Application Forms

All Applicants must submit EPA permit application forms. More than one application form may be required from a facility depending on the number and types of discharges or outfalls found. The EPA application forms are found on the Department's website at <http://www.adem.alabama.gov/programs/water/waterforms.cnt>. The EPA application forms must be submitted in duplicate as follows:

1. All applicants must submit Form 1.
2. Applicants for existing industrial facilities (including manufacturing facilities, commercial facilities, mining activities, and silvicultural activities) which discharge process wastewater must submit Form 2C.
3. Applicants for new industrial facilities which propose to discharge process wastewater must submit Form 2D.
4. Applicants for new and existing industrial facilities which discharge only non-process wastewater (i.e., non-contact cooling water and/or sanitary wastewater) must submit Form 2E.
5. Applicants for new and existing facilities whose discharge is composed entirely of storm water associated with industrial activity must submit Form 2F, unless exempted by § 122.26(c)(1)(ii). If the discharge is composed of storm water and non-storm water, the applicant must also submit Forms 2C, 2D, and/or 2E, as appropriate (in addition to Form 2F).

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## SECTION I – ENGINEERING REPORT/BMP PLAN REQUIREMENTS

See ADEM 335-6-6-.08(i) & (j)

## SECTION E – WASTE STORAGE AND DISPOSAL INFORMATION

Provide a description of the location of all sites involved in the storage of solids or liquids that could be accidentally discharged to a water of the state, either directly or indirectly via such avenues as storm water drainage, municipal wastewater systems, etc., which are located at the facility for which the NPDES application is being made. Where possible, the location should be noted on a map and included with this application:

Description of Waste	Description of Storage Location

## SECTION F – COASTAL ZONE INFORMATION

Is the discharge(s) located within the 10-foot elevation contour and within the limits of Mobile or Baldwin County? ☐ Yes ☐ No  
If yes, complete items F.1 – F.12:

	Yes	No
1. Does the project require new construction? .....	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the project be a source of new air emissions? .....	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the project involve dredging and/or filling of a wetland area or water way? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, has the Corps of Engineers (COE) permit been received? .....	<input type="checkbox"/>	<input type="checkbox"/>
COE Project No. ....		
4. Does the project involve wetlands and/or submersed grassbeds? .....	<input type="checkbox"/>	<input type="checkbox"/>
5. Are oyster reefs located near the project site? .....	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, include a map showing project and discharge location with respect to oyster reefs		
6. Does the project involve the site development, construction and operation of an energy facility as defined in ADEM Admin. Code r. 335-8-1-.02(bb)? .....	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the project involve mitigation of shoreline or coastal area erosion? .....	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the project involve construction on beaches or dune areas? .....	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the project interfere with public access to coastal waters? .....	<input type="checkbox"/>	<input type="checkbox"/>
10. Does the project lie within the 100-year floodplain? .....	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the project involve the registration, sale, use, or application of pesticides? .....	<input type="checkbox"/>	<input type="checkbox"/>
12. Does the project propose or require construction of a new well or to alter an existing groundwater well to pump more than 50 gallons per day (GPD)? .....	<input type="checkbox"/>	<input type="checkbox"/>
If yes, has the applicable permit for groundwater recovery or for groundwater well installation been obtained? .....	<input type="checkbox"/>	<input type="checkbox"/>

## SECTION G – ANTI-DEGRADATION EVALUATION

In accordance with 40 CFR §131.12 and the ADEM Admin. Code r. 335-6-10-.04 for anti-degradation, the following information must be provided, if applicable. It is the applicant's responsibility to demonstrate the social and economic importance of the proposed activity. If further information is required to make this demonstration, attach additional sheets to the application.

1. Is this a new or increased discharge that began after April 3, 1991? ☒ Yes ☐ No  
If yes, complete G.2 below. If no, go to Section H.
2. Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in G.1? ☐ Yes ☒ No

If yes, do not complete this section. If no, and the discharge is to a Tier II waterbody as defined in ADEM Admin. Code r. 335-6-10-.12(4), complete G.2.A – G.2.F below and ADEM Forms 311 and 313 (attached). ADEM Form 313 must be provided for each alternative considered technically viable.

Information required for new or increased discharges to high quality waters:

A. What environmental or public health problem will the discharger be correcting?

The new discharge is associated with new construction of a facility entrance drive and scalehouse. No environmental or public health problems will be corrected by the new construction.

B. How much will the discharger be increasing employment (at its existing facility or as the result of locating a new facility)?

The proposed scalehouse will require existing personnel to man the scalehouse during normal operating hours.

C. How much reduction in employment will the discharger be avoiding?

There will be no reduction in employment. The scalehouse may require hiring additional personnel for operation.

D. How much additional state or local taxes will the discharger be paying?

There will be no change in state or local taxes for the discharger.

E. What public service to the community will the discharger be providing?

The facility is an existing sanitary landfill.

F. What economic or social benefit will the discharger be providing to the community?

The new construction will not have an economic or social benefit for the community.

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## SECTION H – EPA Application Forms

All Applicants must submit EPA permit application forms. More than one application form may be required from a facility depending on the number and types of discharges or outfalls found. The EPA application forms are found on the Department's website at <http://www.adem.alabama.gov/programs/water/waterforms.cnt> . The EPA application forms must be submitted in duplicate as follows:

1. All applicants must submit Form 1.
2. Applicants for existing industrial facilities (including manufacturing facilities, commercial facilities, mining activities, and silvicultural activities) which discharge process wastewater must submit Form 2C.
3. Applicants for new industrial facilities which propose to discharge process wastewater must submit Form 2D.
4. Applicants for new and existing industrial facilities which discharge only non-process wastewater (i.e., non-contact cooling water and/or sanitary wastewater) must submit Form 2E.
5. Applicants for new and existing facilities whose discharge is composed entirely of storm water associated with industrial activity must submit Form 2F, unless exempted by § 122.26(c)(1)(ii). If the discharge is composed of storm water and non-storm water, the applicant must also submit Forms 2C, 2D, and/or 2E, as appropriate (in addition to Form 2F).

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## SECTION I – ENGINEERING REPORT/BMP PLAN REQUIREMENTS

See ADEM 335-6-6-.08(i) & (j)



# Attachment 1 to Supplementary Form ADEM Form 311

## *Alternatives Analysis*

*Applicant/Project:* Magnolia Sanitary Landfill

All new or expanded discharges (except discharges eligible for coverage under general permits) covered by the NPDES permitting program are subject to the provisions of ADEM's antidegradation policy. Applicants for such discharges to Tier 2 waters are required to demonstrate "... that the proposed discharge is necessary for important economic or social development." As a part of this demonstration, the applicant must complete an evaluation of the discharge alternatives listed below, including a calculation of the total annualized project costs for each technically feasible alternative (using ADEM Form 312 for public-sector projects and ADEM Form 313 for private-sector projects). Alternatives with total annualized project costs that are less than 110% of the total annualized project costs for the Tier 2 discharge proposal are considered viable alternatives.

Alternative	Viable	Non-Viable	Comment
1 Land Application		X	Storm water discharge is expected to be intermittent and of short duration.
2 Pretreatment/Discharge to POTW		X	Access to a POTW is not locally available.
3 Relocation of Discharge		X	Natural topography of the site and surrounding area is very flat.
4 Reuse/Recycle		X	There is no practical reuse for the storm water from the site.
5 Process/Treatment Alternatives		X	Storm water discharge will be intermittent and sporadic in nature
6 On-site/Sub-surface Disposal		X	Discharge would only occur when natural infiltration rate at site is exceeded.
<i>(other project-specific alternatives considered by the applicant; attach additional sheets if necessary)</i>			
7			
8			
9			

Pursuant to ADEM Administrative Code Rule 335-6-3-.04, I certify on behalf of the applicant that I have completed an evaluation of the discharge alternatives identified above, and reached the conclusions indicated.

Signature: \_\_\_\_\_

(Professional Engineer)

Date: \_\_\_\_\_

5-10-22



(Supporting documentation to be attached, referenced, or otherwise handled as appropriate.)



**Calculation of Total Annualized Project Costs  
for Public-Sector Projects**

**A. Capital Costs**

Capital Cost of Project	\$ 550,000	
Other One-Time Costs of Project (Please List, if any)		
	\$	
	\$	
	\$	
<b>Total Capital Costs (Sum column)</b>	\$ 550,000	(1)
Portion of Capital Costs to be Paid for with Grant Monies	\$ 0	(2)
Capital Costs to be Financed [Calculate: (1) – (2) ]	\$ 550,000	(3)
Type of Financing (e.g., G.O. bond, revenue bond, bank loan)	Not applicable	
Interest Rate for Financing (expressed as decimal)	Not applicable	(i)
Time Period of Financing (in years)	10	(n)
Annualization Factor = $\frac{i}{(1+i)^n - 1} + i$	Not applicable	(4)
<b>Annualized Capital Cost [Calculate: (3) x (4) ]</b>	71,225	(5)

**B. Operating and Maintenance Costs**

Annual Costs of Operation and Maintenance (including but not limited to: monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement.) (Please list below.)

Individual Permit Fee \$7060 for 5 years coverage (\$1,412 per year)	\$ 1412	
Monitoring/Inspection/Reporting for New Outfall #2 (per year)	\$ 2000	
	\$	
	\$	
<b>Total Annual O &amp; M Costs (Sum column)</b>	\$ 3412	(6)

**C. Total Annual Cost of Pollution Control Project**

Total Annual Cost of Pollution Control Project [ (5) + (6) ]	\$ 58412	(7)
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## Berry, Isabelle J

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**From:** Charlie Rogers <Charlie.Rogers@cdge.com>  
**Sent:** Friday, February 18, 2022 3:32 PM  
**To:** Berry, Isabelle J  
**Cc:** Terri L. Graham  
**Subject:** Magnolia Landfill Permit Modification forms  
**Attachments:** BL1-Magnolia Sanitary Landfill-NPDES Permit Renewal\_signed.pdf; Form187\_Magnolia LF\_Modification\_2-18-22.pdf

Isabelle,

Please find attached the following forms associated with the Magnolia Sanitary Landfill permit renewal:

1. Signed Form 2F
2. Supplemental Information Form 187
3. Updated Topographic Map

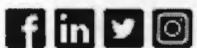
Form 2F provides the new proposed outfall information at the new entrance drive. Page 1 of Form 187 is included to provide the current information for the County Commission Chairman. The Topographic Map is included in the Form 2F pdf showing the location of the proposed new outfall. No other changes or modifications are requested at this time. Let us know if you have any questions or need any additional information for finalizing the permit renewal.

Thanks,


**Charlie Rogers**  
*Environmental Scientist*



224 Broad Street, Suite 201, Gadsden, AL 35901  
**Office** 256.543.9431 | **Cell** 256.571.5465  
**E-mail** Charlie.Rogers@cdge.com



EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004
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Form 2F NPDES		<b>U.S Environmental Protection Agency</b> <b>Application for NPDES Permit to Discharge Wastewater</b> <b>STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY</b>
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**SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))**

Outfall Location	1.1	Provide information on each of the facility's outfalls in the table below			
	Outfall Number	Receiving Water Name	Latitude		Longitude
	1	UT to Barner Branch	30°	26' 57.78" N	87° 46' 34.50" W
	2	UT to Schoolhouse Branch	30°	26' 19.1" N	87° 46' 04" W
			"	"	"
			"	"	"
			"	"	"
			"	"	"

**SECTION 2. IMPROVEMENTS (40 CFR 122.21(g)(6))**

Improvements	2.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 3.				
	2.2	Briefly identify each applicable project in the table below.				
	Brief Identification and Description of Project	Affected Outfalls (list outfall numbers)	Source(s) of Discharge	Final Compliance Dates		
				Required	Projected	
2.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (Optional Item) <input type="checkbox"/> Yes <input type="checkbox"/> No					



EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill
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Form Approved 03/05/19  
OMB No. 2040-0004

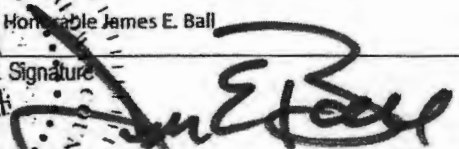
**SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))**

Site Drainage Map	3.1	Have you attached a site drainage map containing all required information to this application? (See instructions for specific guidance.)
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**SECTION 4. POLLUTANT SOURCES (40 CFR 122.26(c)(1)(i)(B))**

Pollutant Sources	4.1	Provide information on the facility's pollutant sources in the table below.			
		Outfall Number	Impervious Surface Area (within a mile radius of the facility)	Total Surface Area Drained (within a mile radius of the facility)	
		1	6.87	specify units acres	584 specify units acres
		2	9.5	specify units acres	65 specify units acres
				specify units	specify units
				specify units	specify units
				specify units	specify units
				specify units	specify units
				specify units	specify units
		4.2	Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.)  Facility operations primarily consist of municipal solid waste and construction/demolition waste landfilling. Leachate generated and collected in the MSW portion of the facility is treated through a three-stage aeration pond, two-stage constructed wetlands, and a holding pond prior to discharge into the stormwater control system. Leachate treatment and discharge are regulated under UIC Permit ALS19902554. Site operations typically in contact with stormwater are limited to the "working face" for both the MSW Landfill Unit and the construction/demolition disposal area. Inactive areas of both C/D and MSW waste disposal receive an intermediate earthen cap to reduce the potential for contact with stormwater. Any stormwater falling in the open portions of the MSW disposal area collected in the leachate collection system and are treated through the facility's wastewater treatment facility.		
	4.3	Provide the location and a description of existing structural and non-structural control measures to reduce pollutants in stormwater runoff. (See instructions for specific guidance.)			
		Stormwater Treatment			
		Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)	
		1	Onsite WWTP	3-B,3-G,1-U	
		1	Stormwater collection system	1-U,4-A,4-D	



EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004																															
<b>SECTION 5. NON STORMWATER DISCHARGES (40 CFR 122.26(c)(1)(i)(C))</b>																																		
<b>Non-Stormwater Discharges</b>	<b>5.1</b>	<i>I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-stormwater discharges. Moreover, I certify that the outfalls identified as having non-stormwater discharges are described in either an accompanying NPDES Form 2C, 2D, or 2E application.</i>																																
		Name (print or type first and last name) Honorable James E. Ball	Official title Chairman-Baldwin County Commission																															
		Signature 	Date signed 02/15/2022																															
		<b>5.2</b> Provide the testing information requested in the table below.																																
		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">Outfall Number</th> <th style="width:40%;">Description of Testing Method Used</th> <th style="width:20%;">Date(s) of Testing</th> <th style="width:30%;">Onsite Drainage Points Directly Observed During Test</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		Outfall Number	Description of Testing Method Used	Date(s) of Testing	Onsite Drainage Points Directly Observed During Test																											
Outfall Number	Description of Testing Method Used	Date(s) of Testing	Onsite Drainage Points Directly Observed During Test																															
<b>SECTION 6. SIGNIFICANT LEAKS OR SPILLS (40 CFR 122.26(c)(1)(i)(D))</b>																																		
<b>Significant Leaks or Spills</b>	<b>6.1</b>	Describe any significant leaks or spills of toxic or hazardous pollutants in the last three years.  None																																
<b>SECTION 7. DISCHARGE INFORMATION (40 CFR 122.26(c)(1)(i)(E))</b>																																		
<b>Discharge Information</b>	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.																																	
	<b>7.1</b>	Is this a new source or new discharge? <input checked="" type="checkbox"/> Yes → See instructions regarding submission of estimated data. <input type="checkbox"/> No → See instructions regarding submission of actual data.																																
	<b>Tables A, B, C, and D</b>																																	
	<b>7.2</b>	Have you completed Table A for each outfall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																

EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004
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Discharge Information (Continued)	7.3	Is the facility subject to an effluent limitation guideline (ELG) or effluent limitations in an NPDES permit for its process wastewater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.5.
	7.4	Have you completed Table B by providing quantitative data for those pollutants that are (1) limited either directly or indirectly in an ELG and/or (2) subject to effluent limitations in an NPDES permit for the facility's process wastewater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	7.5	Do you know or have reason to believe any pollutants in Exhibit 2F-2 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.7.
	7.6	Have you listed all pollutants in Exhibit 2F-2 that you know or have reason to believe are present in the discharge and provided quantitative data or an explanation for those pollutants in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.7	Do you qualify for a small business exemption under the criteria specified in the Instructions? <input type="checkbox"/> Yes → SKIP to Item 7.18. <input checked="" type="checkbox"/> No
	7.8	Do you know or have reason to believe any pollutants in Exhibit 2F-3 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.10.
	7.9	Have you listed all pollutants in Exhibit 2F-3 that you know or have reason to believe are present in the discharge in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.10	Do you expect any of the pollutants in Exhibit 2F-3 to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.12.
	7.11	Have you provided quantitative data in Table C for those pollutants in Exhibit 2F-3 that you expect to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.12	Do you expect acrolein, acrylonitrile, 2,4-dinitrophenol, or 2-methyl-4,6-dinitrophenol to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.14.
	7.13	Have you provided quantitative data in Table C for the pollutants identified in Item 7.12 that you expect to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.14	Have you provided quantitative data or an explanation in Table C for pollutants you expect to be present in the discharge at concentrations less than 10 ppb (or less than 100 ppb for the pollutants identified in Item 7.12)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	7.15	Do you know or have reason to believe any pollutants in Exhibit 2F-4 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.17.
	7.16	Have you listed pollutants in Exhibit 2F-4 that you know or believe to be present in the discharge and provided an explanation in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No
7.17	Have you provided information for the storm event(s) sampled in Table D? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	



EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004
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Discharge Information/Continued	<b>Used or Manufactured Toxics</b>		
	7.18	Is any pollutant listed on Exhibits 2F-2 through 2F-4 a substance or a component of a substance used or manufactured as an intermediate or final product or byproduct? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 8.	
	7.19	List the pollutants below, including TCDD if applicable.	
	1.	4.	7.
	2.	5.	8.
	3.	6.	9.

### SECTION 8. BIOLOGICAL TOXICITY TESTING DATA (40 CFR 122.21(g)(11))

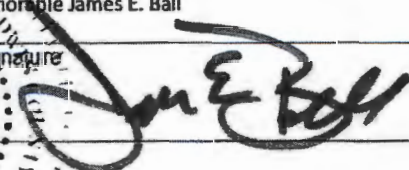
Biological Toxicity Testing Data	8.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last three years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 9.		
	8.2	Identify the tests and their purposes below.		
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

### SECTION 9. CONTRACT ANALYSIS INFORMATION (40 CFR 122.21(g)(12))

Contract Analysis Information	9.1	Were any of the analyses reported in Section 7 (on Tables A through C) performed by a contract laboratory or consulting firm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 10.		
	9.2	Provide information for each contract laboratory or consulting firm below.		
			Laboratory Number 1	Laboratory Number 2
		Name of laboratory/firm	Labella Associates (formerly Highland Technical Services, Inc.)	
		Laboratory address	3502 Laughlin Drive, Suite B Mobile, AL 36693	
		Phone number	(205) 985-4874	
		Pollutant(s) analyzed	E.coli, Oil and Grease, Total Dissolved Solids, Total Suspended Solids, pH, BOD5, Ammonia Nitrogen, COD, Total Nitrogen, Total Kjeldahl Nitrogen, Phosphorus	

EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004
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**SECTION 10. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))**

<b>Checklist and Certification Statement</b>	10.1	In Column 1 below, mark the sections of Form 2F that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.	
		<b>Column 1</b>	<b>Column 2</b>
	<input checked="" type="checkbox"/> Section 1	<input type="checkbox"/> w/ attachments (e.g., responses for additional outfalls)	
	<input checked="" type="checkbox"/> Section 2	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 3	<input type="checkbox"/> w/ site drainage map	
	<input checked="" type="checkbox"/> Section 4	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 5	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 6	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 7	<input checked="" type="checkbox"/> Table A <input type="checkbox"/> w/ small business exemption request <input checked="" type="checkbox"/> Table B <input type="checkbox"/> w/ analytical results as an attachment <input type="checkbox"/> Table C <input type="checkbox"/> Table D	
	<input checked="" type="checkbox"/> Section 8	<input type="checkbox"/> w/attachments	
	<input checked="" type="checkbox"/> Section 9	<input type="checkbox"/> w/attachments (e.g., responses for additional contact laboratories or firms)	
	<input checked="" type="checkbox"/> Section 10	<input type="checkbox"/>	
	10.2	<b>Certification Statement</b> <p><i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i></p>	
	Name (print or type first and last name) Honorable James E. Ball	Official title Chairman-Baldwin County Commission	
	Signature 	Date signed 02/15/2022	





EPA Identification Number N/A	NPDES Permit Number ALDC69345	Facility Name Magnolia Sanitary Landfill	Outfall Number 2
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Form Approved 03/06/19  
OMB No. 2040-0004

**TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))<sup>1</sup>**

You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new discharges only use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1 Oil and grease	0 mg/L				1	1
2 Biochemical oxygen demand (BOD <sub>5</sub> )	35 mg/L				1	1
3 Chemical oxygen demand (COD)	350 mg/L				1	1
4 Total suspended solids (TSS)	150 mg/L				1	1
5 Total phosphorus	1 mg/L				1	1
6 Total Kjeldahl nitrogen (TKN)	8 gm/L				1	1
7 Total nitrogen (as N)	8 mg/L				1	1
pH (minimum)	7				1	1
pH (maximum)	7				1	1

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number N/A	NPDES Permit Number ALD069345	Facility Name Magnolia Sanitary Landfill	Outfall Number 2
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Form Approved 03/06/19  
OMB No. 2040-0004

**TABLE 3. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.25(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(A))<sup>1</sup>**

List each pollutant that is limited in an effluent limitation guideline (ELG) that the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the Instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (Specify Units)		Average Daily Discharge (Specify Units)		Number of Storm Events Sampled	Source of Information (See instructions for sources and use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
Biochemical Oxygen Demand (BOD5)	33 mg/L				1	1
pH	10.33				1	1
Total Suspended Solids	150 mg/L				1	1
Total Ammonia Nitrogen	Not detected				1	1
Total Zinc	Not detected				1	1
Phenol, Single Compound	Not detected				1	1
p-Cresol	Not detected				1	1
Total Benzoic Acids	Not detected				1	1
Alpha - Terpineol	Not detected				1	1

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See Instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility name Magnolia Sanitary Landfill	Outfall Number 2
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Form Approved 03/05/19  
OMB No. 2010-0004

**TABLE D. STORM EVENT INFORMATION (40 CFR 122.26(c)(1)(i)(E)(6))**

Provide data for the storm event(s) that resulted in the maximum daily discharges for the flow-weighted composite sample.

Date of Storm Event	Duration of Storm Event (in hours)	Total Rainfall During Storm Event (in inches)	Number of Hours Between Beginning of Storm Measured and End of Previous Measurable Rain Event	Maximum Flow Rate During Rain Event (in gpm or specify units)	Total Flow from Rain Event (in gallons or specify units)
08/18/2021	2	0.25	36	6.5	387

Provide a description of the method of flow measurement or estimate.

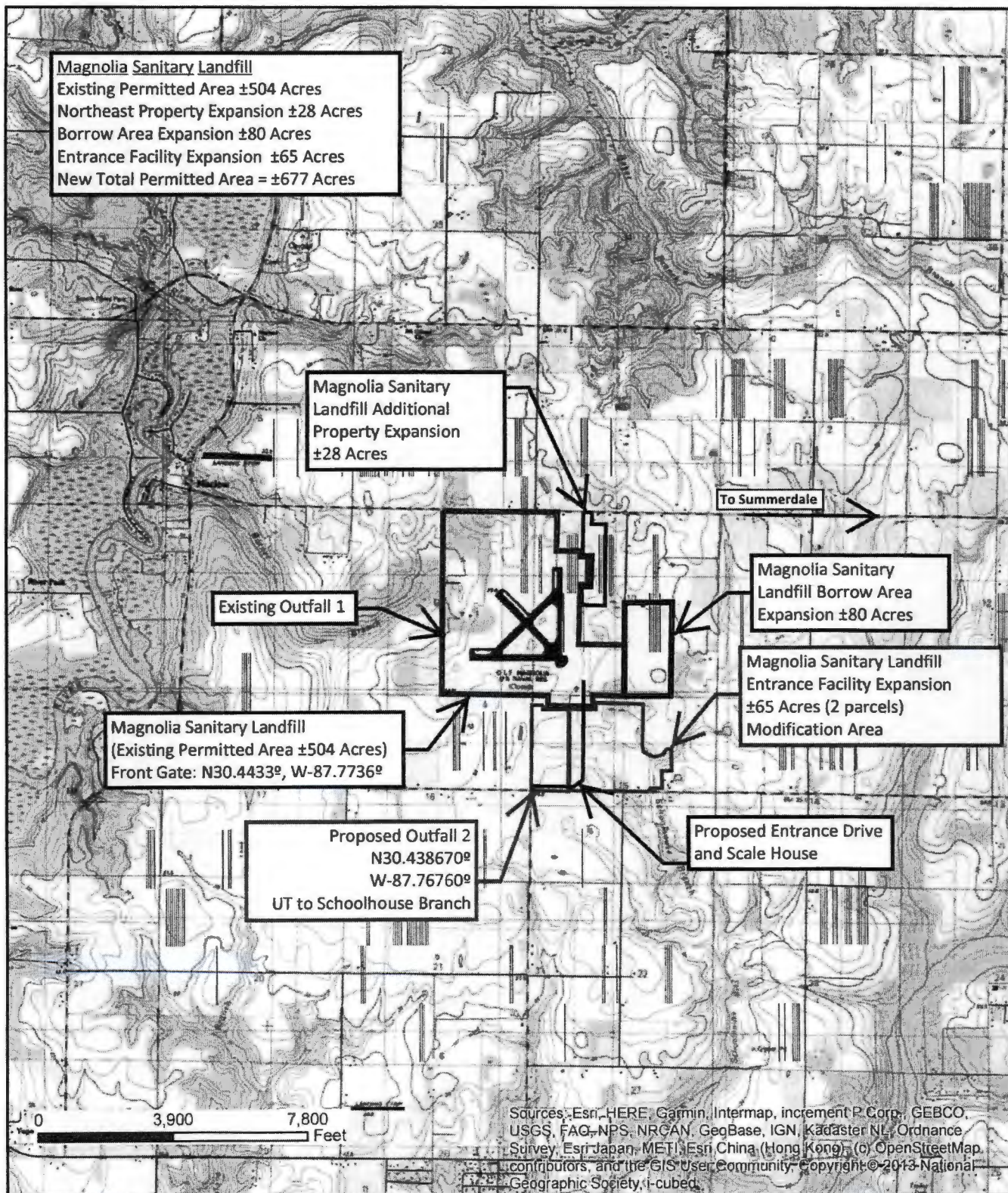


Figure 1 - USGS Topographic Map

MAGNOLIA SANITARY LANDFILL  
 Baldwin County, Alabama



Engineering. Environmental. Answers.  
 www.cdge.com



**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)**  
**NPDES INDIVIDUAL PERMIT APPLICATION**  
**SUPPLEMENTARY INFORMATION FOR INDUSTRIAL FACILITIES**

**Instructions:** This form should be used to submit the required supplementary information for an application for an NPDES individual permit for industrial facilities. The completed application should be submitted to ADEM in duplicate. If insufficient space is available to address any item, please continue on an attached sheet of paper. Please mark "N/A" in the appropriate box when an item is not applicable to the applicant. Please type or print legibly in blue or black ink. Mail the completed application to:

ADEM-Water Division  
Industrial Section  
P O Box 301463  
Montgomery, AL 36130-1463

**PURPOSE OF THIS APPLICATION**

- |   |  |
|---|--|
| <input type="checkbox"/> Initial Permit Application for New Facility*<br><input checked="" type="checkbox"/> Modification of Existing Permit<br><input type="checkbox"/> Revocation & Reissuance of Existing Permit | <input type="checkbox"/> Initial Permit Application for Existing Facility*<br><input type="checkbox"/> Reissuance of Existing Permit<br><br><i>* An application for participation in the ADEM's Electronic Environmental (E2) Reporting must be submitted to allow permittee to electronically submit reports as required.</i> |
|---|--|

**SECTION A – GENERAL INFORMATION**

1. Facility Name: Magnolia Sanitary Landfill
2. NPDES Permit Number: AL 0069345 (not applicable if initial permit application)
3. SID Permit Number (if applicable): IU
4. NPDES General Permit Number (if applicable): ALG
5. Facility Location (Front Gate): Latitude: 30.445286 Longitude: -87.772793
7. Responsible Official (as described on the last page of this application):  
Name: Honorable James E. Ball Title: Chairman - Baldwin County Commission  
Address: 312 Courthouse Square, Suite 12  
City: Bay Minette State: Alabama Zip: 36507  
Phone Number: 251-937-0330 Email Address: jeb.ball@baldwincountyal.gov
8. Designated Discharge Monitoring Report (DMR) Contact:  
Name: Terri Graham Title: Development and Environmental Director  
Phone Number: 251-972-6878 Email Address: tgraham@baldwincountyal.gov
9. Type of Business Entity:  
☐ Corporation ☐ General Partnership ☐ Limited Partnership ☐ Limited Liability Company ☐ Sole Proprietorship  
☒ Other (Please Specify) Municipal
10. Complete this section if the Applicant's business entity is a Corporation
  - a) Location of Incorporation:  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
  - b) Parent Corporation of Applicant:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



**BALDWIN COUNTY  
SOLID WASTE DEPARTMENT**

**15140 County Road 49  
Summerdale, Alabama 36580**

**[www.baldwincountyal.gov](http://www.baldwincountyal.gov)**

**Terri Graham**  
Development & Environmental  
Director  
(251) 972-6878  
[tgraham@baldwincountyal.gov](mailto:tgraham@baldwincountyal.gov)

June 18, 2021

Alabama Department of Environmental Management  
Attn: Industrial Section/Water Division  
Post Office Box 301463  
Montgomery, AL 36130-1463

RECEIVED  
JUN 25 2021  
INDUSTRIAL

RE: Magnolia Sanitary Landfill Permit No. AL0069345  
National Pollutant Discharge Elimination System (NPDES) Permit Renewal

Dear Sir or Madam:

Please find enclosed the NPDES Permit renewal package for Magnolia Landfill. The application is comprised of the following forms, required documentation or fees:

- Permit Application Fee – Check #239060, in the amount of \$7,060.00
- ADEM Form 187 – NPDES Permit Application Supplementary Information
- EPA Form 3510-1 – General Information – Consolidated Permits Program
- EPA Form 3510-2C – Application for Permit to Discharge Wastewater – Existing Manufacturing, Commercial, Mining, and Silviculture Operations
- EPA Form 3510-2F – Application for Permit to Discharge Storm Water, Discharges Associated with Industrial Activity
- Integrated Pollution Prevention Plan for Magnolia Landfill

If you have any questions, please contact me anytime.

Terri Graham

Development and Environmental Director



**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)**  
**NPDES INDIVIDUAL PERMIT APPLICATION**  
**SUPPLEMENTARY INFORMATION FOR INDUSTRIAL FACILITIES**

**Instructions:** This form should be used to submit the required supplementary information for an application for an NPDES individual permit for industrial facilities. The completed application should be submitted to ADEM in duplicate. If insufficient space is available to address any item, please continue on an attached sheet of paper. Please mark "N/A" in the appropriate box when an item is not applicable to the applicant. Please type or print legibly in blue or black ink. Mail the completed application to:

ADEM-Water Division  
Industrial Section  
P O Box 301463  
Montgomery, AL 36130-1463

**INDUSTRIAL SECTION**

**JUN 25 2021**

**PURPOSE OF THIS APPLICATION**

- ☐ Initial Permit Application for New Facility\*  
☐ Modification of Existing Permit  
☐ Revocation & Reissuance of Existing Permit

- ☐ Initial Permit Application for Existing Facility\*  
☒ Reissuance of Existing Permit

\* An application for participation in the ADEM's Electronic Environmental (E2) Reporting must be submitted to allow permittee to electronically submit reports as required.

**RECEIVED**

**SECTION A – GENERAL INFORMATION**

1. Facility Name: Magnolia Sanitary Landfill
2. NPDES Permit Number: AL 006934\_5 (not applicable if initial permit application)
3. SID Permit Number (if applicable): IU
4. NPDES General Permit Number (if applicable): ALG
5. Facility Location (Front Gate): Latitude: 30.445286 Longitude: -87.772793
7. Responsible Official (as described on the last page of this application):  
Name: Honorable Joe Davis, III Title: Chairman - Baldwin County Commission  
Address: 312 Courthouse Square, Suite 12  
City: Bay Minette State: Alabama Zip: 36507  
Phone Number: 251-990-4620 Email Address: joe.davis@baldwincountyal.gov
8. Designated Discharge Monitoring Report (DMR) Contact:  
Name: Terri Graham Title: Development and Environmental Director  
Phone Number: 251-972-6878 Email Address: tgraham@baldwincountyal.gov
9. Type of Business Entity:  
☐ Corporation ☐ General Partnership ☐ Limited Partnership ☐ Limited Liability Company ☐ Sole Proprietorship  
☒ Other (Please Specify) Municipal
10. Complete this section if the Applicant's business entity is a Corporation
  - a) Location of Incorporation:  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
  - b) Parent Corporation of Applicant:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

c) Subsidiary Corporation(s) of Applicant:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

d) Corporate Officers:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

e) Agent designated by the corporation for purposes of service:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

11. If the Applicant's business entity is a Partnership, please list the general partners.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

12. If the Applicant's business entity is a Proprietorship, please enter the proprietor's information.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

15. Identify all Administrative Complaints, Notices of Violation, Directives, Administrative Orders, or Litigation concerning water pollution, if any, against the Applicant, its parent corporation or subsidiary corporations within the State of Alabama within the past five years (attach additional sheets if necessary):

<u>Facility Name</u>	<u>Permit Number</u>	<u>Type of Action</u>	<u>Date of Action</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## SECTION B – BUSINESS ACTIVITY

If your facility conducts or will be conducting any of the processes listed below (regardless of whether they generate wastewater, waste sludge, or hazardous waste), place a check beside the category of business activity (check all that apply):

### Industrial Categories

- |   |   |
|---|---|
| <input type="checkbox"/> Aluminum Forming                                 | <input type="checkbox"/> Metal Molding and Casting                        |
| <input type="checkbox"/> Asbestos Manufacturing                           | <input type="checkbox"/> Metal Products                                   |
| <input type="checkbox"/> Battery Manufacturing                            | <input type="checkbox"/> Nonferrous Metals Forming                        |
| <input type="checkbox"/> Can Making                                       | <input type="checkbox"/> Nonferrous Metals Manufacturing                  |
| <input type="checkbox"/> Canned and Preserved Fruit and Vegetables        | <input type="checkbox"/> Oil and Gas Extraction                           |
| <input type="checkbox"/> Canned and Preserved Seafood                     | <input type="checkbox"/> Organic Chemicals Manufacturing                  |
| <input type="checkbox"/> Cement Manufacturing                             | <input type="checkbox"/> Paint and Ink Formulating                        |
| <input type="checkbox"/> Centralized Waste Treatment                      | <input type="checkbox"/> Paving and Roofing Manufacturing                 |
| <input type="checkbox"/> Carbon Black                                     | <input type="checkbox"/> Pesticides Manufacturing                         |
| <input type="checkbox"/> Coal Mining                                      | <input type="checkbox"/> Petroleum Refining                               |
| <input type="checkbox"/> Coil Coating                                     | <input type="checkbox"/> Phosphate Manufacturing                          |
| <input type="checkbox"/> Copper Forming                                   | <input type="checkbox"/> Photographic                                     |
| <input type="checkbox"/> Electric and Electronic Components Manufacturing | <input type="checkbox"/> Pharmaceutical                                   |
| <input type="checkbox"/> Electroplating                                   | <input type="checkbox"/> Plastic & Synthetic Materials                    |
| <input type="checkbox"/> Explosives Manufacturing                         | <input type="checkbox"/> Plastics Processing Manufacturing                |
| <input type="checkbox"/> Feedlots   | <input type="checkbox"/> Porcelain Enamel                                 |
| <input type="checkbox"/> Ferroalloy Manufacturing                         | <input type="checkbox"/> Pulp, Paper, and Fiberboard Manufacturing        |
| <input type="checkbox"/> Fertilizer Manufacturing                         | <input type="checkbox"/> Rubber   |
| <input type="checkbox"/> Foundries (Metal Molding and Casting)            | <input type="checkbox"/> Soap and Detergent Manufacturing                 |
| <input type="checkbox"/> Glass Manufacturing                              | <input type="checkbox"/> Steam and Electric                               |
| <input type="checkbox"/> Grain Mills                                      | <input type="checkbox"/> Sugar Processing                                 |
| <input type="checkbox"/> Gum and Wood Chemicals Manufacturing             | <input type="checkbox"/> Textile Mills                                    |
| <input type="checkbox"/> Inorganic Chemicals                              | <input type="checkbox"/> Timber Products                                  |
| <input type="checkbox"/> Iron and Steel                                   | <input type="checkbox"/> Transportation Equipment Cleaning                |
| <input type="checkbox"/> Leather Tanning and Finishing                    | <input type="checkbox"/> Waste Combustion                                 |
| <input type="checkbox"/> Metal Finishing                                  | <input checked="" type="checkbox"/> Other (specify) <u>Refuse Systems</u> |
| <input type="checkbox"/> Meat Products                                    |   |

A facility with processes inclusive in these business areas may be covered by Environmental Protection (EPA) categorical standards. These facilities are termed "categorical users".

## SECTION C – WASTEWATER DISCHARGE INFORMATION

1. Do you share an outfall with another facility? ☐ Yes ☒ No (If no, continue to C.2)

For each shared outfall, provide the following:

Applicant's Outfall No.	Name of Other Permittee/Facility	NPDES Permit No.	Where is sample collected by Applicant?

2. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?

<b>Current:</b>	Flow Metering	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
	Sampling Equipment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
<b>Planned:</b>	Flow Metering	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
	Sampling Equipment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A

If so, please attach a schematic diagram of the sewer system indicating the present or future location of this equipment and describe the equipment below:

3. Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics?

☐ Yes ☒ No (If no, continue to C.4)

Briefly describe these changes and their anticipated effects on the wastewater volume and characteristics:

4. List the trade name and chemical composition of all biocides and corrosion inhibitors used:

Trade Name	Chemical Composition

For each biocide and/or corrosion inhibitor used, please include the following information:

- (1) 96-hour median tolerance limit data for organisms representative of the biota of the waterway into which the discharge will ultimately reach,
- (2) quantities to be used,
- (3) frequencies of use,
- (4) proposed discharge concentrations, and
- (5) EPA registration number, if applicable

#### SECTION D – WATER SUPPLY

Water Sources (check as many as are applicable):

<input type="checkbox"/> Private Well	<input type="checkbox"/> Surface Water
<input type="checkbox"/> Municipal Water Utility (Specify City):	<input checked="" type="checkbox"/> Other (Specify): <u>Fairhope Utilities</u>

**IF MORE THAN ONE WELL OR SURFACE INTAKE, PROVIDE DATA FOR EACH ON AN ATTACHMENT**

City: \_\_\_\_\_ MGD\* Well: \_\_\_\_\_ MGD\* Well Depth: \_\_\_\_\_ Ft. Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Surface Intake Volume: \_\_\_\_\_ MGD\* Intake Elevation in Relation to Bottom: \_\_\_\_\_ Ft.

Intake Elevation: \_\_\_\_\_ Ft. Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Name of Surface Water Source: \_\_\_\_\_

\* MGD – Million Gallons per Day



### Cooling Water Intake Structure Information

Complete D.1 and D.2 if your water supply is provided by an outside source and not by an onsite water intake structure? (e.g., another industry, municipality, etc...)

1. Does the provider of your source water operate a surface water intake? ☐ Yes ☒ No  
(If yes, continue, if no, go to Section E.)

a) Name of Provider: \_\_\_\_\_ b) Location of Provider: \_\_\_\_\_

c) Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

2. Is the provider a public water system (defined as a system which provides water to the public for human consumption or which provides only treated water, not raw water)? ☒ Yes ☐ No (If yes, go to Section E, if no, continue.)

Only to be completed if you have a cooling water intake structure or the provider of your water supply uses an intake structure and does not treat the raw water.

3. Is any water withdrawn from the source water used for cooling? ☐ Yes ☒ No

4. Using the average monthly measurements over any 12-month period, approximately what percentage of water withdrawn is used exclusively for cooling purposes? \_\_\_\_\_%

5. Does the cooling water consist of treated effluent that would otherwise be discharged? ☐ Yes ☐ No  
(If yes, go to Section E, if no, complete D.6 – D.17)

6. a. Is the cooling water used in a once-through cooling system? ☐ Yes ☐ No

- b. Is the cooling water used in a closed cycle cooling system? ☐ Yes ☐ No

7. When was the intake installed? \_\_\_\_\_  
(Please provide dates for all major construction/installation of intake components including screens)

8. What is the maximum intake volume? \_\_\_\_\_  
(maximum pumping capacity in gallons per day)

9. What is the average intake volume? \_\_\_\_\_  
(average intake pump rate in gallons per day average in any 30-day period)

10. What is the actual intake flow (AIF) as defined in 40 CFR §125.92(a)? \_\_\_\_\_MGD

11. How is the intake operated? (e.g., continuously, intermittently, batch) \_\_\_\_\_

12. What is the mesh size of the screen on your intake? \_\_\_\_\_

13. What is the intake screen flow-through area? \_\_\_\_\_

14. What is the through-screen design intake flow velocity? \_\_\_\_\_ft/sec

15. What is the through-screen actual velocity (in ft/sec)? \_\_\_\_\_ft/sec

16. What is the mechanism for cleaning the screen? (e.g., does it rotate for cleaning) \_\_\_\_\_

17. Do you have any additional fish detraction technology on your intake? ☐ Yes ☐ No

18. Have there been any studies to determine the impact of the intake on aquatic organisms? ☐ Yes ☐ No (If yes, please provide.)

19. Attach a site map showing the location of the water intake in relation to the facility, shoreline, water depth, etc.

## SECTION E – WASTE STORAGE AND DISPOSAL INFORMATION

Provide a description of the location of all sites involved in the storage of solids or liquids that could be accidentally discharged to a water of the state, either directly or indirectly via such avenues as storm water drainage, municipal wastewater systems, etc., which are located at the facility for which the NPDES application is being made. Where possible, the location should be noted on a map and included with this application:

Description of Waste	Description of Storage Location

## SECTION F – COASTAL ZONE INFORMATION

Is the discharge(s) located within the 10-foot elevation contour and within the limits of Mobile or Baldwin County? ☐ Yes ☒ No  
If yes, complete items F.1 – F.12:

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| 1. Does the project require new construction?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Will the project be a source of new air emissions? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Does the project involve dredging and/or filling of a wetland area or water way? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, has the Corps of Engineers (COE) permit been received? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| COE Project No. ....   |                          |                          |
| 4. Does the project involve wetlands and/or submersed grassbeds? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are oyster reefs located near the project site?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, include a map showing project and discharge location with respect to oyster reefs  |                          |                          |
| 6. Does the project involve the site development, construction and operation of an energy facility as defined in ADEM Admin. Code r. 335-8-1-.02(bb)?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does the project involve mitigation of shoreline or coastal area erosion?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Does the project involve construction on beaches or dune areas?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Will the project interfere with public access to coastal waters?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Does the project lie within the 100-year floodplain?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Does the project involve the registration, sale, use, or application of pesticides?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Does the project propose or require construction of a new well or to alter an existing groundwater well to pump more than 50 gallons per day (GPD)?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, has the applicable permit for groundwater recovery or for groundwater well installation been obtained?.....  | <input type="checkbox"/> | <input type="checkbox"/> |

## SECTION G – ANTI-DEGRADATION EVALUATION

In accordance with 40 CFR §131.12 and the ADEM Admin. Code r. 335-6-10-.04 for anti-degradation, the following information must be provided, if applicable. It is the applicant's responsibility to demonstrate the social and economic importance of the proposed activity. If further information is required to make this demonstration, attach additional sheets to the application.

1. Is this a new or increased discharge that began after April 3, 1991? ☐ Yes ☒ No  
If yes, complete G.2 below. If no, go to Section H.
2. Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in G.1? ☐ Yes ☐ No

If yes, do not complete this section. If no, and the discharge is to a Tier II waterbody as defined in ADEM Admin. Code r. 335-6-10-.12(4), complete G.2.A – G.2.F below and ADEM Forms 311 and 313 (attached). ADEM Form 313 must be provided for each alternative considered technically viable.

Information required for new or increased discharges to high quality waters:

A. What environmental or public health problem will the discharger be correcting?

B. How much will the discharger be increasing employment (at its existing facility or as the result of locating a new facility)?

C. How much reduction in employment will the discharger be avoiding?

D. How much additional state or local taxes will the discharger be paying?

E. What public service to the community will the discharger be providing?

F. What economic or social benefit will the discharger be providing to the community?

---

## SECTION H – EPA Application Forms

All Applicants must submit EPA permit application forms. More than one application form may be required from a facility depending on the number and types of discharges or outfalls found. The EPA application forms are found on the Department's website at <http://www.adem.alabama.gov/programs/water/waterforms.cnt>. The EPA application forms must be submitted in duplicate as follows:

1. All applicants must submit Form 1.
2. Applicants for existing industrial facilities (including manufacturing facilities, commercial facilities, mining activities, and silvicultural activities) which discharge process wastewater must submit Form 2C.
3. Applicants for new industrial facilities which propose to discharge process wastewater must submit Form 2D.
4. Applicants for new and existing industrial facilities which discharge only non-process wastewater (i.e., non-contact cooling water and/or sanitary wastewater) must submit Form 2E.
5. Applicants for new and existing facilities whose discharge is composed entirely of storm water associated with industrial activity must submit Form 2F, unless exempted by § 122.26(c)(1)(ii). If the discharge is composed of storm water and non-storm water, the applicant must also submit Forms 2C, 2D, and/or 2E, as appropriate (in addition to Form 2F).

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## SECTION I – ENGINEERING REPORT/BMP PLAN REQUIREMENTS

See ADEM 335-6-6-.08(i) & (j)



**SECTION J- RECEIVING WATERS**

Outfall No.	Receiving Water(s)	303(d) Segment?		Included in TMDL?*	
001	UT to Barner Branch	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

\*If a TMDL Compliance Schedule is requested, the following should be attached as supporting documentation:

- (1) Justification for the requested Compliance Schedule (e.g. time for design and installation of control equipment, etc.);
- (2) Monitoring results for the pollutant(s) of concern which have not previously been submitted to the Department (sample collection dates, analytical results (mass and concentration), methods utilized, MDL/ML, etc. should be submitted as available);
- (3) Requested interim limitations, if applicable;
- (4) Date of final compliance with the TMDL limitations; and,
- (5) Any other additional information available to support requested compliance schedule.

**SECTION K - APPLICATION CERTIFICATION**

The information contained in this form must be certified by a responsible official as defined in ADEM Administrative Code r. 335-6-6-.09 "signatories to permit applications and reports" (see below).

*"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."*

Signature of Responsible Official: \_\_\_\_\_

Date Signed: June 1, 2021

Name: Honorable Joe Davis, III

Title: Chairman, Baldwin County Commission

If the Responsible Official signing this application is not identified in Section A.7, provide the following information:

Mailing Address: 312 Courthouse Square, Suite 12

City: Bay Minette

State: Alabama

Zip: 36507

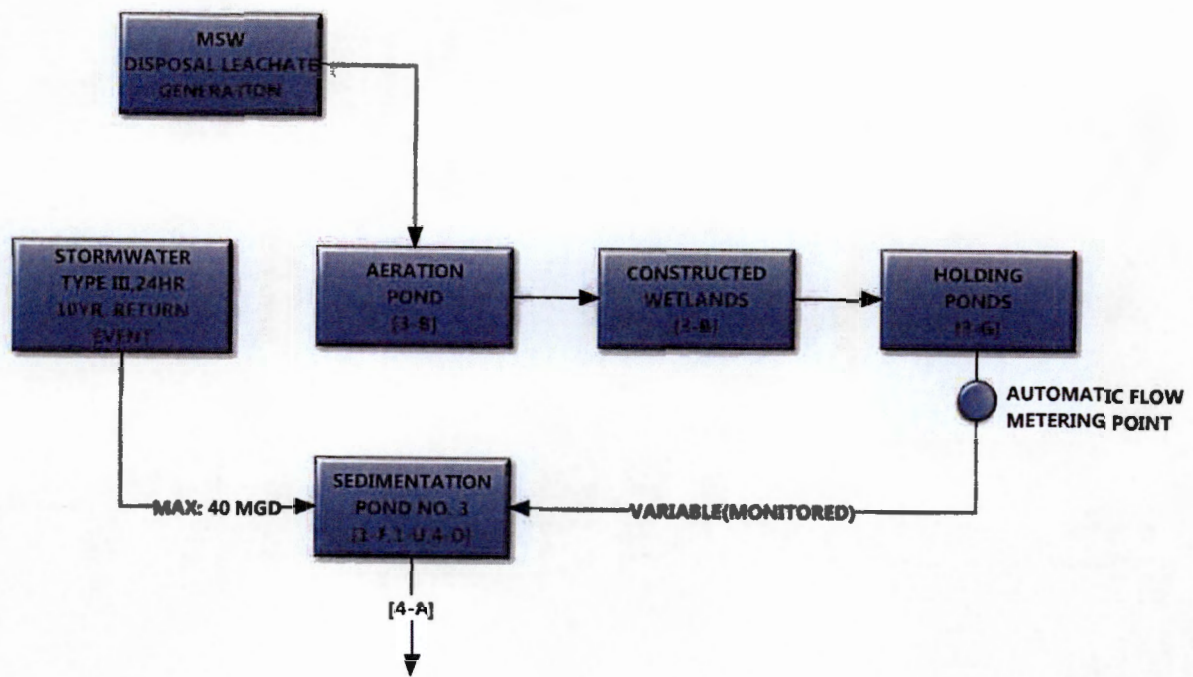
Phone Number: 251-990-4620

Email Address: joe.davis@baldwincountyal.gov

**335-6-6-.09 SIGNATORIES TO PERMIT APPLICATIONS AND REPORTS.**

- (1) The application for an NPDES permit shall be signed by a responsible official, as indicated below:
  - (a) In the case of a corporation, by a principal executive officer of at least the level of vice president, or a manager assigned or delegated in accordance with corporate procedures, with such delegation submitted in writing if required by the Department, who is responsible for manufacturing, production, or operating facilities and is authorized to make management decisions which govern the operation of the regulated facility;
  - (b) In the case of a partnership, by a general partner;
  - (c) In the case of a sole proprietorship, by the proprietor; or
  - (d) In the case of a municipal, state, federal, or other public entity, by either a principal executive officer, or ranking elected official.





**Berry, Isabelle J**

---

**From:** Charlie Rogers <Charlie.Rogers@cdge.com>  
**Sent:** Thursday, July 15, 2021 2:25 PM  
**To:** Berry, Isabelle J  
**Cc:** David Dailey; EFOX@baldwincountyal.gov  
**Subject:** R079321036 - Magnolia LF (AL0069345) NPDES Permit Renewal revised maps  
**Attachments:** Magnolia LF revised Maps\_7-15-21.pdf

Isabelle,

As we discussed on the phone, I am attaching maps that were revised to show the current permitted property boundary for the existing Magnolia Sanitary Landfill. The maps are attached in a single pdf. Please replace each map in the application package, specifically in the Form 187 Supplement Information submittal and in the Integrated Pollution Prevention Plan submittal.

The maps included in the pdf are Figure 1 – USGS Topographic Map, Figure 2 – Site Property Boundary, and the Site Drainage Map. If you have any questions, please contact me at the numbers below or in response to this email.

Thanks,

**Charlie Rogers**  
**CDG Engineers & Associates, Inc.**

224 Broad Street, Suite 201  
Gadsden, AL 35901  
Office Number: (256) 543-9431  
Cell Number: (256) 571-5465



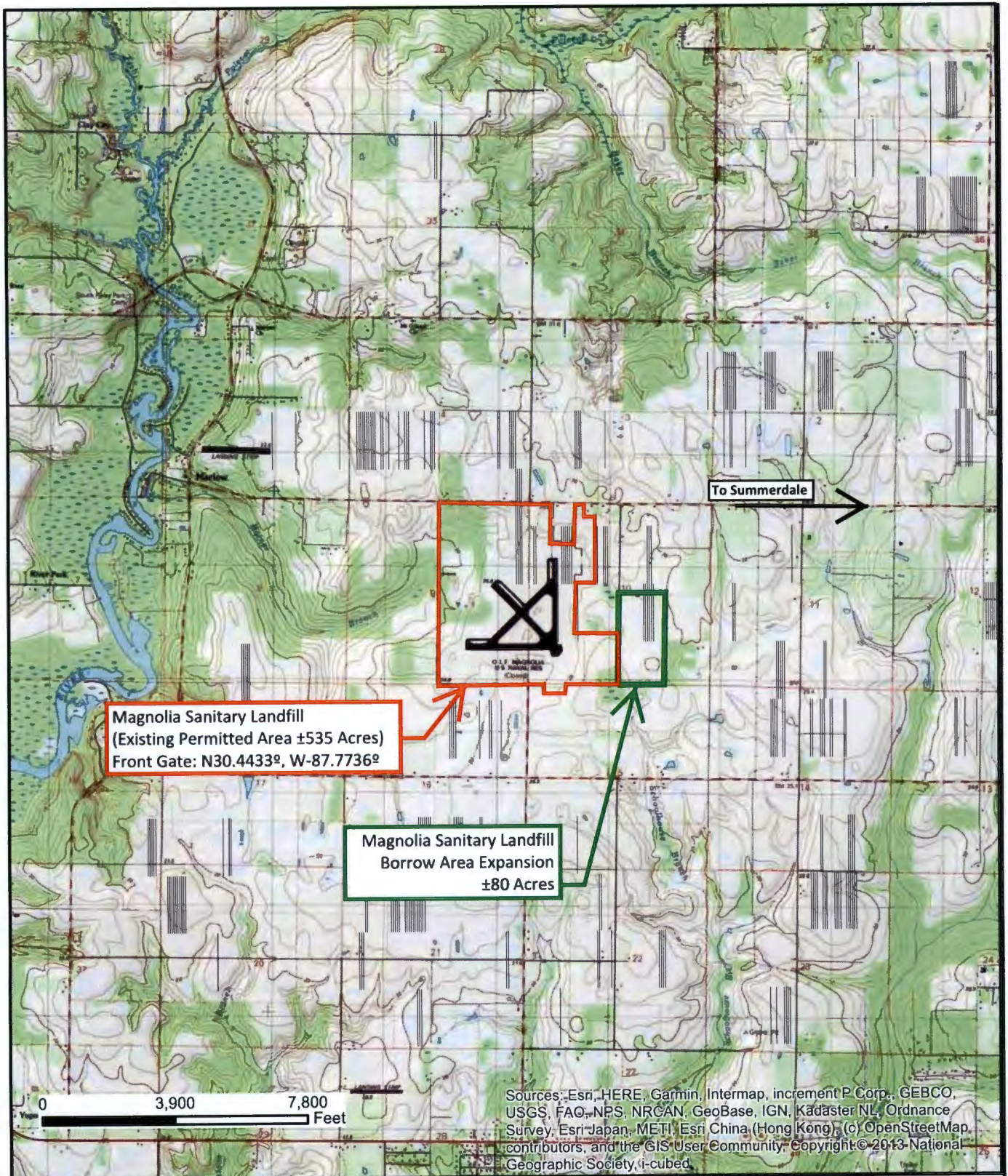


Figure 1 - USGS Topographic Map

MAGNOLIA SANITARY LANDFILL  
Baldwin County, Alabama



Engineering. Environmental. Answers.  
www.cdge.com



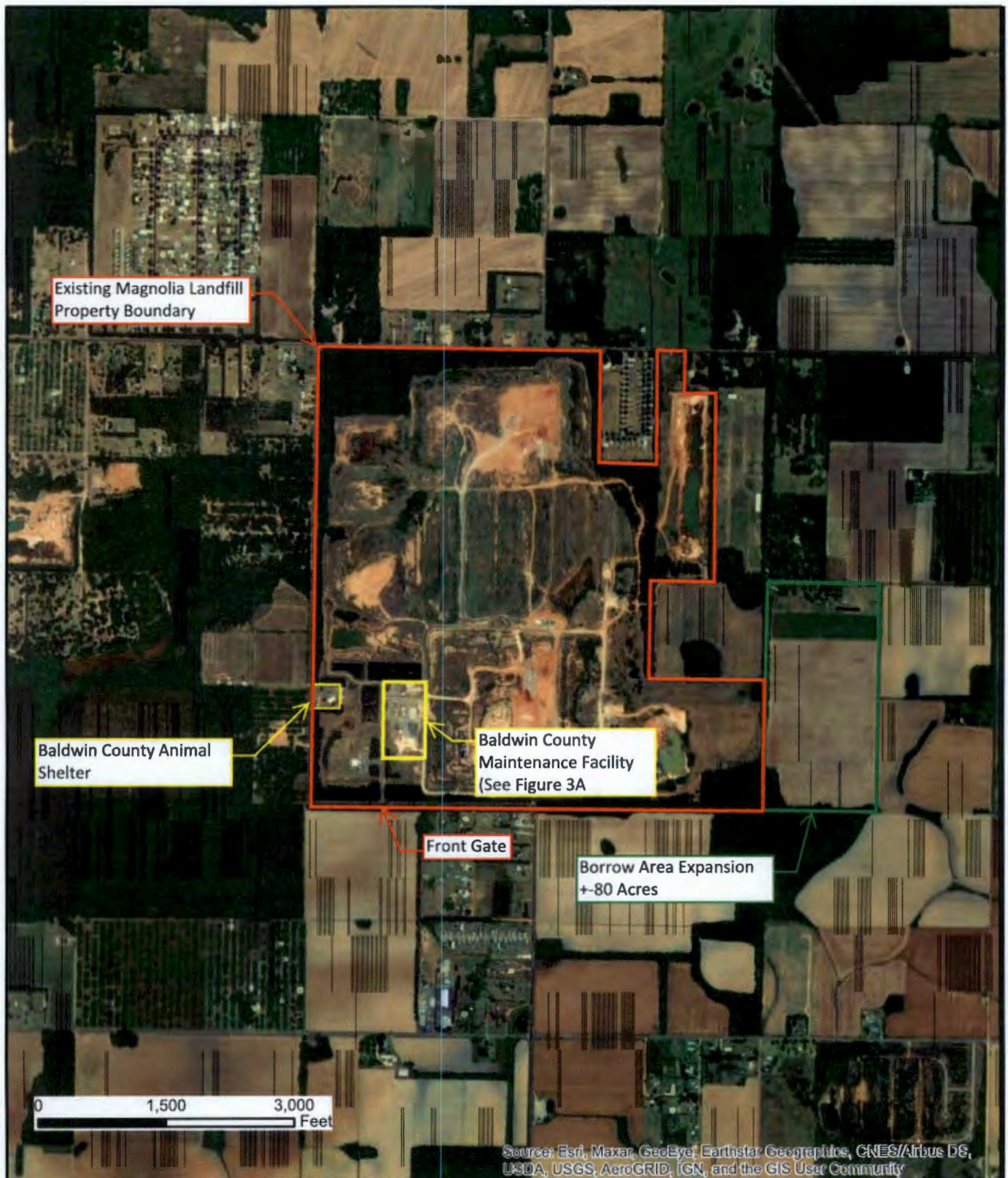


Figure 2 - Site Property Boundary

MAGNOLIA SANITARY LANDFILL  
Baldwin County, Alabama



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www.cdge.com





Engineering. Environmental. Answers.  
www.cdge.com

## Site Drainage Map

MAGNOLIA SANITARY LANDFILL  
Baldwin County, Alabama





**BALDWIN COUNTY  
SOLID WASTE DEPARTMENT**

**15093 Landfill Drive  
Summerdale, Alabama 36580**

**[www.baldwincountyal.gov](http://www.baldwincountyal.gov)**

**Terri Graham**  
Development & Environmental  
Director  
(251) 972-6878  
[tgraham@baldwincountyal.gov](mailto:tgraham@baldwincountyal.gov)

**RECEIVED**

**OCT 08 2021**

**INDUSTRIAL SECTION**

October 6, 2021

Alabama Department of Environmental Management  
Attn: Industrial Section/Water Division  
Post Office Box 301463  
Montgomery, AL 36130-1463

RE: Magnolia Sanitary Landfill Permit No. AL0069345  
National Pollutant Discharge Elimination System (NPDES) Permit Renewal

Dear Sir or Madam:

Please find enclosed the Revised NPDES Permit renewal package for Magnolia Landfill.  
The revised and/or included forms are as follows:

- EPA Form 3510-1 – General Information – Consolidated Permits Program
- EPA Form 3510-2C – Application for Permit to Discharge Wastewater – Existing Manufacturing, Commercial, Mining, and Silviculture Operations
- EPA Form 3510-2F – Application for Permit to Discharge Storm Water, Discharges Associated with Industrial Activity
- Magnolia Landfill SW-DSN0011 Analytical Report dated September 3, 2021
- Magnolia Landfill SW-DSN0011 Analytical Report dated September 10, 2021

The Permit Application Fee – Check #239060, in the amount of \$7,060.00, ADEM Form 187 and the Integrated Pollution Prevention Plan for Magnolia Landfill was submitted June 8, 2021.



This addresses all the concerns as outline in your email dated August 5, 2021 below:

*Good afternoon Terri,*

*I am reviewing the NPDES permit application for Magnolia Sanitary Landfill (AL0069345). I have noted a few missing/incomplete sections:*

- Missing EPA Identification number on Page 1 of EPA Form 1 (Section 2.2) and at the top of all subsequent pages*
- Missing signature and date on Page 4 of EPA Form 1*
- Missing flow estimates on Pages 1-2 of EPA Form 2C (Section 3.1)*
- Missing ELG categorization on Page 3 of EPA Form 2C (Section 5.2)*
- Incomplete Table A, B and C for EPA Form 2C*
- Missing signature and date on Page 3 of EPA Form 2F (Section 5.1)*
- Missing storm event data (Section 7.17 and Table D) of EPA Form 2F*
- Incomplete Table A, B, C, and D for EPA Form 2F*

*It was also noted that for Section 5 of EPA Form 2C, the ELG limits from 40 CFR 445 were listed in place of actual production values (which should have been answered "N/A" instead) and a page from the previous application was added with the same list.*

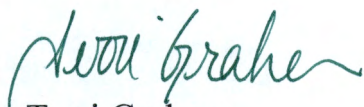
*For the pages with missing signatures, please send me a signed and dated copy with the EPA identification number filled in at the top. This way you will not have to resubmit page 1 of EPA Form 1 (although you certainly can). The missing flow estimates are fine for now, just put "N/A" or "0" in future applications rather than leave it blank. Same with the applicable ELG category, I know that the facility is subject to 40 CFR 445, but please remember to list it as so next time.*

*For the tables with incomplete data, Table A for either form is required to have data for all parameters, the only exceptions being temperature and COD/TOC (and flow can be 0). Table B and C should have real data for the parameters believed present. For Table D of Form 2F, data for a real storm event is required. Even if the facility has not had discharge since the previous permit, it is still expected that a sample be taken (perhaps from a lagoon or before stormwater reaches the lagoon). Similarly, storm events should be recorded.*

*Please address these deficiencies and send them to me. A scanned email attachment is fine, but you can mail hard copies if that's what you are comfortable with. If you have questions or comments about these feel free to give me a call or reply to this email. I look forward to hearing from you.*

*Thanks,  
Izzy Berry*


**If you have any questions, please contact me anytime.**



**Terri Graham**

**Development and Environmental Director**



EPA Identification Number N/A		NPDES Permit Number AL0069345		Facility Name Magnolia Sanitary Landfill		Form Approved 03/05/19 OMB No. 2040-0004	
Form 1 NPDES				U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater  <b>GENERAL INFORMATION</b>			
<b>SECTION 1. ACTIVITIES REQUIRING AN NPDES PERMIT (40 CFR 122.21(f) and (f)(1))</b>							
<b>Activities Requiring an NPDES Permit</b>	<b>1.1 Applicants Not Required to Submit Form 1</b>						
	<b>1.1.1</b> Is the facility a new or existing publicly owned treatment works? If yes, STOP. Do NOT complete Form 1. Complete Form 2A. <div style="text-align: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>			<b>1.1.2</b> Is the facility a new or existing treatment works treating domestic sewage? If yes, STOP. Do NOT complete Form 1. Complete Form 2S. <div style="text-align: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>			
	<b>1.2 Applicants Required to Submit Form 1</b>						
	<b>1.2.1</b> Is the facility a concentrated animal feeding operation or a concentrated aquatic animal production facility? <input type="checkbox"/> Yes → Complete Form 1 and Form 2B. <div style="text-align: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>			<b>1.2.2</b> Is the facility an existing manufacturing, commercial, mining, or silvicultural facility that is currently discharging process wastewater? <input checked="" type="checkbox"/> Yes → Complete Form 1 and Form 2C. <div style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
	<b>1.2.3</b> Is the facility a new manufacturing, commercial, mining, or silvicultural facility that has not yet commenced to discharge? <input type="checkbox"/> Yes → Complete Form 1 and Form 2D. <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>			<b>1.2.4</b> Is the facility a new or existing manufacturing, commercial, mining, or silvicultural facility that discharges only nonprocess wastewater? <input type="checkbox"/> Yes → Complete Form 1 and Form 2E. <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>			
	<b>1.2.5</b> Is the facility a new or existing facility whose discharge is composed entirely of stormwater associated with industrial activity or whose discharge is composed of both stormwater and non-stormwater? <input checked="" type="checkbox"/> Yes → Complete Form 1 and Form 2F unless exempted by 40 CFR 122.26(b)(14)(x) or (b)(15). <div style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</div>						
<b>SECTION 2. NAME, MAILING ADDRESS, AND LOCATION (40 CFR 122.21(f)(2))</b>							
<b>Name, Mailing Address, and Location</b>	<b>2.1 Facility Name</b>						
	Magnolia Sanitary Landfill						
	<b>2.2 EPA Identification Number</b>						
	N/A						
	<b>2.3 Facility Contact</b>						
	Name (first and last) Terri Graham		Title Development and Environmental Director		Phone number (251) 972-6878		
Email address tgraham@baldwincountyal.gov							
<b>2.4 Facility Mailing Address</b>							
Street or P.O. box 15140 County Road 49							
City or town Summerdale		State Alabama		ZIP code 36580			

RECEIVED



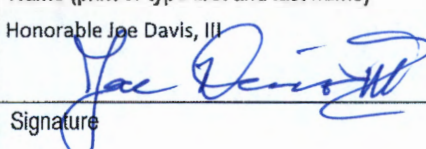
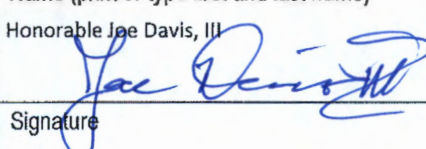
EPA Identification Number N/A		NPDES Permit Number AL0069345		Facility Name Magnolia Sanitary Landfill		Form Approved 03/05/19 OMB No. 2040-0004	
Name, Mailing Address, and Location Continued	2.5	<b>Facility Location</b>					
		Street, route number, or other specific identifier 15140 County Road 49					
		County name Baldwin		County code (if known)			
		City or town Summerdale		State Alabama		ZIP code 36580	
<b>SECTION 3. SIC AND NAICS CODES (40 CFR 122.21(f)(3))</b>							
SIC and NAICS Codes	3.1	<b>SIC Code(s)</b>		<b>Description (optional)</b>			
		49530302		Refuse Systems - Sanitary Landfill Operation			
	3.2	<b>NAICS Code(s)</b>		<b>Description (optional)</b>			
		562219		Landfill			
<b>SECTION 4. OPERATOR INFORMATION (40 CFR 122.21(f)(4))</b>							
Operator Information	4.1	<b>Name of Operator</b>					
		Baldwin County Commission					
	4.2	Is the name you listed in Item 4.1 also the owner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
	4.3	<b>Operator Status</b> <input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input checked="" type="checkbox"/> Other public (specify) <u>County Commission</u> <input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____					
	4.4	<b>Phone Number of Operator</b> (251) 988-8125					
Operator Information Continued	4.5	<b>Operator Address</b>					
		Street or P.O. Box 312 Courthouse Square, Suite 12					
		City or town Bay Minette		State Alabama		ZIP code 36507	
		Email address of operator bunderwood@baldwincountyal.gov					
<b>SECTION 5. INDIAN LAND (40 CFR 122.21(f)(5))</b>							
Indian Land	5.1	Is the facility located on Indian Land? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					


EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004
<b>SECTION 6. EXISTING ENVIRONMENTAL PERMITS (40 CFR 122.21(f)(6))</b>			
Existing Environmental Permits	6.1	Existing Environmental Permits (check all that apply and print or type the corresponding permit number for each)	
		<input checked="" type="checkbox"/> NPDES (discharges to surface water) AL0069345	<input type="checkbox"/> RCRA (hazardous wastes)
		<input checked="" type="checkbox"/> PSD (air emissions) 501-0033	<input type="checkbox"/> Nonattainment program (CAA)
		<input type="checkbox"/> Ocean dumping (MPRSA)	<input checked="" type="checkbox"/> UIC (underground injection of fluids) ALSI9902554  <input type="checkbox"/> NESHAPs (CAA)  <input checked="" type="checkbox"/> Other (specify) Solid Waste 02-03
<b>SECTION 7. MAP (40 CFR 122.21(f)(7))</b>			
Map	7.1	Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.)  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> CAFO—Not Applicable (See requirements in Form 2B.)	
<b>SECTION 8. NATURE OF BUSINESS (40 CFR 122.21(f)(8))</b>			
Nature of Business	8.1	Describe the nature of your business.  Facility operations primarily consist of municipal solid waste and construction/demolition waste landfilling. Leachate generated and collected in the MSW portion of the facility is treated through a three-stage aeration pond, two-stage constructed wetlands, and a holding pond prior to discharge into the stormwater control system. Leachate treatment and discharge are regulated under UIC Permit ALSI9902554.	
<b>SECTION 9. COOLING WATER INTAKE STRUCTURES (40 CFR 122.21(f)(9))</b>			
Cooling Water Intake Structures	9.1	Does your facility use cooling water?  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 10.1.	
	9.2	Identify the source of cooling water. (Note that facilities that use a cooling water intake structure as described at 40 CFR 125, Subparts I and J may have additional application requirements at 40 CFR 122.21(r). Consult with your NPDES permitting authority to determine what specific information needs to be submitted and when.)	
<b>SECTION 10. VARIANCE REQUESTS (40 CFR 122.21(f)(10))</b>			
Variance Requests	10.1	Do you intend to request or renew one or more of the variances authorized at 40 CFR 122.21(m)? (Check all that apply. Consult with your NPDES permitting authority to determine what information needs to be submitted and when.)  <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Fundamentally different factors (CWA Section 301(n))         </div> <div style="width: 50%;"> <input type="checkbox"/> Water quality related effluent limitations (CWA Section 302(b)(2))         </div> <div style="width: 50%;"> <input type="checkbox"/> Non-conventional pollutants (CWA Section 301(c) and (g))         </div> <div style="width: 50%;"> <input type="checkbox"/> Thermal discharges (CWA Section 316(a))         </div> <div style="width: 50%;"> <input checked="" type="checkbox"/> Not applicable         </div> </div>	



EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Form Approved 03/05/19 OMB No. 2040-0004
----------------------------------	----------------------------------	---	---

SECTION 11. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))			
Checklist and Certification Statement	11.1	In Column 1 below, mark the sections of Form 1 that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.	
		Column 1	Column 2
	<input checked="" type="checkbox"/>	Section 1: Activities Requiring an NPDES Permit	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 2: Name, Mailing Address, and Location	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 3: SIC Codes	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 4: Operator Information	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 5: Indian Land	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 6: Existing Environmental Permits	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 7: Map	<input checked="" type="checkbox"/> w/ topographic map <input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 8: Nature of Business	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 9: Cooling Water Intake Structures	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 10: Variance Requests	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/>	Section 11: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments
	11.2	<b>Certification Statement</b>  <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
	Name (print or type first and last name) Honorable Joe Davis, III 	Official title Chairman-Baldwin County Commission	
	Signature 	Date signed 9/16/21	

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Form 2C NPDES				<b>U.S. Environmental Protection Agency</b> <b>Application for NPDES Permit to Discharge Wastewater</b> <b>EXISTING MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURE OPERATIONS</b>			
<b>SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))</b>							
<b>Outfall Location</b>	1.1 Provide information on each of the facility's outfalls in the table below.						
	Outfall Number	Receiving Water Name	Latitude			Longitude	
	1	UT of Barner Branch	30° 26' 57.78" N			87° 46' 34.50" W	
			° ' "			° ' "	
			° ' "			° ' "	
<b>SECTION 2. LINE DRAWING (40 CFR 122.21(g)(2))</b>							
<b>Line Drawing</b>	2.1 Have you attached a line drawing to this application that shows the water flow through your facility with a water balance? (See instructions for drawing requirements. See Exhibit 2C-1 at end of instructions for example.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
<b>SECTION 3. AVERAGE FLOWS AND TREATMENT (40 CFR 122.21(g)(3))</b>							
<b>Average Flows and Treatment</b>	3.1 For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets if necessary.						
	<b>**Outfall Number** 1</b>						
	<b>Operations Contributing to Flow</b>						
	Operation			Average Flow			
	MSW Leachate Generation			0 mgd			
				mgd			
				mgd			
				mgd			
	<b>Treatment Units</b>						
	Description (include size, flow rate through each treatment unit, retention time, etc.)			Code from Table 2C-1		Final Disposal of Solid or Liquid Wastes Other Than by Discharge	
	Leachate collected/processed in on-site WWTP			3-B, 3-G, 1-U, 4-D			

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Average Flows and Treatment Continued	3.1 cont.	<b>**Outfall Number** 1</b>			
		<b>Operations Contributing to Flow</b>			
		<b>Operation</b>	<b>Average Flow</b>		
		Stormwater	0 mgd		
			mgd		
			mgd		
			mgd		
		<b>Treatment Units</b>			
		<b>Description</b> (include size, flow rate through each treatment unit, retention time, etc.)	<b>Code from Table 2C-1</b>	<b>Final Disposal of Solid or Liquid Wastes Other Than by Discharge</b>	
		Tranported via stormwater collection system	1-U, 4-A, 4-D		
		Discharge to surface water			
		<b>**Outfall Number**</b>			
		<b>Operations Contributing to Flow</b>			
		<b>Operation</b>	<b>Average Flow</b>		
			mgd		
			mgd		
			mgd		
			mgd		
		<b>Treatment Units</b>			
		<b>Description</b> (include size, flow rate through each treatment unit, retention time, etc.)	<b>Code from Table 2C-1</b>	<b>Final Disposal of Solid or Liquid Wastes Other Than by Discharge</b>	
System Users	3.2	Are you applying for an NPDES permit to operate a privately owned treatment works? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 4.			
	3.3	Have you attached a list that identifies each user of the treatment works? <input type="checkbox"/> Yes <input type="checkbox"/> No			



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**SECTION 4. INTERMITTENT FLOWS (40 CFR 122.21(g)(4))**

Intermittent Flows	4.1	Except for storm runoff, leaks, or spills, are any discharges described in Sections 1 and 3 intermittent or seasonal? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 5.						
	4.2	Provide information on intermittent or seasonal flows for each applicable outfall. Attach additional pages, if necessary.						
		Outfall Number	Operation (list)	Frequency		Flow Rate		Duration
				Average Days/Week	Average Months/Year	Long-Term Average	Maximum Daily	
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days

**SECTION 5. PRODUCTION (40 CFR 122.21(g)(5))**

Applicable ELGs	5.1	Do any effluent limitation guidelines (ELGs) promulgated by EPA under Section 304 of the CWA apply to your facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.		
	5.2	Provide the following information on applicable ELGs.		
		ELG Category	ELG Subcategory	Regulatory Citation
		Landfill		40 CFR 445
Production-Based Limitations	5.3	Are any of the applicable ELGs expressed in terms of production (or other measure of operation)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 6.		
	5.4	Provide an actual measure of daily production expressed in terms and units of applicable ELGs.		
		Outfall Number	Operation, Product, or Material	Quantity per Day
			N/A	

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**SECTION 6. IMPROVEMENTS (40 CFR 122.21(g)(6))**

Upgrades and Improvements	6.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application?			
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 6.3.			
	6.2	Briefly identify each applicable project in the table below.			
		Brief Identification and Description of Project	Affected Outfalls (list outfall number)	Source(s) of Discharge	Final Compliance Dates Required      Projected
	6.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (optional item)			
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable			

**SECTION 7. EFFLUENT AND INTAKE CHARACTERISTICS (40 CFR 122.21(g)(7))**

Effluent and Intake Characteristics	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.				
	<b>Table A. Conventional and Non-Conventional Pollutants</b>				
	7.1	Are you requesting a waiver from your NPDES permitting authority for one or more of the Table A pollutants for any of your outfalls?			
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.3.			
	7.2	If yes, indicate the applicable outfalls below. Attach waiver request and other required information to the application.			
		Outfall Number _____	Outfall Number _____	Outfall Number _____	
	7.3	Have you completed monitoring for all Table A pollutants at each of your outfalls for which a waiver has not been requested and attached the results to this application package?			
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No; a waiver has been requested from my NPDES permitting authority for all pollutants at all outfalls.			
	<b>Table B. Toxic Metals, Cyanide, Total Phenols, and Organic Toxic Pollutants</b>				
	7.4	Do any of the facility's processes that contribute wastewater fall into one or more of the primary industry categories listed in Exhibit 2C-3? (See end of instructions for exhibit.)			
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.8.				
7.5	Have you checked "Testing Required" for all toxic metals, cyanide, and total phenols in Section 1 of Table B?				
	<input type="checkbox"/> Yes <input type="checkbox"/> No				
7.6	List the applicable primary industry categories and check the boxes indicating the required GC/MS fraction(s) identified in Exhibit 2C-3.				
	Primary Industry Category	Required GC/MS Fraction(s) (Check applicable boxes.)			
		<input type="checkbox"/> Volatile	<input type="checkbox"/> Acid	<input type="checkbox"/> Base/Neutral	<input type="checkbox"/> Pesticide
		<input type="checkbox"/> Volatile	<input type="checkbox"/> Acid	<input type="checkbox"/> Base/Neutral	<input type="checkbox"/> Pesticide
		<input type="checkbox"/> Volatile	<input type="checkbox"/> Acid	<input type="checkbox"/> Base/Neutral	<input type="checkbox"/> Pesticide



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<b>Effluent and Intake Characteristics Continued</b>	7.7	Have you checked "Testing Required" for all required pollutants in Sections 2 through 5 of Table B for each of the GC/MS fractions checked in Item 7.6? <input type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	7.8	Have you checked "Believed Present" or "Believed Absent" for all pollutants listed in Sections 1 through 5 of Table B where testing is not required? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	7.9	Have you provided (1) quantitative data for those Section 1, Table B, pollutants for which you have indicated testing is required or (2) quantitative data or other required information for those Section 1, Table B, pollutants that you have indicated are "Believed Present" in your discharge? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	7.10	Does the applicant qualify for a small business exemption under the criteria specified in the instructions? <input type="checkbox"/> Yes → Note that you qualify at the top of Table B, then SKIP to Item 7.12. <span style="float: right;"><input checked="" type="checkbox"/> No</span>	
	7.11	Have you provided (1) quantitative data for those Sections 2 through 5, Table B, pollutants for which you have determined testing is required or (2) quantitative data or an explanation for those Sections 2 through 5, Table B, pollutants you have indicated are "Believed Present" in your discharge? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	<b>Table C. Certain Conventional and Non-Conventional Pollutants</b>		
	7.12	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed on Table C for all outfalls? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	7.13	Have you completed Table C by providing (1) quantitative data for those pollutants that are limited either directly or indirectly in an ELG and/or (2) quantitative data or an explanation for those pollutants for which you have indicated "Believed Present"? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	<b>Table D. Certain Hazardous Substances and Asbestos</b>		
	7.14	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed in Table D for all outfalls? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	7.15	Have you completed Table D by (1) describing the reasons the applicable pollutants are expected to be discharged and (2) by providing quantitative data, if available? <input checked="" type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>	
	<b>Table E. 2,3,7,8-Tetrachlorodibenzo-p-Dioxin (2,3,7,8-TCDD)</b>		
7.16	Does the facility use or manufacture one or more of the 2,3,7,8-TCDD congeners listed in the instructions, or do you know or have reason to believe that TCDD is or may be present in the effluent? <input type="checkbox"/> Yes → Complete Table E. <span style="float: right;"><input checked="" type="checkbox"/> No → SKIP to Section 8.</span>		
7.17	Have you completed Table E by reporting <i>qualitative</i> data for TCDD? <input type="checkbox"/> Yes <span style="float: right;"><input type="checkbox"/> No</span>		
<b>SECTION 8. USED OR MANUFACTURED TOXICS (40 CFR 122.21(g)(9))</b>			
<b>Used or Manufactured Toxics</b>	8.1	Is any pollutant listed in Table B a substance or a component of a substance used or manufactured at your facility as an intermediate or final product or byproduct? <input type="checkbox"/> Yes <span style="float: right;"><input checked="" type="checkbox"/> No → SKIP to Section 9.</span>	
	8.2	List the pollutants below.	
	1.	4.	7.
	2.	5.	8.
	3.	6.	9.



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**SECTION 9. BIOLOGICAL TOXICITY TESTS (40 CFR 122.21(g)(11))**

Biological Toxicity Tests	9.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made within the last three years on (1) any of your discharges or (2) on a receiving water in relation to your discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 10.		
	9.2	Identify the tests and their purposes below.		
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

**SECTION 10. CONTRACT ANALYSES (40 CFR 122.21(g)(12))**

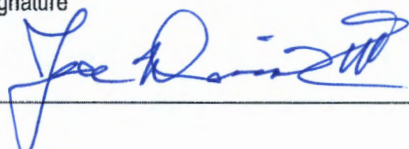
Contract Analyses	10.1	Were any of the analyses reported in Section 7 performed by a contract laboratory or consulting firm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 11.		
	10.2	Provide information for each contract laboratory or consulting firm below.		
			Laboratory Number 1	Laboratory Number 2
	Name of laboratory/firm	Labella Associates		
	Laboratory address	3502 Lauglin Drive, Suite B Mobile, AL 36693		
	Phone number	(205) 985-4874		

**SECTION 11. ADDITIONAL INFORMATION (40 CFR 122.21(g)(13))**

Additional Information	11.1	Has the NPDES permitting authority requested additional information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 12.	
	11.2	List the information requested and attach it to this application.	
	1.	4.	
	2.	5.	

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**SECTION 12. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))**
**Checklist and Certification Statement**

12.1	In Column 1 below, mark the sections of Form 2C that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.		
	Column 1	Column 2	
	<input checked="" type="checkbox"/> Section 1: Outfall Location	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 2: Line Drawing	<input checked="" type="checkbox"/> w/ line drawing <input type="checkbox"/> w/ additional attachments	
	<input checked="" type="checkbox"/> Section 3: Average Flows and Treatment	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ list of each user of privately owned treatment works	
	<input checked="" type="checkbox"/> Section 4: Intermittent Flows	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 5: Production	<input checked="" type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 6: Improvements	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ optional additional sheets describing any additional pollution control plans	
	<input checked="" type="checkbox"/> Section 7: Effluent and Intake Characteristics	<input type="checkbox"/> w/ request for a waiver and supporting information	<input type="checkbox"/> w/ explanation for identical outfalls
		<input type="checkbox"/> w/ small business exemption request	<input type="checkbox"/> w/ other attachments
		<input checked="" type="checkbox"/> w/ Table A	<input checked="" type="checkbox"/> w/ Table B
		<input checked="" type="checkbox"/> w/ Table C	<input checked="" type="checkbox"/> w/ Table D
		<input checked="" type="checkbox"/> w/ Table E	<input type="checkbox"/> w/ analytical results as an attachment
	<input checked="" type="checkbox"/> Section 8: Used or Manufactured Toxics	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 9: Biological Toxicity Tests	<input type="checkbox"/> w/ attachments	
<input checked="" type="checkbox"/> Section 10: Contract Analyses	<input type="checkbox"/> w/ attachments		
<input checked="" type="checkbox"/> Section 11: Additional Information	<input type="checkbox"/> w/ attachments		
<input checked="" type="checkbox"/> Section 12: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments		
12.2	<b>Certification Statement</b>		
	<p><i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i></p>		
	Name (print or type first and last name)	Official title	
	Honorable Joe Davis, III	Chairman-Baldwin County Commission	
Signature	Date signed		
	 <span style="float: right;">9/16/21</span>		

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**TABLE A. CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(iii))<sup>1</sup>**

Pollutant	Waiver Requested (if applicable)	Units (specify)	Effluent				Intake (Optional)		
			Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses	
<input type="checkbox"/> Check here if you have applied to your NPDES permitting authority for a waiver for <i>all</i> of the pollutants listed on this table for the noted outfall.									
1. Biochemical oxygen demand (BOD <sub>5</sub> )	<input type="checkbox"/>	Concentration		33 mg/L					
		Mass							
2. Chemical oxygen demand (COD)	<input type="checkbox"/>	Concentration		360 mg/L					
		Mass							
3. Total organic carbon (TOC)	<input type="checkbox"/>	Concentration		Not Required					
		Mass							
4. Total suspended solids (TSS)	<input type="checkbox"/>	Concentration		150 mg/L					
		Mass							
5. Ammonia (as N)	<input type="checkbox"/>	Concentration		Not Detected					
		Mass							
6. Flow	<input type="checkbox"/>	Rate		0					
7. Temperature	<input type="checkbox"/>	°C	°C	Not recorded					
	<input type="checkbox"/>	°C	°C	Not recorded					
8. pH	<input type="checkbox"/>	Standard units	S.U.	10.3					
	<input type="checkbox"/>	Standard units	S.U.	10.3					

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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**TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))<sup>1</sup>**

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
<input type="checkbox"/> Check here if you qualify as a small business per the instructions to Form 2C and, therefore, do not need to submit quantitative data for any of the organic toxic pollutants in Sections 2 through 5 of this table. Note, however, that you must still indicate in the appropriate column of this table if you believe any of the pollutants listed are present in your discharge.											
<b>Section 1. Toxic Metals, Cyanide, and Total Phenols</b>											
1.1 Antimony, total (7440-36-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.2 Arsenic, total (7440-38-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.3 Beryllium, total (7440-41-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.4 Cadmium, total (7440-43-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.5 Chromium, total (7440-47-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.6 Copper, total (7440-50-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.7 Lead, total (7439-92-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.8 Mercury, total (7439-97-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.9 Nickel, total (7440-02-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.10 Selenium, total (7782-49-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							
1.11 Silver, total (7440-22-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
				Mass							



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**TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))<sup>1</sup>**

	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
1.12	Thallium, total (7440-28-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
1.13	Zinc, total (7440-66-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
1.14	Cyanide, total (57-12-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
1.15	Phenols, total	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						

**Section 2. Organic Toxic Pollutants (GC/MS Fraction—Volatile Compounds)**

2.1	Acrolein (107-02-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.2	Acrylonitrile (107-13-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.3	Benzene (71-43-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.4	Bromoform (75-25-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.5	Carbon tetrachloride (56-23-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.6	Chlorobenzene (108-90-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.7	Chlorodibromomethane (124-48-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.8	Chloroethane (75-00-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						



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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))<sup>1</sup>

	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
2.9	2-chloroethylvinyl ether (110-75-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.10	Chloroform (67-66-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.11	Dichlorobromomethane (75-27-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.12	1,1-dichloroethane (75-34-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.13	1,2-dichloroethane (107-06-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.14	1,1-dichloroethylene (75-35-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.15	1,2-dichloropropane (78-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.16	1,3-dichloropropylene (542-75-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.17	Ethylbenzene (100-41-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.18	Methyl bromide (74-83-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.19	Methyl chloride (74-87-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.20	Methylene chloride (75-09-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.21	1,1,2,2-tetrachloroethane (79-34-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						

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**TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))<sup>1</sup>**

	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
2.22	Tetrachloroethylene (127-18-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.23	Toluene (108-88-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.24	1,2-trans-dichloroethylene (156-60-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.25	1,1,1-trichloroethane (71-55-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.26	1,1,2-trichloroethane (79-00-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.27	Trichloroethylene (79-01-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
2.28	Vinyl chloride (75-01-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
<b>Section 3. Organic Toxic Pollutants (GC/MS Fraction—Acid Compounds)</b>											
3.1	2-chlorophenol (95-57-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.2	2,4-dichlorophenol (120-83-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.3	2,4-dimethylphenol (105-67-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.4	4,6-dinitro-o-cresol (534-52-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.5	2,4-dinitrophenol (51-28-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						



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	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
3.6	2-nitrophenol (88-75-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.7	4-nitrophenol (100-02-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.8	p-chloro-m-cresol (59-50-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.9	Pentachlorophenol (87-86-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.10	Phenol (108-95-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
3.11	2,4,6-trichlorophenol (88-05-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
<b>Section 4. Organic Toxic Pollutants (GC/MS Fraction—Base/Neutral Compounds)</b>											
4.1	Acenaphthene (83-32-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.2	Acenaphthylene (208-96-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.3	Anthracene (120-12-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.4	Benzidine (92-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.5	Benzo (a) anthracene (56-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.6	Benzo (a) pyrene (50-32-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						

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	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
4.7	3,4-benzofluoranthene (205-99-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.8	Benzo (ghi) perylene (191-24-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.9	Benzo (k) fluoranthene (207-08-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.10	Bis (2-chloroethoxy) methane (111-91-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.11	Bis (2-chloroethyl) ether (111-44-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.12	Bis (2-chloroisopropyl) ether (102-80-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.13	Bis (2-ethylhexyl) phthalate (117-81-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.14	4-bromophenyl phenyl ether (101-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.15	Butyl benzyl phthalate (85-68-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.16	2-chloronaphthalene (91-58-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.17	4-chlorophenyl phenyl ether (7005-72-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.18	Chrysene (218-01-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.19	Dibenzo (a,h) anthracene (53-70-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						



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	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.20	1,2-dichlorobenzene (95-50-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.21	1,3-dichlorobenzene (541-73-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.22	1,4-dichlorobenzene (106-46-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.23	3,3-dichlorobenzidine (91-94-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.24	Diethyl phthalate (84-66-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.25	Dimethyl phthalate (131-11-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.26	Di-n-butyl phthalate (84-74-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.27	2,4-dinitrotoluene (121-14-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.28	2,6-dinitrotoluene (606-20-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.29	Di-n-octyl phthalate (117-84-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.30	1,2-Diphenylhydrazine (as azobenzene) (122-66-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.31	Fluoranthene (206-44-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							
4.32	Fluorene (86-73-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
					Mass							



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**TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))<sup>1</sup>**

	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
4.33	Hexachlorobenzene (118-74-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.34	Hexachlorobutadiene (87-68-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.35	Hexachlorocyclopentadiene (77-47-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.36	Hexachloroethane (67-72-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.37	Indeno (1,2,3-cd) pyrene (193-39-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.38	Isophorone (78-59-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.39	Naphthalene (91-20-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.40	Nitrobenzene (98-95-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.41	N-nitrosodimethylamine (62-75-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.42	N-nitrosodi-n-propylamine (621-64-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.43	N-nitrosodiphenylamine (86-30-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.44	Phenanthrene (85-01-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
4.45	Pyrene (129-00-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						

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	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
4.46	1,2,4-trichlorobenzene (120-82-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
<b>Section 5. Organic Toxic Pollutants (GC/MS Fraction—Pesticides)</b>											
5.1	Aldrin (309-00-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.2	$\alpha$ -BHC (319-84-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.3	$\beta$ -BHC (319-85-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.4	$\gamma$ -BHC (58-89-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.5	$\delta$ -BHC (319-86-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.6	Chlordane (57-74-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.7	4,4'-DDT (50-29-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.8	4,4'-DDE (72-55-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.9	4,4'-DDD (72-54-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.10	Dieldrin (60-57-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
5.11	$\alpha$ -endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						



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	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
5.12	β-endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.13	Endosulfan sulfate (1031-07-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.14	Endrin (72-20-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.15	Endrin aldehyde (7421-93-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.16	Heptachlor (76-44-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.17	Heptachlor epoxide (1024-57-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.18	PCB-1242 (53469-21-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.19	PCB-1254 (11097-69-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.20	PCB-1221 (11104-28-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.21	PCB-1232 (11141-16-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.22	PCB-1248 (12672-29-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.23	PCB-1260 (11096-82-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						
5.24	PCB-1016 (12674-11-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						



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	Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)	
			Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses
5.25	Toxaphene (8001-35-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
					Mass						

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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**TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))<sup>1</sup>**

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be <b>present</b> in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for <i>each</i> pollutant.									
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be <b>absent</b> in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for <i>each</i> pollutant.									
1. Bromide (24959-67-9)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
2. Chlorine, total residual	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
3. Color	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
4. Fecal coliform	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
5. Fluoride (16984-48-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
6. Nitrate-nitrite	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
7. Nitrogen, total organic (as N)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
8. Oil and grease	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration		Not Detected				
			Mass						
9. Phosphorus (as P), total (7723-14-0)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
10. Sulfate (as SO <sub>4</sub> ) (14808-79-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
11. Sulfide (as S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						



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**TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))<sup>1</sup>**

	Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
12.	Sulfite (as SO <sub>3</sub> ) (14265-45-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
13.	Surfactants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
14.	Aluminum, total (7429-90-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
15.	Barium, total (7440-39-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
16.	Boron, total (7440-42-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
17.	Cobalt, total (7440-48-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
18.	Iron, total (7439-89-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
19.	Magnesium, total (7439-95-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
20.	Molybdenum, total (7439-98-7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
21.	Manganese, total (7439-96-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
22.	Tin, total (7440-31-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						
23.	Titanium, total (7440-32-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
				Mass						

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**TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))<sup>1</sup>**

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
<b>24. Radioactivity</b>									
Alpha, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
Beta, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
Radium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						
Radium 226, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration						
			Mass						

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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**TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))<sup>1</sup>**

	Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
1.	Asbestos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
2.	Acetaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
3.	Allyl alcohol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
4.	Allyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
5.	Amyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
6.	Aniline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7.	Benzonitrile	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8.	Benzyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
9.	Butyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
10.	Butylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
11.	Captan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
12.	Carbaryl	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
13.	Carbofuran	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
14.	Carbon disulfide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
15.	Chlorpyrifos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
16.	Coumaphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
17.	Cresol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
18.	Crotonaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
19.	Cyclohexane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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**TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))'**

	Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
20.	2,4-D (2,4-dichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
21.	Diazinon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
22.	Dicamba	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
23.	Dichlobenil	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
24.	Dichlone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
25.	2,2-dichloropropionic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
26.	Dichlorvos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
27.	Diethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
28.	Dimethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
29.	Dinitrobenzene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
30.	Diquat	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
31.	Disulfoton	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
32.	Diuron	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
33.	Epichlorohydrin	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
34.	Ethion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
35.	Ethylene diamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
36.	Ethylene dibromide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
37.	Formaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
38.	Furfural	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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**TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))<sup>1</sup>**

	Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
39.	Guthion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
40.	Isoprene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
41.	Isopropanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
42.	Kelthane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
43.	Kepone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
44.	Malathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
45.	Mercaptodimethur	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
46.	Methoxychlor	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
47.	Methyl mercaptan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
48.	Methyl methacrylate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
49.	Methyl parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
50.	Mevinphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
51.	Mexacarbate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
52.	Monoethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
53.	Monomethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
54.	Naled	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
55.	Naphthenic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
56.	Nitrotoluene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
57.	Parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		



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**TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))<sup>1</sup>**

	Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
58.	Phenolsulfonate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
59.	Phosgene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
60.	Propargite	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
61.	Propylene oxide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
62.	Pyrethrins	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
63.	Quinoline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
64.	Resorcinol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
65.	Strontium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
66.	Strychnine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
67.	Styrene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
68.	2,4,5-T (2,4,5-trichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
69.	TDE (tetrachlorodiphenyl ethane)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
70.	2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
71.	Trichlorofon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
72.	Triethanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
73.	Triethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
74.	Trimethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
75.	Uranium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
76.	Vanadium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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**TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))<sup>1</sup>**

	Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
		Believed Present	Believed Absent		
77.	Vinyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
78.	Xylene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
79.	Xylenol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
80.	Zirconium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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**TABLE E. 2,3,7,8 TETRACHLORODIBENZO P DIOXIN (2,3,7,8 TCDD) (40 CFR 122.21(g)(7)(viii))**

Pollutant	TCDD Congeners Used or Manufactured	Presence or Absence (check one)		Results of Screening Procedure
		Believed Present	Believed Absent	
2,3,7,8-TCDD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

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Form 2F NPDES		<b>U.S Environmental Protection Agency</b> <b>Application for NPDES Permit to Discharge Wastewater</b> <b>STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY</b>
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**SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))**

Outfall Location	1.1	Provide information on each of the facility's outfalls in the table below			
		Outfall Number	Receiving Water Name	Latitude	Longitude
		1	UT to Barner Branch	30° 26' 57.78" N	87° 46' 34.50" W
				° ' "	° ' "
				° ' "	° ' "
				° ' "	° ' "
				° ' "	° ' "
				° ' "	° ' "

**SECTION 2. IMPROVEMENTS (40 CFR 122.21(g)(6))**

Improvements	2.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application?				
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 3.				
	2.2	Briefly identify each applicable project in the table below.				
		Brief Identification and Description of Project	Affected Outfalls (list outfall numbers)	Source(s) of Discharge	Final Compliance Dates	
					Required	Projected
2.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (Optional Item)					
	<input type="checkbox"/> Yes <input type="checkbox"/> No					

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### SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

Site Drainage Map	3.1	Have you attached a site drainage map containing all required information to this application? (See instructions for specific guidance.)
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

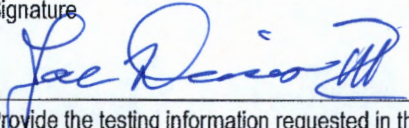
### SECTION 4. POLLUTANT SOURCES (40 CFR 122.26(c)(1)(i)(B))

Pollutant Sources	4.1	Provide information on the facility's pollutant sources in the table below.			
		Outfall Number	Impervious Surface Area (within a mile radius of the facility)	Total Surface Area Drained (within a mile radius of the facility)	
		1	6.87	specify units acres	584 specify units acres
				specify units	specify units
				specify units	specify units
				specify units	specify units
				specify units	specify units
				specify units	specify units
				specify units	specify units
		4.2	Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.)  Facility operations primarily consist of municipal solid waste and construction/demolition waste landfilling. Leachate generated and collected in the MSW portion of the facility is treated through a three-stage aeration pond, two-stage constructed wetlands, and a holding pond prior to discharge into the stormwater control system. Leachate treatment and discharge are regulated under UIC Permit ALSI9902554. Site operations typically in contact with stormwater are limited to the "working face" for both the MSW Landfill Unit and the construction/demolition disposal area. Inactive areas of both C/D and MSW waste disposal receive an intermediate earthen cap to reduce the potential for contact with stormwater. Any stormwater falling in the open portions of the MSW disposal area collected in the leachate collection system and are treated through the facility's wastewater treatment facility.		
	4.3	Provide the location and a description of existing structural and non-structural control measures to reduce pollutants in stormwater runoff. (See instructions for specific guidance.)			
		Stormwater Treatment			
		Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)	
		1	Onsite WWTP	3-B,3-G,1-U	
		1	Stormwater collection system	1-U,4-A,4-D	



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**SECTION 5. NON STORMWATER DISCHARGES (40 CFR 122.26(c)(1)(i)(C))**

Non-Stormwater Discharges	5.1	I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-stormwater discharges. Moreover, I certify that the outfalls identified as having non-stormwater discharges are described in either an accompanying NPDES Form 2C, 2D, or 2E application.			
		Name (print or type first and last name) Honorable Joe Davis, III		Official title Chairman-Baldwin County Commission	
		Signature 		Date signed 9/16/21	
	5.2	Provide the testing information requested in the table below.			
		Outfall Number	Description of Testing Method Used	Date(s) of Testing	Onsite Drainage Points Directly Observed During Test

**SECTION 6. SIGNIFICANT LEAKS OR SPILLS (40 CFR 122.26(c)(1)(i)(D))**

Significant Leaks or Spills	6.1	Describe any significant leaks or spills of toxic or hazardous pollutants in the last three years. None

**SECTION 7. DISCHARGE INFORMATION (40 CFR 122.26(c)(1)(i)(E))**

Discharge Information	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.	
	7.1	Is this a new source or new discharge?  <input type="checkbox"/> Yes → See instructions regarding submission of estimated data. <input checked="" type="checkbox"/> No → See instructions regarding submission of actual data.
	Tables A, B, C, and D	
	7.2	Have you completed Table A for each outfall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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Discharge Information Continued	7.3	Is the facility subject to an effluent limitation guideline (ELG) or effluent limitations in an NPDES permit for its process wastewater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.5.
	7.4	Have you completed Table B by providing quantitative data for those pollutants that are (1) limited either directly or indirectly in an ELG and/or (2) subject to effluent limitations in an NPDES permit for the facility's process wastewater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	7.5	Do you know or have reason to believe any pollutants in Exhibit 2F-2 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.7.
	7.6	Have you listed all pollutants in Exhibit 2F-2 that you know or have reason to believe are present in the discharge and provided quantitative data or an explanation for those pollutants in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.7	Do you qualify for a small business exemption under the criteria specified in the Instructions? <input type="checkbox"/> Yes → SKIP to Item 7.18. <input checked="" type="checkbox"/> No
	7.8	Do you know or have reason to believe any pollutants in Exhibit 2F-3 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.10.
	7.9	Have you listed all pollutants in Exhibit 2F-3 that you know or have reason to believe are present in the discharge in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.10	Do you expect any of the pollutants in Exhibit 2F-3 to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.12.
	7.11	Have you provided quantitative data in Table C for those pollutants in Exhibit 2F-3 that you expect to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.12	Do you expect acrolein, acrylonitrile, 2,4-dinitrophenol, or 2-methyl-4,6-dinitrophenol to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.14.
	7.13	Have you provided quantitative data in Table C for the pollutants identified in Item 7.12 that you expect to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.14	Have you provided quantitative data or an explanation in Table C for pollutants you expect to be present in the discharge at concentrations less than 10 ppb (or less than 100 ppb for the pollutants identified in Item 7.12)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	7.15	Do you know or have reason to believe any pollutants in Exhibit 2F-4 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.17.
	7.16	Have you listed pollutants in Exhibit 2F-4 that you know or believe to be present in the discharge and provided an explanation in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No
	7.17	Have you provided information for the storm event(s) sampled in Table D? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Discharge Information Continued	<b>Used or Manufactured Toxics</b>		
	7.18	Is any pollutant listed on Exhibits 2F-2 through 2F-4 a substance or a component of a substance used or manufactured as an intermediate or final product or byproduct?	
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 8.	
	7.19	List the pollutants below, including TCDD if applicable.	
	1.	4.	7.
	2.	5.	8.
	3.	6.	9.

**SECTION 8. BIOLOGICAL TOXICITY TESTING DATA (40 CFR 122.21(g)(11))**

Biological Toxicity Testing Data	8.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last three years?		
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 9.		
	8.2	Identify the tests and their purposes below.		
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

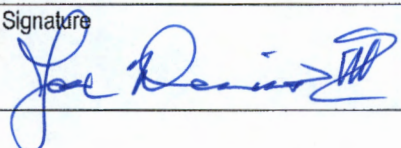
**SECTION 9. CONTRACT ANALYSIS INFORMATION (40 CFR 122.21(g)(12))**

Contract Analysis Information	9.1	Were any of the analyses reported in Section 7 (on Tables A through C) performed by a contract laboratory or consulting firm?		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 10.		
	9.2	Provide information for each contract laboratory or consulting firm below.		
		Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
	Name of laboratory/firm	Labella Associates (formerly Highland Technical Services, Inc.)		
	Laboratory address	3502 Laughlin Drive, Suite B Mobile, AL 36693		
Phone number	(205) 985-4874			
Pollutant(s) analyzed	E.coli, Oil and Grease, Total Dissolved Solids, Total Suspended Solids, pH, BOD5, Ammonia Nitrogen, COD, Total Nitrogen, Total Kjeldahl Nitrogen, Phosphorus			



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# SECTION 10. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	10.1	In Column 1 below, mark the sections of Form 2F that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.	
		Column 1	Column 2
		<input checked="" type="checkbox"/> Section 1	<input type="checkbox"/> w/ attachments (e.g., responses for additional outfalls)
		<input checked="" type="checkbox"/> Section 2	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 3	<input type="checkbox"/> w/ site drainage map
		<input checked="" type="checkbox"/> Section 4	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 5	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 6	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 7	<input checked="" type="checkbox"/> Table A <input type="checkbox"/> w/ small business exemption request <input checked="" type="checkbox"/> Table B <input checked="" type="checkbox"/> w/ analytical results as an attachment <input type="checkbox"/> Table C <input checked="" type="checkbox"/> Table D
		<input checked="" type="checkbox"/> Section 8	<input type="checkbox"/> w/attachments
		<input checked="" type="checkbox"/> Section 9	<input type="checkbox"/> w/attachments (e.g., responses for additional contact laboratories or firms)
		<input checked="" type="checkbox"/> Section 10	<input type="checkbox"/>
	10.2	<b>Certification Statement</b> <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
	Name (print or type first and last name)	Official title	
	Honorable Joe Davis, III	Chairman-Baldwin County Commission	
	Signature 	Date signed 9/14/21	

EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Outfall Number 1
----------------------------------	----------------------------------	---	---------------------

Form Approved 03/05/19  
OMB No. 2040-0004

**TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))<sup>1</sup>**

You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1. Oil and grease	Not Detected				1	
2. Biochemical oxygen demand (BOD <sub>5</sub> )	33 mg/L				1	
3. Chemical oxygen demand (COD)	360 mg/L				1	
4. Total suspended solids (TSS)	150				1	
5. Total phosphorus	0.61				1	
6. Total Kjeldahl nitrogen (TKN)	8.6				1	
7. Total nitrogen (as N)	8.6				1	
8.	pH (minimum)				1	
	pH (maximum)				1	

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility Name Magnolia Sanitary Landfill	Outfall Number 1
----------------------------------	----------------------------------	---	---------------------

Form Approved 03/05/19  
OMB No. 2040-0004

**TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(A))<sup>1</sup>**

List each pollutant that is limited in an effluent limitation guideline (ELG) that the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
Biochemical Oxygen Demand (BOD5)	33 mg/L				1	
pH	10.33				1	
Total Suspended Solids	150				1	
Total Ammonia Nitrogen	Not detected				1	
Total Zinc	Not detected				1	
Phenol, Single Compound	Not detected				1	
P-Cresol	Not detected				1	
Total Benzoic Acids	Not detected				1	
Alpha - Terpineol	Not detected				1	

<sup>1</sup> Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number N/A	NPDES Permit Number AL0069345	Facility name Magnolia Sanitary Landfill	Outfall Number 1
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Form Approved 03/05/19  
OMB No. 2040-0004

**TABLE D. STORM EVENT INFORMATION (40 CFR 122.26(c)(1)(i)(E)(6))**

Provide data for the storm event(s) that resulted in the maximum daily discharges for the flow-weighted composite sample.

Date of Storm Event	Duration of Storm Event (in hours)	Total Rainfall During Storm Event (in inches)	Number of Hours Between Beginning of Storm Measured and End of Previous Measurable Rain Event	Maximum Flow Rate During Rain Event (in gpm or specify units)	Total Flow from Rain Event (in gallons or specify units)
08/18/2021	2	0.25	36	0	0

Provide a description of the method of flow measurement or estimate.





Pace Analytical Services, LLC  
4320 Midmost Dr  
Mobile, AL 36609  
251-344-9106

September 03, 2021

RECEIVED  
OCT 08 2021  
INDUSTRIAL SECTION

Joe Bookout  
Highland Technical Services, Inc.  
3502 Laughlin Drive  
Suite B  
Mobile, AL 36693

RE: Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

Dear Joe Bookout:

Enclosed are the analytical results for sample(s) received by the laboratory on August 19, 2021. The results relate only to the samples included in this report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Mobile Labs
- Pace Analytical Services - New Orleans

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Mary Kathryn Brenner  
marykathryn.brenner@pacelabs.com  
251-344-9106  
Project Manager

Enclosures

cc: Lori K. Norton, Highland Technical Services, Inc.

## REPORT OF LABORATORY ANALYSIS

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Pace Analytical Services, LLC  
4320 Midmost Dr  
Mobile, AL 36609  
251-344-9106

## CERTIFICATIONS

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

### Pace Analytical Services New Orleans

Florida Department of Health (NELAC): E87595  
Illinois Environmental Protection Agency: 0025721  
Kansas Department of Health and Environment (NELAC):  
E-10266  
Louisiana Dept. of Environmental Quality (NELAC/LELAP):  
02006

Texas Commission on Env. Quality (NELAC):  
T104704405-09-TX  
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-  
00119

### Pace Analytical Services Mobile

4320 Midmost Drive, Mobile, AL 36609

Alabama Certification #: 40810

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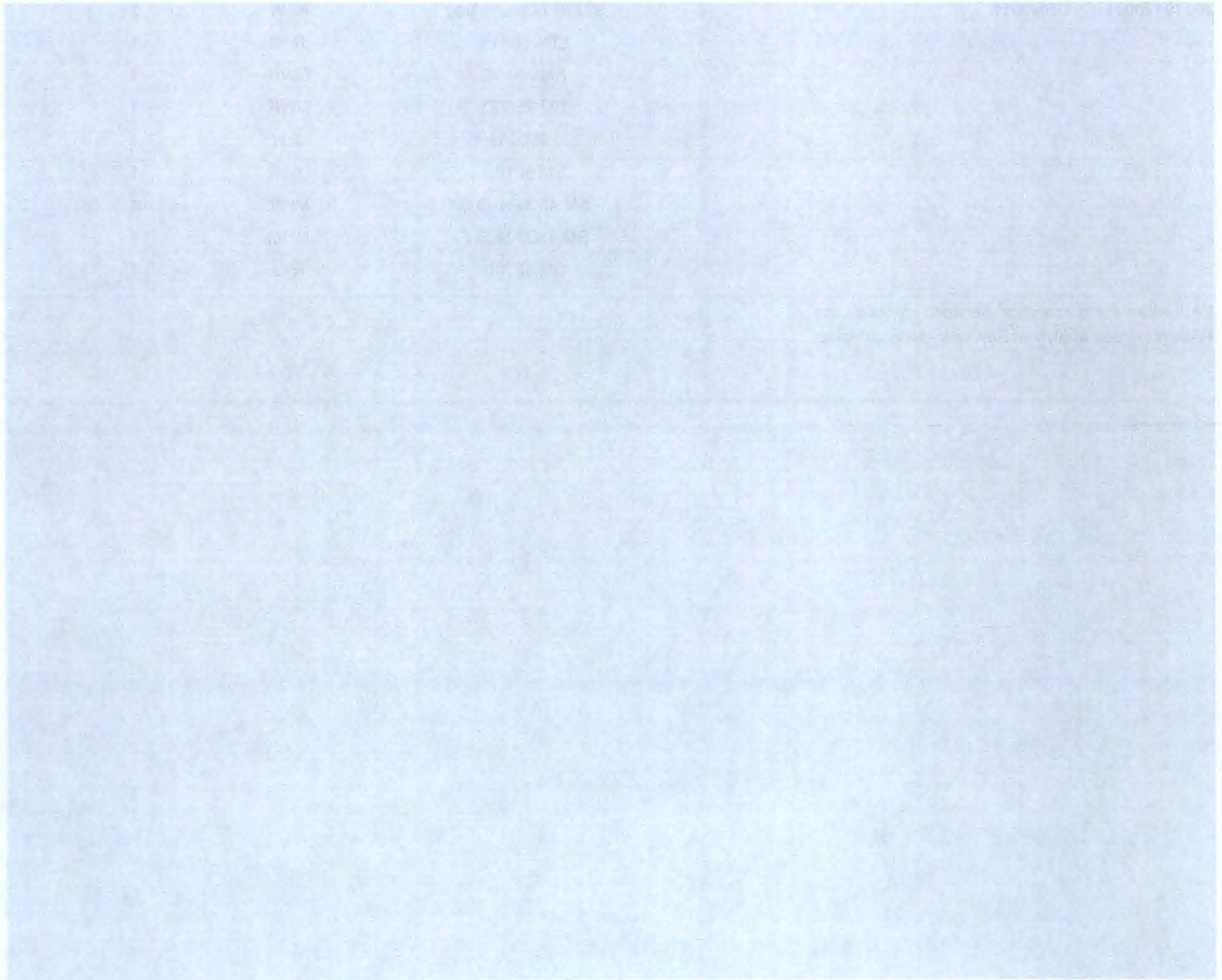




## SAMPLE SUMMARY

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

Lab ID	Sample ID	Matrix	Date Collected	Date Received
20218120001	DSN0011	Water	08/19/21 12:15	08/19/21 13:40



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## SAMPLE ANALYTE COUNT

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

Lab ID	Sample ID	Method	Analysts	Analytes Reported
20218120001	DSN0011	9223B / Quanti-Tray	KAW	2
		EPA 1664B	TMO	1
		SM 2540C	DWR	1
		SM 2540D	DWR	1
		SM 4500-H+B	JLH	1
		SM 5210B	DWR	1
		SM 4500-NH3 G	MHM	1
		SM 4500-NO3 F	MHM	1
		SM 5220D	RVJ	1

PASI-MO = Pace Analytical Services - Mobile Labs  
PASI-N = Pace Analytical Services - New Orleans

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## ANALYTICAL RESULTS

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

Sample: DSN0011		Lab ID: 20218120001	Collected: 08/19/21 12:15	Received: 08/19/21 13:40	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
<b>MOB Colilert/QT MPN</b>		Analytical Method: 9223B / Quanti-Tray Preparation Method: 9223B / Quanti-Tray Pace Analytical Services - Mobile Labs						
Total Coliforms	24200	MPN/100mL	10.0	10	08/19/21 15:45	08/20/21 15:43		N2
E.coli, Bacteria	ND	MPN/100mL	10.0	10	08/19/21 15:45	08/20/21 15:43		N2
<b>HEM, Oil and Grease</b>		Analytical Method: EPA 1664B Pace Analytical Services - New Orleans						
Oil and Grease	ND	mg/L	5.0	1		08/25/21 10:10		
<b>2540C Total Dissolved Solids</b>		Analytical Method: SM 2540C Pace Analytical Services - New Orleans						
Total Dissolved Solids	1180	mg/L	10.0	1		08/25/21 10:41		
<b>2540D Total Suspended Solids</b>		Analytical Method: SM 2540D Pace Analytical Services - New Orleans						
Total Suspended Solids	150	mg/L	20.0	1		08/24/21 09:32		
<b>4500H+ pH, Electrometric</b>		Analytical Method: SM 4500-H+B Pace Analytical Services - New Orleans						
pH at 25 Degrees C	10.3	Std. Units	0.010	1		08/23/21 13:53		H3,H6
<b>5210B BOD, 5 day</b>		Analytical Method: SM 5210B Preparation Method: SM 5210B Pace Analytical Services - New Orleans						
BOD, 5 day	33.0	mg/L	30.0	30	08/20/21 16:30	08/25/21 14:02		L2
<b>4500 Ammonia Water</b>		Analytical Method: SM 4500-NH3 G Pace Analytical Services - New Orleans						
Nitrogen, Ammonia	ND	mg/L	0.10	1		08/24/21 14:47	7664-41-7	
<b>4500NO3-F, NO3-NO2</b>		Analytical Method: SM 4500-NO3 F Pace Analytical Services - New Orleans						
Nitrogen, NO2 plus NO3	ND	mg/L	0.050	1		08/25/21 13:38		
<b>5220D COD</b>		Analytical Method: SM 5220D Preparation Method: SM 5220D Pace Analytical Services - New Orleans						
Chemical Oxygen Demand	360	mg/L	10.0	1	08/24/21 09:00	08/24/21 12:15		

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## QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch:	234685	Analysis Method:	9223B / Quanti-Tray
QC Batch Method:	9223B / Quanti-Tray	Analysis Description:	MOB Colilert/QT MPN
		Laboratory:	Pace Analytical Services - Mobile Labs

Associated Lab Samples: 20218120001

METHOD BLANK: 1105119 Matrix: Water

Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
E.coli, Bacteria	MPN/100mL	ND	1.0	08/20/21 15:43	N2
Total Coliforms	MPN/100mL	ND	1.0	08/20/21 15:43	N2

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### QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch:	234970	Analysis Method:	EPA 1664B
QC Batch Method:	EPA 1664B	Analysis Description:	1664 HEM, Oil and Grease
Associated Lab Samples:	20218120001	Laboratory:	Pace Analytical Services - New Orleans

METHOD BLANK: 1106413  
Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Oil and Grease	mg/L	ND	5.0	08/25/21 10:10	

LABORATORY CONTROL SAMPLE: 1106414

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Oil and Grease	mg/L	40	32.8	82	78-114	

MATRIX SPIKE SAMPLE: 1106415

Parameter	Units	20217827001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Oil and Grease	mg/L	ND	40	33.1	78	78-114	

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## QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch: 234940 Analysis Method: SM 2540C  
QC Batch Method: SM 2540C Analysis Description: 2540C Total Dissolved Solids  
Laboratory: Pace Analytical Services - New Orleans

Associated Lab Samples: 20218120001

METHOD BLANK: 1106287 Matrix: Water

Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Total Dissolved Solids	mg/L	ND	10.0	08/25/21 10:40	

LABORATORY CONTROL SAMPLE: 1106288

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Dissolved Solids	mg/L	100	116	116	80-120	

SAMPLE DUPLICATE: 1106289

Parameter	Units	20218004005 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Dissolved Solids	mg/L	175	175	0	20	

SAMPLE DUPLICATE: 1106290

Parameter	Units	20218120001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Dissolved Solids	mg/L	1180	1110	6	20	

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## QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch:	234804	Analysis Method:	SM 2540D
QC Batch Method:	SM 2540D	Analysis Description:	2540D Total Suspended Solids
		Laboratory:	Pace Analytical Services - New Orleans

Associated Lab Samples: 20218120001

METHOD BLANK: 1105611 Matrix: Water

Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Total Suspended Solids	mg/L	ND	1.0	08/24/21 09:31	

LABORATORY CONTROL SAMPLE: 1105612

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Suspended Solids	mg/L	100	102	102	80-120	

SAMPLE DUPLICATE: 1105613

Parameter	Units	20218104005 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	110	107	3	20	

SAMPLE DUPLICATE: 1105614

Parameter	Units	20218133001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	54.0	52.0	4	20	

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### QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011

Pace Project No.: 20218120

QC Batch:	234714	Analysis Method:	SM 4500-H+B
QC Batch Method:	SM 4500-H+B	Analysis Description:	4500H+B pH
		Laboratory:	Pace Analytical Services - New Orleans

Associated Lab Samples: 20218120001

LABORATORY CONTROL SAMPLE: 1105228

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
pH at 25 Degrees C	Std. Units	6	6.0	100	97-103	H6

SAMPLE DUPLICATE: 1105229

Parameter	Units	20217822001 Result	Dup Result	RPD	Max RPD	Qualifiers
pH at 25 Degrees C	Std. Units	7.0	7.1	1	20	H3,H6

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### QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch: 234621	Analysis Method: SM 5210B
QC Batch Method: SM 5210B	Analysis Description: 5210B BOD, 5 day
	Laboratory: Pace Analytical Services - New Orleans

Associated Lab Samples: 20218120001

METHOD BLANK: 1104654 Matrix: Water  
Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
BOD, 5 day	mg/L	ND	0.20	08/25/21 13:09	

LABORATORY CONTROL SAMPLE: 1104656

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
BOD, 5 day	mg/L	198	149	75	85-115	L2

SAMPLE DUPLICATE: 1104657

Parameter	Units	20218259001 Result	Dup Result	RPD	Max RPD	Qualifiers
BOD, 5 day	mg/L	ND	ND		20	

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## QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch: 234824 Analysis Method: SM 4500-NH3 G  
QC Batch Method: SM 4500-NH3 G Analysis Description: 4500 Ammonia  
Laboratory: Pace Analytical Services - New Orleans

Associated Lab Samples: 20218120001

METHOD BLANK: 1105686 Matrix: Water

Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Nitrogen, Ammonia	mg/L	ND	0.10	08/24/21 14:33	

LABORATORY CONTROL SAMPLE: 1105687

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Nitrogen, Ammonia	mg/L	5	4.8	95	90-110	

MATRIX SPIKE SAMPLE: 1105820

Parameter	Units	20218067002 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Nitrogen, Ammonia	mg/L	1.6	5	6.1	90	75-125	

SAMPLE DUPLICATE: 1105819

Parameter	Units	20218067002 Result	Dup Result	RPD	Max RPD	Qualifiers
Nitrogen, Ammonia	mg/L	1.6	1.6	1	20	

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### QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch: 234960	Analysis Method: SM 4500-NO3 F
QC Batch Method: SM 4500-NO3 F	Analysis Description: SM4500NO3-F, Nitrate, Preserved
Associated Lab Samples: 20218120001	Laboratory: Pace Analytical Services - New Orleans

METHOD BLANK: 1106376 Matrix: Water  
Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	ND	0.050	08/25/21 13:16	

LABORATORY CONTROL SAMPLE: 1106377

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	19.9	20.9	105	90-110	

MATRIX SPIKE SAMPLE: 1106379

Parameter	Units	20217680002 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	0.23	1	1.2	94	80-120	

SAMPLE DUPLICATE: 1106378

Parameter	Units	20217680002 Result	Dup Result	RPD	Max RPD	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	0.23	0.22	2	20	

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## QUALITY CONTROL DATA

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

QC Batch: 234795 Analysis Method: SM 5220D  
QC Batch Method: SM 5220D Analysis Description: 5220D COD  
Laboratory: Pace Analytical Services - New Orleans

Associated Lab Samples: 20218120001

METHOD BLANK: 1105584

Matrix: Water

Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Chemical Oxygen Demand	mg/L	ND	10.0	08/24/21 12:12	

METHOD BLANK: 1105586

Matrix: Water

Associated Lab Samples: 20218120001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Chemical Oxygen Demand	mg/L	ND	10.0	08/24/21 12:18	

LABORATORY CONTROL SAMPLE: 1105585

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Chemical Oxygen Demand	mg/L	100	105	105	90-110	

LABORATORY CONTROL SAMPLE: 1105587

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Chemical Oxygen Demand	mg/L	100	101	101	90-110	

MATRIX SPIKE SAMPLE: 1105589

Parameter	Units	20218202001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Chemical Oxygen Demand	mg/L	117	100	208	91	75-125	

SAMPLE DUPLICATE: 1105588

Parameter	Units	20218202001 Result	Dup Result	RPD	Max RPD	Qualifiers
Chemical Oxygen Demand	mg/L	117	116	1	20	

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## QUALIFIERS

Project: Magnolia LF SW- DSN0011  
Pace Project No.: 20218120

### DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

### ANALYTE QUALIFIERS

- |    |   |
|----|---|
| H3 | Sample was received or analysis requested beyond the recognized method holding time.  |
| H6 | Analysis initiated outside of the 15 minute EPA required holding time.  |
| L2 | Analyte recovery in the laboratory control sample (LCS) was below QC limits. Results for this analyte in associated samples may be biased low.  |
| N2 | The lab does not hold NELAC/TNI accreditation for this parameter but other accreditations/certifications may apply. A complete list of accreditations/certifications is available upon request. |

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### QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: Magnolia LF SW- DSN0011

Pace Project No.: 20218120

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
20218120001	DSN0011	9223B / Quanti-Tray	234685	9223B / Quanti-Tray	234686
20218120001	DSN0011	EPA 1664B	234970		
20218120001	DSN0011	SM 2540C	234940		
20218120001	DSN0011	SM 2540D	234804		
20218120001	DSN0011	SM 4500-H+B	234714		
20218120001	DSN0011	SM 5210B	234621	SM 5210B	234988
20218120001	DSN0011	SM 4500-NH3 G	234824		
20218120001	DSN0011	SM 4500-NO3 F	234960		
20218120001	DSN0011	SM 5220D	234795	SM 5220D	234844

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SAMPLER NAME AND SIGNATURE PRINT Name of SAMPLER: <i>Robert R. Bunker</i> SIGNATURE of SAMPLER: <i>[Signature]</i>		DATE Signed: <i>8/13/21</i>	TEMP in C Received on ice (Y/N) Custody Sealed Cooler (Y/N) Samples intact (Y/N)
--	--	--------------------------------	--





# Sample Condition Upon Receipt

4320 Midmost Dr Mobile, AL  
36609

## WO#: 20218120

PH: MKB Due Date: 08/31/21  
CLIENT: MO-HighlandT

Project #:

Courier: ☐ Pace ☒ Client ☐ FedEx ☐ UPS ☐ Other Tracking #

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐ Yes ☐ No

Thermometer ☒ Therm Fisher IR 001  
Used: ☐ Other:

Type of Ice: ☒ Wet ☐ Blue ☐ None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining  
contents: MAS 8/19/21

Temp must be measured from temperature blank when present

Comments:

Temperature Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	1
Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2
Chain of Custody Complete:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4
Sampler Name on COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5
Short Hold Time Analyses (<72 hr):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	6
Rush Turn Around Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8
Sufficient Volume:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10
Filtered vol. Rec. for Diss. tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	15
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16
Trip Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	17

Client Notification/Resolution:

Person Contacted: Date/Time:

Comments/ Resolution:





Pace Analytical Services, LLC  
4320 Midmost Dr  
Mobile, AL 36609  
251-344-9106

September 10, 2021

RECEIVED

OCT 08 2021

INDUSTRIAL SECTION

Joe Bookout  
Highland Technical Services, Inc.  
3502 Laughlin Drive  
Suite B  
Mobile, AL 36693

RE: Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

Dear Joe Bookout:

Enclosed are the analytical results for sample(s) received by the laboratory on September 03, 2021. The results relate only to the samples included in this report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:  
• Pace Analytical Services - Kansas City

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Mary Kathryn Brenner  
marykathryn.brenner@pacelabs.com  
251-344-9106  
Project Manager

Enclosures

cc: Lori K. Norton, Highland Technical Services, Inc.

## REPORT OF LABORATORY ANALYSIS

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**Pace Analytical Services, LLC**  
4320 Midmost Dr  
Mobile, AL 36609  
251-344-9106

## CERTIFICATIONS

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

### Pace Analytical Services Kansas

9608 Loiret Boulevard, Lenexa, KS 66219  
Missouri Inorganic Drinking Water Certification #: 10090  
Arkansas Drinking Water  
Arkansas Certification #: 20-020-0  
Arkansas Drinking Water  
Illinois Certification #: 2000302021-3  
Iowa Certification #: 118  
Kansas/NELAP Certification #: E-10116  
Louisiana Certification #: 03055

Nevada Certification #: KS000212020-2  
Oklahoma Certification #: 9205/9935  
Florida: Cert E871149 SEKS WET  
Texas Certification #: T104704407-19-12  
Utah Certification #: KS000212019-9  
Illinois Certification #: 004592  
Kansas Field Laboratory Accreditation: # E-92587  
Missouri SEKS Micro Certification: 10070

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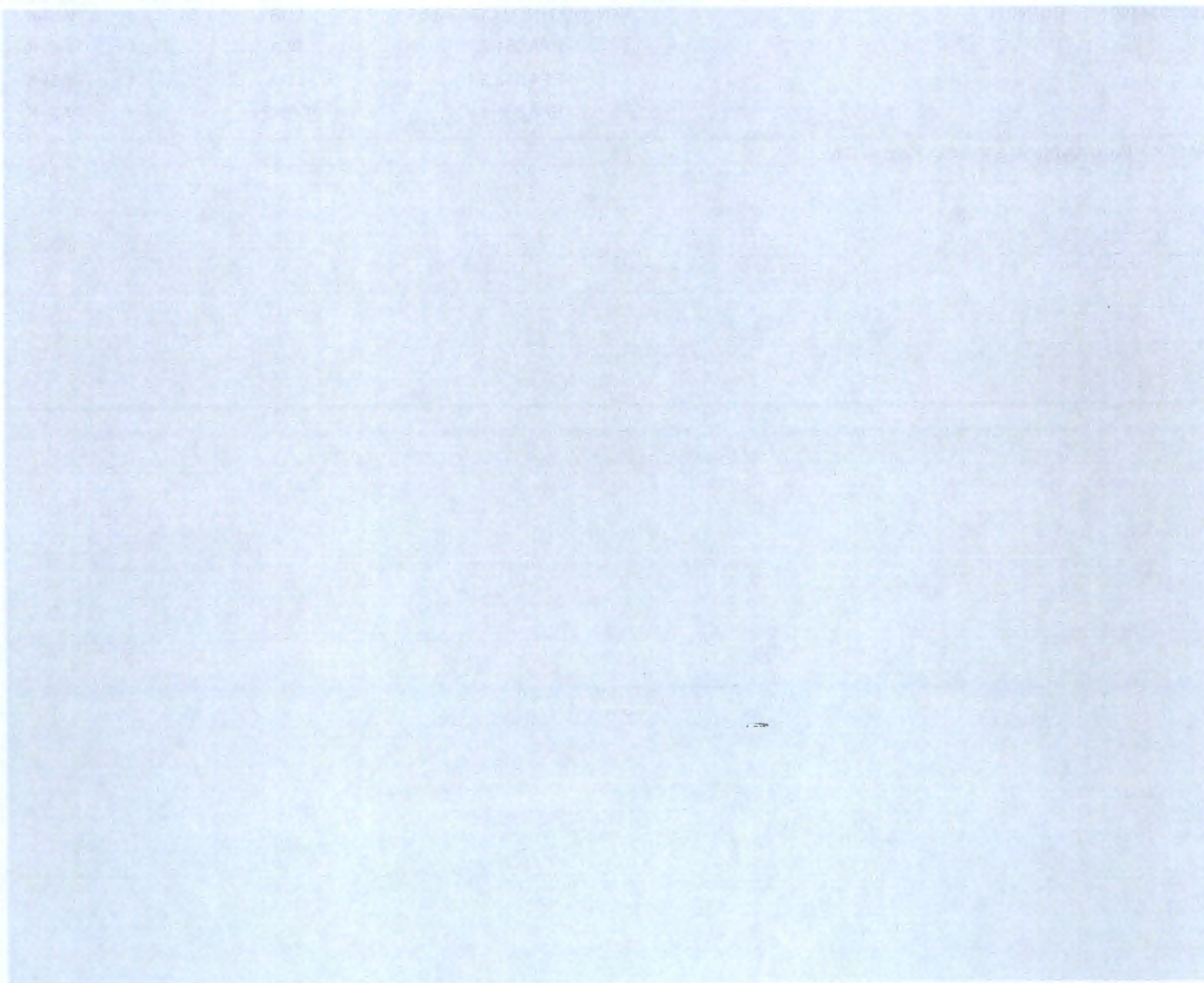




## SAMPLE SUMMARY

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

Lab ID	Sample ID	Matrix	Date Collected	Date Received
20219348001	DSN0011	Water	09/03/21 14:35	09/03/21 15:53



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### SAMPLE ANALYTE COUNT

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
20219348001	DSN0011	TKN+NO3+NO2 Calculation	LDB	1	PASI-K
		EPA 351.2	BLA	1	PASI-K
		EPA 353.2	LDB	1	PASI-K
		EPA 365.4	CRN2	1	PASI-K

PASI-K = Pace Analytical Services - Kansas City

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## ANALYTICAL RESULTS

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

Sample: DSN0011		Lab ID: 20219348001	Collected: 09/03/21 14:35	Received: 09/03/21 15:53	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
Total Nitrogen Calculation		Analytical Method: TKN+NO3+NO2 Calculation Pace Analytical Services - Kansas City						
Nitrogen	8.6	mg/L	0.10	1		09/10/21 15:13	7727-37-9	
351.2 Total Kjeldahl Nitrogen		Analytical Method: EPA 351.2 Preparation Method: EPA 351.2 Pace Analytical Services - Kansas City						
Nitrogen, Kjeldahl, Total	8.6	mg/L	0.50	1	09/10/21 05:13	09/10/21 09:26	7727-37-9	
353.2 Nitrogen, NO2/NO3 pres.		Analytical Method: EPA 353.2 Pace Analytical Services - Kansas City						
Nitrogen, NO2 plus NO3	ND	mg/L	0.10	1		09/10/21 13:21		
365.4 Total Phosphorus		Analytical Method: EPA 365.4 Preparation Method: EPA 365.4 Pace Analytical Services - Kansas City						
Phosphorus	0.61	mg/L	0.10	1	09/10/21 06:56	09/10/21 11:41	7723-14-0	

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### QUALITY CONTROL DATA

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

QC Batch: 742640	Analysis Method: EPA 351.2
QC Batch Method: EPA 351.2	Analysis Description: 351.2 TKN
	Laboratory: Pace Analytical Services - Kansas City

Associated Lab Samples: 20219348001

METHOD BLANK: 2975713 Matrix: Water

Associated Lab Samples: 20219348001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Nitrogen, Kjeldahl, Total	mg/L	ND	0.50	09/10/21 09:24	

LABORATORY CONTROL SAMPLE: 2975714

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Nitrogen, Kjeldahl, Total	mg/L	5	4.7	94	90-110	

MATRIX SPIKE SAMPLE: 2975715

Parameter	Units	20219348001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Nitrogen, Kjeldahl, Total	mg/L	8.6	5	14.1	110	90-110	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

### REPORT OF LABORATORY ANALYSIS

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## QUALITY CONTROL DATA

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

QC Batch: 742636 Analysis Method: EPA 353.2  
QC Batch Method: EPA 353.2 Analysis Description: 353.2 Nitrate + Nitrite, preserved  
Laboratory: Pace Analytical Services - Kansas City  
Associated Lab Samples: 20219348001

METHOD BLANK: 2975699 Matrix: Water  
Associated Lab Samples: 20219348001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	ND	0.10	09/10/21 13:19	

LABORATORY CONTROL SAMPLE: 2975700

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	2	1.9	97	90-110	

MATRIX SPIKE SAMPLE: 2975701

Parameter	Units	20219348001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	ND	2	1.9	96	90-110	

SAMPLE DUPLICATE: 2975702

Parameter	Units	60379076002 Result	Dup Result	RPD	Max RPD	Qualifiers
Nitrogen, NO2 plus NO3	mg/L	ND	ND		20	

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### QUALITY CONTROL DATA

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

QC Batch: 742469 Analysis Method: EPA 365.4  
QC Batch Method: EPA 365.4 Analysis Description: 365.4 Phosphorus  
Laboratory: Pace Analytical Services - Kansas City

Associated Lab Samples: 20219348001

METHOD BLANK: 2975102 Matrix: Water  
Associated Lab Samples: 20219348001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Phosphorus	mg/L	ND	0.10	09/10/21 11:25	

LABORATORY CONTROL SAMPLE: 2975103

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Phosphorus	mg/L	2	2.1	104	90-110	

MATRIX SPIKE SAMPLE: 2975104

Parameter	Units	60379197003 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Phosphorus	mg/L	4.4	1	5.5	103	90-110 E	

SAMPLE DUPLICATE: 2975105

Parameter	Units	60379185002 Result	Dup Result	RPD	Max RPD	Qualifiers
Phosphorus	mg/L	15.1	15.2	1	10	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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## QUALIFIERS

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

### DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate  
1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

### ANALYTE QUALIFIERS

E Analyte concentration exceeded the calibration range. The reported result is estimated.

## REPORT OF LABORATORY ANALYSIS

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### QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: Magnolia LF Stormwater  
Pace Project No.: 20219348

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
20219348001	DSN0011	TKN+NO3+NO2 Calculation	742896		
20219348001	DSN0011	EPA 351.2	742640	EPA 351.2	742642
20219348001	DSN0011	EPA 353.2	742636		
20219348001	DSN0011	EPA 365.4	742469	EPA 365.4	742857

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# **INTEGRATED POLLUTION PREVENTION PLAN**

**For**

**INDUSTRIAL SECTION**

**JUN 2 5 2021**

**RECEIVED**

**Magnolia Landfill  
15140 County Road 49  
Summerdale, Baldwin County, AL 36580**

**Submittal Date:**

**April 2021**

**Submitted by**



**Engineering. Environmental. Answers.**



RECEIVED  
JUN 25 2021  
INDUSTRIAL SECTION

ORIGINAL DATE OF PLAN: FEBRUARY 2015

DATE OF LAST PLAN AMENDMENT/P.E. CERTIFICATION: APRIL 2021

DATE OF LAST PLAN REVIEW: APRIL 2021

DESIGNATED PERSON ACCOUNTABLE FOR SPILL PREVENTION:  
MR. ED FOX

### CERTIFICATION

By means of this certification, I attest that I am familiar with the requirements of provisions of 40 CFR Part 112, that I or my designated agent have visited and examined the facility, that this SPCC Plan has been prepared in accordance with good engineering practices, including consideration of applicable industry standards, and with the requirements of this Part, that procedures for required inspections and testing have been established, and that the Plan is adequate for the facility. This certification does in no way relieve the owner and operator of the facility of his or her duty to fully implement this SPCC Plan in accordance with the requirements of 40 CFR 112.

Engineer: David Dailey, PE

Signature: \_\_\_\_\_

Registration Number: \_\_\_\_\_

State: Alabama

Date: 4/21/2021



## **MAGNOLIA LANDFILL**

### **INTEGRATED POLLUTION PREVENTION PLAN EMERGENCY RESPONSE PERSONNEL AND PHONE NUMBERS**

<b>Contact Person</b>	<b>Title</b>	<b>Office #</b>	<b>Main Phone #</b>
<b>Ed Fox</b>	<b>Deputy Director</b>	<b>(251) 972-6878 (251) 937-0249</b>	<b>(251) 331-0596</b>
<b>Terri Graham</b>	<b>Director</b>	<b>(251) 972-6878 (251) 937-0249</b>	<b>(251) 331-4158</b>
<b>Baldwin County Commission</b>	<b>Owner</b>	<b>(251) 937-0249</b>	<b>N/A</b>

#### **Emergency Contacts**

##### **E911**

**National Response Center  
Alabama Department of Environmental Management  
US EPA Region IV Branch Chief (8:00 am-5:00 pm m-f)  
US EPA Region IV Spill Reporting (24 hr Number)  
Hazardous Materials/Waste Incidents**

##### **911**

**1-800-424-8802  
1-334-271-7700  
1-800-241-1754  
1-404-562-8700  
1-800-843-0699**

#### **Emergency Services**

**Summerdale Fire Department  
Baldwin County Emergency Management Agency  
Summerdale Police Department  
Baldwin County Sheriff's Department  
Alabama Highway Patrol-Mobile Office  
South Baldwin Regional Medical Center**

**911 or 251-989-6723  
911 or 251-972-6807  
911 or 251-989-6446  
911 or 251-937-0202  
251-660-2300  
251-949-3400**

#### **Emergency Spill Cleanup Contractors**

**CDG Engineers & Associates**

**1-888-258-2584**



# INTEGRATED POLLUTION PREVENTION PLAN

For

**Magnolia Landfill  
Summerdale, Baldwin County, Alabama**

<b>Date of Plan/Implementation</b>	<b>February 2015</b>
<b>Last Plan Review Date</b>	<b>April 2021</b>

*\*Note: This plan supersedes all other previous versions issued or once used by the company*

**Designated Person Accountable for Spill Prevention:**

**Ed Fox, Deputy Director**

## **LIMITATION STATEMENT**

The information described within this Integrated Pollution Prevention Plan has been developed from oral/written information provided by the facility representatives, physical observations during field work conducted and CDG Engineers and Associates (CDG) interpretation of applicable regulations. CDG will not be held responsible for conditions or consequences arising from relevant facts that were concealed, withheld, or not fully disclosed by facility or site representatives at the time this plan was prepared. This plan was solely prepared for the Magnolia facility. The facility may release the information to other third parties, who may use and rely upon the information at their discretion. However, any use of or reliance upon the information by a party other than specifically named above shall be solely at the risk of such third party and without legal recourse against CDG, or its respective employees, officers or directors, regardless of whether the action in which recovery of damages is sought is based upon contract, tort, statute, or otherwise. This information shall not be used or relied upon by a party that does not agree to be bound by the above statement.



**INTEGRATED POLLUTION PREVENTION PLAN  
REVIEW DOCUMENTATION PAGE**

In accordance with 40 CFR 112.5 and the provisions of the facility's NPDES (AL0069345), a review and evaluation of this Integrated Pollution Prevention Plan is conducted at least once every five years. As a result of this review and evaluation, the landfill will amend the Plan within six months of the review to include more effective prevention and control technologies if the technology will significantly reduce the likelihood of a spill event from the facility, and the technology has been field proven at the time of the plan review. Implementation of amendments made to this plan will be carried out as soon as possible, but no later than six months following the preparation of any amendment. Any technical amendments to this plan will require certification by a licensed Professional Engineer in accordance with 40 CFR 112.3.

**Documentation of IPP Plan Review and Evaluation**

Review Dates	"I have completed review and evaluation of the Plan for Magnolia Landfill <u>Signature of Reviewer</u>	**Are amendments to the Plan required based on the review/evaluation for this date (YES/NO)
April 2021		

\*\* Amendments required will be documented on the revision history log of this plan to track the revision history of this document.

**MANAGEMENT APPROVAL**

Magnolia Landfill is committed to the prevention of discharges of oil into navigable waters and the environment and maintains high standards for spill prevention control and countermeasures through regular reviews, updating, and implementation of this Integrated Pollution Prevention Plan for the landfill facility.

Authorized Facility Representative: Ed Fox  
Signature: Ed Fox Date: 6/7/21  
Title: Deputy Director

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## **APPENDICES**

APPENDIX A	FIGURES
APPENDIX B	SPILL RELEASE FORM
APPENDIX C	CERTIFICATION FOR THE APPLICABILITY OF THE SUBSTANTIAL HARM CRITERIA CHECKLIST
APPENDIX D	FACILITY AND TANK INSPECTION CHECKLIST
APPENDIX E	SECONDARY CONTAINMENT CALCULATIONS
APPENDIX F	NPDES STORM WATER PERMIT



## **1.0 Purpose of Integrated Pollution Prevention Plan**

The purpose of this Integrated Pollution Prevention Plan (IP3) is to address the Federal and State regulations governing industrial/commercial facilities that have the potential to discharge oil or other pollutants into navigable waters or the municipal storm water system.

Federal regulations require the completion of a SPCC plan to comply with 40 CFR 112.7, EPA Regulations on Oil Pollution Prevention, for any industrial/commercial sites that store, transfer, and/or consume oil above the regulatory threshold and have the potential to discharge that oil into navigable waters of the United States. As per 40 CFR 112.5, whenever there is a change at the facility that affects the potential for discharge of oil into navigable waters, the SPCC sections of this plan shall be amended. If no changes have occurred, then the plan shall be reviewed and recertified every five (5) years and documented on the **Review Documentation Page** at the beginning of this plan on page ii.

A National Pollutant Discharge Elimination System (NPDES) Permit (**provided in Appendix F**) is required of industrial/commercial facilities which discharge storm water associated with industrial activities. Federal Regulation 40 CFR Part 112.26(b)(14) outlines NPDES permitting requirements for storm water discharges. Implementation of the NPDES permitting program for storm water discharges is the responsibility of the Alabama Department of Environmental Management (ADEM). Part IV of the NPDES Permit outlines the requirements for the development of a BMP Plan.

## **2.0 FACILITY OWNER AND OPERATION INFORMATION**

### **2.1 Facility Owner**

Baldwin County Commission  
312 Courthouse Square, Suite #12  
Bay Minette, Alabama 36507

Office: (251) 937-0264

Cell: (251) 580-2582

### **2.2 Name and Location of Facility**

Magnolia Landfill  
15140 County Road 49  
Summerdale, AL 36580

### **2.3 Designated Person Responsible for Spill Prevention**

Mr. Ed Fox – Deputy Director

Office: (251) 972-6878

Cell: (251) 331-0596

### **3.0 FACILITY DESCRIPTION**

#### **3.1 Facility Operations**

Magnolia Landfill is located in a rural area at 15140 County Road 49 in Summerdale, Baldwin County, Alabama. The site is comprised of approximately 584 acres of land and is bordered by residential properties. The site includes multiple office and maintenance buildings, which are utilized in the daily operations of the Magnolia Landfill. The property was formerly used as an Outlying Landing Field (OLF) by the United States Navy.

The facility's petroleum storage areas include a maintenance/lubricant storage facility, household waste sorting facility, and a building utilized to oil storage generated by the public. The facility also includes an animal shelter. Petroleum-based fuel products are stored in five ASTs located at different areas on the property. Petroleum products are received at and transported from the facility via common carrier tank trucks. All fuel transfer operations are manually initiated and monitored by Magnolia Landfill Personnel.

The standard hours of operation for this facility are below.

Monday-Friday, 7:00 AM until 5:00 PM

Saturday, 7:00 AM until 12:00 PM

**Figure 1 (Topographic Map of Summerdale, AL) in Appendix A provides the location of the Magnolia Landfill facility.**

**Figure 2 (Site Property Boundary Map) in Appendix A provides a facility layout at the Magnolia Landfill facility.**

**Figure 3A (AST Locations) in Appendix A provides a layout of the bulk fuel containment areas at the Magnolia Landfill facility.**

**Figure 3B (AST Detail) in Appendix A provides a layout of the bulk fuel containment areas at the Magnolia Landfill facility.**



### 3.2 Facility Bulk Oil Storage

The design and construction of the bulk storage containers are compatible with the characteristics of the product they contain, and with temperature and pressure conditions.

The tank capacities and types of oil products stored in bulk at the Magnolia facility are provided in **Table 1** below.

<b>Table 1</b>			
<b>Bulk Aboveground Storage Tank Information</b>			
<b>Tank Identification Number</b>	<b>Product Stored</b>	<b>Capacity (gallons)</b>	<b>Discharge Prevention Method</b>
1	On-road Diesel Fuel	10,000	Double Walled
2	Unleaded Gasoline	1,000	Double Walled
3	On-road Diesel Fuel	1,000	Double Walled
4	Hydraulic Oil	200	Secondary Containment
5	Motor Oil	200	Secondary Containment

### 3.3 Oil Storage Containers

Magnolia Landfill maintains an inventory of both hydraulic oil, and lubricants in 55-gallon drums, 30-gallon drums, cases, and buckets. These products are stored within the maintenance shop area at the facility as shown in Figure 2. Additionally, one 325-gallon tote containing waste oil is located within the secondary containment. Diesel exhaust fluid is also stored in 330-gallon totes at different areas on the property.

### 3.4 Drainage Pathway and Distance to Navigable Waters

The Latitude and Longitude coordinates for the front gate of the property are 30 26' 36" North, 87 46' 25" West. The property primarily drains to the south and into the storm inlets located south of the office and maintenance buildings illustrated in Figure 2. Drainage from the storm system is ultimately discharged to an unnamed tributary of Barner Branch which is within the Fish River Basin.

#### 4.0 SPILL HISTORY

This section provides documentation of oil product spills/releases experienced during the operational life of the facility. There have been no reported spills related to the operation of the facility at the time of this Plan revision/update.

Table 2 Oil Discharge History		
Description of Discharge	Corrective Actions Taken	Plan for Preventing Recurrence

Any spills that occur during future operations of the facility will be recorded on the form located in **Appendix B** of this plan. Information to be included will consist of:

- Date of release;
- Amount of material released;
- Type of product released;
- Cause of the discharge including a failure analysis of system(s) in which the failure occurred; and
- Preventive measures taken to minimize the possibility of recurrence.

Spills/releases will trigger review, evaluation and update of this Plan if improvements in engineering controls or procedures are identified to reduce the likelihood of recurrence.

#### 5.0 OIL DISCHARGE PREVENTION MEASURES PROVIDED

##### 5.1. Drainage Control and Diversionary Structures

The Magnolia Landfill facility has two bulk storage areas for ASTs. The bulk storage area that adjoins the maintenance building and contains two 200-gallon single wall ASTs and a 325-gallon tote containing waste oil. The ASTs and tote are enclosed by a rectangular shaped concrete block secondary containment. The secondary containment area is covered and protected from precipitation. The area of the secondary containment is approximately 302 square feet at an average

depth of 2.67' providing an overall capacity of 5,040 gallons. After discounting the volume of the structures within the containment area, the bulk storage area will sufficiently contain a release equal to the largest storage tank within the containment system. Calculations of the storage capacity for the bulk storage containment are provided in **Appendix E**.

## **5.2 Loading/Unloading Areas**

All bulk oil products are delivered to or sent out from the Magnolia Landfill facility via common carrier tanker trucks. Magnolia Landfill personnel work with the truck drivers to ensure that all loading/unloading operations are in accordance with applicable DOT regulations. All loading/unloading operations are attended and closely monitored by a designated employee to ensure limited environmental exposure in the event of oil spillage.

ASTs are filled only when a representative from Magnolia Landfill is present at the unloading area. Designated facility personnel will inspect tank product levels prior to authorizing filling operations to ensure adequate capacity is available in the tank receiving product. The following procedure will be followed during product deliveries to the onsite ASTs:

1. Ensure the truck and trailer brakes are applied. Put in place a system to prevent accidental vehicular departure prior to disconnection of transfer lines. This can be a physical barrier like the use of wheel chocks.
2. Apply grounding cable, if available.
3. Check tank level to ensure product will not overfill tank.
4. Ensure correct product is being discharged in the correct tank.
5. Connect product hose, open belly/hand valves and discharge product.
6. After compartment is empty, discharge remaining product from product hose into tank drop. Secure fuel/lubricant drop equipment into proper storage area for transport.
7. Secure tank and check vehicle for any possible leaks or discharges before traveling back through the landfill facility.
8. During Vendor Unloading Procedures the driver of the vehicle is to remain within 50 feet of the vehicle at all times. This is to monitor the entire unloading process and for accidental spills, ruptures or overfills of product.



In the event of a release during petroleum product loading/unloading operations, spill containment material will be located where it is readily available for response.

### **5.3 Product Inventory Control**

Storage tank inventory is routinely monitored to verify available capacity. Prior to bulk fuel deliveries, storage tank levels are measured by landfill personnel to verify the tanks have the available capacity to receive the volume of delivery or transfer.

## **6.0 BEST MANAGEMENT PRACTICES (BMPs)**

### **6.1 Selected Site Specific BMPs**

An assessment was conducted to determine the presence of specific situations, practices, and processes that could result in storm water contamination at the landfill facility. The following table provides the selected best management practices by type and describes how they apply to each of the potential sources of storm water pollutants found at the facility.

<b>Sanitary Landfill (Site Specific BMPs)</b>	
<b>Pollutant Source</b>	<b>Selected BMPs</b>
<b>Exposure of waste</b>	<ul style="list-style-type: none"><li>• Minimize the area of exposed open face as much as is practicable.</li><li>• Divert flows around open face using structural measures such as dikes, berms, swales, or pipe slope drains.</li><li>• Maintain the integrity and effectiveness of any intermediate or final cover (including repairing the cover as necessary to minimize the effects of settlement, sinking, and erosion).</li><li>• Regularly inspect erosion and sediment controls.</li></ul>

<p><b>Erosion and Sediment Control</b></p>	<p><u>Vegetation</u></p> <ul style="list-style-type: none"> <li>• Stabilize soils with temporary seeding, mulching, and placing geotextiles on the inactive portions of the site.</li> <li>• Keep as much vegetation as possible when building roads and seed as necessary and appropriate.</li> <li>• Construct vegetated swales along road.</li> </ul> <p><u>Run-off Controls</u></p> <ul style="list-style-type: none"> <li>• Implement structural controls as indicated on Engineering Plans to convey runoff, to divert storm water flows away from areas susceptible to erosion, and to prevent sediments from entering water bodies.</li> <li>• Confine stockpiling to areas outside of drainage pathways and away from surface waters</li> <li>• Stabilize haul roads and entrances to landfill with gravel or stone.</li> <li>• Frequently inspect all stabilization and structural erosion control measures and perform all necessary maintenance and repairs.</li> </ul> <p><u>Sedimentation Basin</u></p> <ul style="list-style-type: none"> <li>• Maintain sedimentation basin to prevent run-off of contaminants from the facility.</li> <li>• Remove accumulated sediment periodically to maintain effective storage volume. Sediment will be removed when it has accumulated to within 18 inches of the lowest openings in the outfall structure.</li> <li>• Conduct regular inspections of the outlet structures, dike embankments, and entrance points to prevent erosion or blockages that could result in dike failure or damage during storm events.</li> </ul>
<p><b>Outdoor Vehicle and Equipment Storage and Parking</b></p>	<ul style="list-style-type: none"> <li>• Store vehicles and equipment indoors when possible.</li> <li>• Cover the storage area with a roof.</li> <li>• Provide diversion berms, dikes or grassed swales around the perimeter of the area to limit run-on.</li> <li>• Use drip pans under all vehicles and equipment waiting for maintenance.</li> <li>• Use absorbents for dry cleanup for spills and leaks.</li> <li>• Regularly sweep area to minimize debris on the ground.</li> <li>• Provide dust control if necessary.</li> <li>• Inspect the storage areas to ensure BMPs are implemented.</li> </ul>

<b>Vehicle Washing</b>	<ul style="list-style-type: none"> <li>• Avoid washing parts or equipment outside.</li> <li>• Confine activities to designated areas outside drainage pathways and away from surface waters.</li> <li>• If washing outdoors, cover the cleaning operation and ensure that all washwaters drain to the intended collection system.</li> <li>• Collect storm water runoff from the cleaning area and provide treatment or recycling.</li> <li>• Inspect cleaning area regularly to ensure BMPs are implemented and maintained.</li> <li>• Train employees on proper washing procedures.</li> </ul>
<b>Liquid Storage in ASTs</b>	<ul style="list-style-type: none"> <li>• Store materials inside when feasible.</li> <li>• If area is uncovered, connect sump outlet to sanitary sewer (if possible) or an oil/water separator, catch basin filter, etc. If connecting to a sanitary sewer check with the system operator to ensure that the discharge is acceptable. If implementing separator or filter technologies, ensure that regular inspections and maintenance procedures are in place.</li> <li>• Develop and implement spill plans.</li> <li>• Train employees in spill prevention and control.</li> </ul> <p><b><u>Above ground tanks</u></b></p> <ul style="list-style-type: none"> <li>• Provide secondary containment, such as dikes, with a height sufficient to contain a spill (110 percent of the volume the largest tank).</li> <li>• If containment structures have drains, ensure that the drains have valves, and that valves are maintained in the closed position. Institute protocols for checking storm water in containment area prior to discharge</li> <li>• Use tanks with overflow protection.</li> </ul> <p><b><u>Portable containers/drums</u></b></p> <ul style="list-style-type: none"> <li>• Store drums indoors when possible.</li> <li>• Store drums, including empty or used drums, in secondary containment with a roof or cover (including temporary cover such as a tarp that prevents contact with precipitation).</li> <li>• Provide secondary containment, such as dikes or portable containers, with a height sufficient to contain a spill (110 percent of the volume contained in the largest tank).</li> </ul>



	<ul style="list-style-type: none"> <li>• Clearly label drums with their contents.</li> <li>• Train employees on proper filling and transfer procedures</li> </ul>
<b>Petroleum Loading/Unloading</b>	<ul style="list-style-type: none"> <li>• Confine loading/unloading activities to designated areas outside drainage pathways and away from surface waters.</li> <li>• Provide diversion berms, dikes or swales around the perimeter of the area to limit run-on.</li> <li>• Avoid loading/unloading materials in the rain or provide cover or other protection for loading docks.</li> <li>• Cover loading and unloading areas and perform these activities on an impervious pad to enable easy collection of spilled materials.</li> <li>• Slope the impervious concrete floor to collect spills and leaks and convey them to proper containment and treatment.</li> <li>• For transfer to/from trucks, ensure hose connection points at storage containers are inside containment areas, or drip pans are used in areas where spillage may occur.</li> <li>• Regularly sweep area to minimize debris on the ground.</li> </ul>

## 6.2 Good Housekeeping

Good housekeeping is a practical, cost-effective way to maintain a clean and orderly facility to prevent potential pollution sources from coming into contact with storm water. It includes establishing protocols to reduce the possibility of mishandling materials or equipment and training employees in good housekeeping techniques.

Common areas where good housekeeping practices should be followed include trash containers and adjacent areas, material storage areas, vehicle and equipment maintenance areas, and loading docks. Good housekeeping practices must include a schedule for regular pickup and disposal of garbage and waste materials and routine inspections of drums, tanks, and containers for leaks and structural conditions. Practices also include containing and covering garbage, waste materials, and debris. Involving employees in routine monitoring of housekeeping practices has proven to be an effective means of ensuring the continued implementation of these measures.

### **6.3 Visual Inspection**

Regular visual inspections ensure that all elements of the BMP Plan are in place and working properly to prevent pollution of storm water runoff from the facility. Specific inspection requirements are discussed in **Section 8.2**.

### **6.4 Spill Prevention and Response**

The Spill Prevention and Response Program include education for employee awareness and training in proper material handling and storage. The following sections summarize the specific practices and controls included in the program based on the site assessment conducted at the facility.

#### **Spill Prevention Education**

- Be aware that different materials pollute the environment in different ways and amounts. Make sure each employee knows what a “significant spill” is for each material they use, and what is the appropriate response for “significant” and “insignificant” spills.
- Educate employees on potential dangers to humans and the environment from spills and leaks.
- Hold regular meetings to discuss and reinforce appropriate disposal procedures.
- Establish a continuing education program to indoctrinate new employees.
- Designate facility employee with responsibility for overseeing and enforcing prevention and control measures.

#### **General Spill Prevention Measures**

- Spills of oil, petroleum products, and sanitary and septic wastes should be contained and cleaned up as quickly and safely as possible.
- Store hazardous materials and wastes in covered containers and protect from vandalism.
- Place a stockpile of spill response cleanup materials where it will be readily available.
- Spills should be covered and protected from storm water run-on during rainfall to the extent that it does not compromise cleanup activities.
- Do not bury or wash spills with water.

- Store and dispose of used clean up materials, contaminated materials, and recovered spill material that is no longer suitable for the intended purpose in conformance with the provisions in applicable BMPs.
- Do not allow water used for cleaning and decontamination to enter storm drains or watercourses.
- Place proper storage, clean up, and spill reporting instructions for hazardous materials stored or used on the project site in an open, conspicuous, and assessable location.
- Keep waste storage areas clean, well organized, and equipped with ample cleanup supplies as appropriate for the materials being stored.

## **6.5 Sediment and Erosion Prevention and Control**

The site assessment identified no major activities with a potential for significant soil erosion. However, in the event that erosion and sediment control become an issue in the future, proper BMPs will need to be implemented to prevent discharges to storm water. Erosion controls such as seeding, mulching, and sodding prevent soil from becoming dislodged. Sediment control BMPs such as silt fences, sediment ponds, and stabilized entrances trap sediment after it has eroded. Sediment control BMPs should be used in conjunction with erosion control BMPs.

## **7.0 DISCHARGE COUNTERMEASURE PROCEDURES**

This section describes the response and cleanup procedures in the event of a product discharge. The uncontrolled discharge of fuel or oil to groundwater, surface water, or soil is prohibited by state and possibly federal laws. Immediate action must be taken to control, contain, and recover discharged product.

### **7.1 Identification/Notification**

The guidelines noted below will be followed in the event of a spill or other discharge of fuel and/or other hazardous substance.

- Any employee who discovers a discharge of oil and/or other hazardous substance should determine the source of the spill. If the source of the spill is immediately obvious, the employee should report the spill to the Landfill Deputy Director, Mr. Ed Fox. Designated landfill personnel will determine the



cause of the discharge, take action to clean up the spill, and implement measures to prevent a recurrence. In the event the release is beyond the response capabilities of on-site resources, the spill response contractors listed on the Emergency Contact List will be notified to mobilize to the site and provide support.

- If a spill occurs, is not fully contained, and has the potential to reach the waters of the United States, the Deputy Director or alternate should be notified immediately who will in turn notify the appropriate agencies identified on the Emergency Contact List provided in Section 1.0 when required.

The designated Magnolia Landfill representatives will notify appropriate officials provided in Section 1.0 as appropriate. The following information should be provided:

- Exact address or location and phone number of the facility;
- Weather conditions; or probability of rainfall;
- Date and time discharge began;
- Type of material discharged;
- Estimates of the total quantity discharged;
- Source of the discharge;
- Cause of discharge;
- Condition of container;
- Description of all affected media;
- Damages or injuries resulting from the discharge;
- Actions being taken to stop, remove, and mitigate the effects of the discharge;
- Whether an evacuation may be needed; and
- Names of individuals and/or organizations who have also been contacted

In accordance with 40 CFR 112.3, discharges of oil products in volumes greater than **1,000 gallons** in a single event or **42 gallons** in each of two events into navigable waters within a twelve-month period will require notification to the EPA Regional Administrator within 60 days of the event. Information required to be submitted will be as follows:

- Name of the facility;
- Name of the owner/operator;

- Location of the facility;
- Maximum storage or handling capacity and normal daily throughput;
- Corrective action and countermeasures taken, including a description of equipment repairs and replacements;
- Description of facility, including maps, flow diagrams, and topographical maps;
- Cause of the discharge(s) to navigable waters and adjoining shorelines, including a failure analysis of the system and subsystem in which the failure occurred;
- Additional preventive measures taken or contemplated to minimize possibility of recurrence; and
- Other pertinent information requested by the Regional Administrator.

### **Facility Response Plan**

Pursuant to 40 CFR 112.20, owners or operators of an oil storage facility that, because of its location, could reasonably be expected to cause substantial harm to the environment by discharging oil into or on navigable waters must prepare and submit a facility response plan (FRP) to the EPA Regional Administrator.

EPA has developed "Substantial Harm" criteria found in 40 CFR 112 Appendix C to apply in evaluating whether a facility is subject to the FRP requirements of 40 CFR 112.20. If a facility meets any of the identified criteria, the owner/operator is required to prepare and submit a FRP to the EPA Region IV Administrator for review and approval. The Substantial Harm Criteria Checklist and certification of applicability has been included as **Appendix C**. Based on information provided by the landfill, the facility **is not subject** to the requirements of 40 CFR 112.20.

## **7.2 Containment and/or Collection**

Once the discharge has been identified and reasonable efforts have been made to stop further discharge, containment methods should be employed. Barriers, and/or absorbent pads and absorbent materials should be used, if necessary, to prevent the discharge from reaching storm-water conveyance systems or off-site areas.

In extreme situations, an emergency spill cleanup contractor may be contacted to assist in cleanup. A list of potential spill cleanup contractors is provided in the **Emergency Contact List**.

Based on an overall evaluation of the release, collection and disposal of the discharged product may be appropriate. Equipment and materials available onsite may be utilized to contain and collect the discharged product. Available on-site spill response equipment that can be utilized to respond to a release is discussed in **Section 6.3**.

### **7.3 Spill Response Material/Equipment**

The Magnolia Landfill facility maintains spill response materials on-site to add in the response in the event of an oil release. An inventory of the spill response materials available for use at the landfill facility as well as its location is contained in the table below.

<b>Table 5</b>		
<b>Spill Response Material/Equipment</b>		
<b>Description of Response Equipment</b>	<b>Minimum Quantity to be Maintained</b>	<b>Location of Equipment</b>
Oil-Dri	(5) 50-pound bags	Warehouse
Oil Absorbent Pads, Pillows, and/or Booms	(5) packs	Warehouse

### **7.4 Recovered Material Management**

Once the discharge material has been adequately contained and/or collected, the designated representative should determine the most feasible method for handling the discharged material. Options that should be considered include collection of petroleum containing liquids and transferring off site for petroleum recovery and collection of petroleum residue debris/soil and transporting to an approved treatment/disposal facility.

An accurate log of the date, time, personnel, equipment and sequence of events regarding spill response and cleanup will be documented and kept on file. This information will be utilized to audit the effectiveness of this SPCC Plan.



The following alternatives should be considered for disposal, based upon the feasibility of each method:

- Reclamation or reprocessing of recoverable oil products at a permitted approved reprocessing facility; and/or
- Disposal of oil residue and oil contaminated materials at a RCRA treatment/disposal facility permitted to accept such material.

## **7.5 Potential Spill Prediction**

This facility is provided with spill containment structures for storage tanks used to contain petroleum products. These containment structures are intended to prevent spillage from reaching and entering navigable water. However, because there is a reasonable potential for equipment failure that could cause a release, the following table has been provided to comply with the requirements of 40 CFR 112.7(b).

The predictions described are based upon the failure of normal storage facilities and the additional failure of collection and containment facilities that prevent spillage from escaping the facility. **Table 6** includes a description of oil storage capacity, the most likely type of failure, estimated flow rate, and estimated total quantity of fuel that could be discharged as a result of the type of failure. Assumptions used to arrive at these volumes have been included.

This table should be used in conjunction with the above referenced figure to aid in response to a release.

<p style="text-align: center;">Table 6 Potential Spill Prediction Type of Release: Tank Rupture, Leak, or Overfill</p>				
Area/Activity Description	Storage Capacity	Type of Failure	Estimated Release Rate in Gallons per Minute (gpm)	Estimated Release Volume in Gallons
On-road Diesel Fuel Tank #1	10,000	Rupture	166.67	10,000
		Leak	6.94	2,500
		Overfill	90	45
Regular Unleaded Gasoline Tank #2	1,000	Rupture	16.67	1,000
		Leak	0.69	250
		Overfill	90	45
On-road Diesel Fuel Tank #3	1,000	Rupture	16.67	1,000
		Leak	0.69	250
		Overfill	90	45
Hydraulic Oil Tank #4	200	Rupture	3.33	200
		Leak	0.14	50
		Overfill	10	5
Motor Oil Tank #5	200	Rupture	3.33	200
		Leak	0.14	50
		Overfill	10	5

**Notes:**

1)Rupture-Release rate-based tank failure that would empty the tank contents within 1 hour.

2)Leak- Release rate based on the rate required to empty the tank in a 24-hour period.

Total volume base on a maximum detection/response time of 6 hours for tanks.

3) Overfill- Release rates based on a delivery rate of 90 and 10 gpm. Release volume based on 30 second response time.

## 8.0 INSPECTIONS, TESTS AND RECORDS

In order to continually revise and improve the Landfill Pollution Prevention Plan, BMPs implemented should be routinely evaluated to ensure they are effective at preventing or diminishing storm water contamination.

This is accomplished by conducting inspections and/or testing to observe activities and conditions at the facility as well as collecting storm water quality monitoring data. The followings sections describe the methods utilized to evaluate the effectiveness of this program.

## **8.1 Inspection of Storage Tanks and Containment Areas**

Visual inspections of the product storage equipment will be conducted by Landfill personnel on a daily basis to verify the integrity of the operation. The visual inspections may include but are not limited to the following items:

- Physical condition of storage tanks;
- Condition of transfer piping and associated equipment;
- Inspection of containment areas for cracks/damage and the presence of petroleum products; and
- Conditions that may affect the performance of the containment system or hinder the inspection.

The results of these daily inspections will not be documented unless a problem is identified. A more thorough inspection will be conducted on a monthly basis utilizing the inspection form found in **Appendix D**. Inspection records will be signed by the appropriate personnel and forwarded to the Deputy Director, Mr. Ed Fox, who will review and ensure appropriate corrective actions have been implemented when required. The results of these inspections will be maintained on file for a period of three years.

## **8.2 Facility BMP Inspections**

A minimum of two facility inspections will be required per week to ensure that BMPs are continually implemented and are effective as required by the facility's NPDES Permit. The inspections will focus on any structures that are utilized to prevent storm water pollution or to remove pollutants from storm water as well as the general condition of the facility.

Inspections will be documented on the inspection forms provided as **Appendix D** and will be maintained at the facility to comply with conditions of the ADEM issued Storm Water Permit and this Plan. Deficiencies identified will be reported to senior



management and a corrective action plan will be developed to address the deficiency.

### **8.3 Aboveground Storage Tank Integrity Testing**

40 CFR 112.8(c)(6) (July 2002 Revision) requires integrity testing of bulk containers “on a regular schedule.” The regulations further provide that visual inspections must be combined with another non-destructive testing technique to verify the structural integrity of the container. In March 2004, a settlement agreement was executed between EPA and the American Petroleum Institute (API) specifically clarifying EPA’s position on integrity testing of shop-built containers.

EPA stated in the settlement agreement that well-designed shop-built containers with a capacity of 30,000 gallons or less would be generally provided with equivalent environmental protection to that offered by other forms of testing if appropriate visual inspections were combined with the measures described below:

- Elevation of a shop-built container in a manner that decreases corrosion potential (as compared to a container in contact with soil) and makes all sides of the container, including the bottom, visible during inspection (e.g., where the containers are mounted on structural supports, or saddles).
- Placement of a barrier between the container and the ground, designed and operated in a way that ensures that any leaks are immediately detected.

Per the STI SP001-03, a Category 1 Shop-Fabricated AST that contains between 5,001 and 50,000 gallons would be subject to periodic AST inspections and a Formal external inspection by a certified inspector every twenty (20) years.

There is one storage tank currently utilized at the Magnolia Landfill facility that is greater than 5,000 gallons in capacity. Therefore, the facility will be subject to the formal external inspection requirement. To initiate the program, the manufacture date of this tank should first be determined. This information should then be used to schedule a formal external inspection on each of these tanks prior them reaching 20 years in age to comply with the STI SP001-03 Standard.

As a best management practice, it is recommended to also include any remaining

storage tanks in this inspection program to verify the continued structural integrity of these tanks.

Tank tests and inspections conducted at the facility shall be retained on site for the useful life of the storage tank.

#### **8.4 Field-Constructed Aboveground Containers**

There are no field-constructed aboveground containers utilized at the Magnolia Landfill facility.

#### **8.5 Storage Area Inspections**

Outside fuel storage tanks are double-walled constructed to provide secondary containment, and therefore are not required to be surrounded by a containment dike. Additionally, the secondary containment area adjoining the maintenance facility is covered and protected from stormwater. Formal inspections of the tank exteriors, interstitial space, etc. will be performed as part of the monthly facility inspections. The Inspection Log provided in Appendix D.

#### **8.6 Product Overfill Protection**

Magnolia Landfill personnel are present throughout the filling operations to monitor the product level in the tanks. Audible and visual overfill alarms should indicate when the tank has reached 90% capacity.

#### **8.7 Spill Response Equipment**

An inventory of the spill response materials/equipment available for use at the Magnolia Landfill facility as well as its location is discussed in **Section 7.3**. Inspection of locations will be conducted by designated facility personnel as part of the monthly facility inspection to ensure the areas remain adequately stocked. Items identified that need to be replaced will be noted on the **Monthly Facility Inspection Form** included in **Appendix D** and forwarded to the **Site Deputy Director, Mr. Ed Fox**, for follow-up.

## **8.8 Recordkeeping and Internal Reporting**

The landfill records and maintains records of relevant spills, leaks, inspections, and maintenance activities. The Environmental Services Department is responsible for maintaining all records pertinent to storm water pollution prevention for a minimum of one year beyond the expiration date of this permit. These records include the following documents:

- Copy of the ADEM NPDES permit;
- Integrated Pollution Plan and all revisions of the Plan;
- Copies of site inspections conducted to comply with the Permit and this plan;
- Monitoring records required by the Permit;
- Records of spills/leaks as well as the corrective actions taken to prevent recurrence;
- Weekly inspections required by Part IV.A. of the Permit;
- All inspections performed and any corrective actions taken for the last three years and each entry shall be signed by the person performing the inspection and any corrective actions taken; and
- Training records for any personnel required to implement this Plan at the facility.

Records generated will be retained for a minimum of one year past the expiration of the permit.

## **9.0 FACILITY MONITORING REQUIREMENTS**

As specified in the facility's NPDES Permit, the landfill is required to monitor certain effluents associated with each discharge area. Each discharge is listed in the attached permit.

An **Annual Certification** must be submitted to ADEM by **January 28<sup>th</sup>** that all discharges, during the preceding year, associated with the above were in accordance with the conditions of the permit.



## **9.1 Sampling Requirements**

All storm water samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inches. The storm water event must be monitored, including the date and rainfall (in inches) for the storm event(s) sampled.

The duration between the storm event sampled and the end of the previous measurable (greater than 0.1-inch rainfall) storm event must be a minimum of 72 hours. This information must be recorded as part of the sampling procedure and records retained according to NPDES Permit.

During the sampling storm event, rainfall must be reported and may be measured using a rain gauge. This information must be recorded as part of the sampling procedure and records retained according to the permit. A copy of the NPDES Permit has been included as **Appendix G**.

A grab sample, when required by the permit, shall be taken during the first thirty minutes of the discharge (or as soon thereafter as practicable); and a flow weighted composite sample, if required by this permit, shall be taken for the entire event or for the first three hours of the event.

## **9.2 Reporting Requirements**

Analytical results from monitoring conducted will be submitted to ADEM as specified in Part I.C of the Permit. The results will be recorded on the Discharge Monitoring Report form and must be submitted by utilizing the ADEM Electronic Environmental (E2) reporting system.

# **10.0 SITE SECURITY**

## **10.1 Fencing/Camera Surveillance/Tank Security**

The Magnolia Landfill is completely enclosed by a security fence. The main gates that control the entrance and exit into this area are locked and secured during non-operating hours with a padlock.

## **10.2 Lighting Adequate to Detect Spills**

Facility lighting at the Magnolia Landfill facility shall be utilized and located in a manner to assist both operating personnel in daily operations and discovery of discharges occurring during hours of darkness. Facility lighting shall completely illuminate the aboveground storage tank area and unloading area. This lighting will also assist the general public and law enforcement in the discovery of possible discharges.

## **11.0 PERSONNEL TRAINING PROCEDURES**

### **11.1 Personnel training**

All new hires are required to review the oil spill prevention and response guidelines at the time of hire. This document is signed and filed in the personnel folder of each new hire. In addition, all new hires receive on the job instruction from personnel familiar with our spill prevention and response procedures. As a means of refresher training, these same spill prevention and response procedures, along with other new or important spill prevention information, are periodically reviewed at our monthly safety meetings. The minutes of these meetings are maintained and available for review upon request.

Employees involved in handling petroleum products will receive training as part of their orientation program. All employees involved in the operation and maintenance of equipment will be instructed in methods and actions to prevent discharge of petroleum or petroleum by-products as part of this training program. In addition, all personnel involved in the management of petroleum products will be instructed in the following:

- Overview of the IP3 and its purpose;
- Operation and maintenance of equipment to prevent petroleum discharge and the pollution of storm water;
- Applicable pollution control laws, rules, and regulations;
- Fluid level monitoring in tanks;
- Material delivery monitoring/observations;
- Inspection/recordkeeping requirements; and
- Spill response procedures.

## **11.2 Designated Person Accountable for Spill Prevention**

The person who is responsible for oil spill prevention, personnel training, and the overall implementation of this Plan is the **Deputy Director, Mr. Ed Fox**. Though responsible for the overall implementation, the Deputy Director may delegate certain responsibilities as he deems appropriate.

## **11.3 Spill Prevention Briefings**

Spill prevention briefings will be conducted on an annual basis at the facility. These briefings will cover the following areas:

- Review of the plan to assure personnel have an adequate understanding of the contents of the plan;
- Discussion of any known spill events or failures, malfunctioning components; and
- Recently developed precautionary measures to aid in spill prevention.

Documentation of these briefings will include the date of the briefing, attendees and items covered during the meeting. This documentation should be retained and filed at the facility for future reference.

## **12.0 Facility Tank Truck Loading/Unloading**

Magnolia Landfill requires all drivers to comply with Department of Transportation (D.O.T.) requirements and facility loading/unloading procedures. All drivers must be authorized to load or unload product in accordance with this regulation.

ASTs will never be filled without a representative from the Landfill present at the unloading area. Personnel will inspect tank product levels prior to authorizing filling operations to ensure adequate capacity is available in the tank receiving product. ASTs will never be filled beyond 90% to provide an additional level of protection against overfilling. Any vehicles preloaded at the facility must remain in containment and be secured. **Section 5.2** details tanker truck loading/unloading procedures at the facility.



## **13.0 FACILITY TRANSFER OPERATIONS**

### **13.1 Transfer Piping Management**

All transfer lines will be capped or blank-flanged at the termination point when not in use and identified as to its source. Pipe supports will be designed and installed to minimize abrasion and corrosion and to allow for expansion and contraction due to temperature changes. Transfer lines will be located to protect against damage from vehicular traffic.

Aboveground piping, valves and appurtenances will be inspected on a routine basis as part of the monthly facility inspection to verify their integrity. Integrity concerns noted during these inspections will be noted on the inspection form and forwarded to the Deputy Director for follow-up.

## 14.0 DOCUMENT REVISION STATUS AND DISTRIBUTION

## 14.1 REVISION HISTORY LOG

[illegible]

**Figures**



**APPENDIX A**



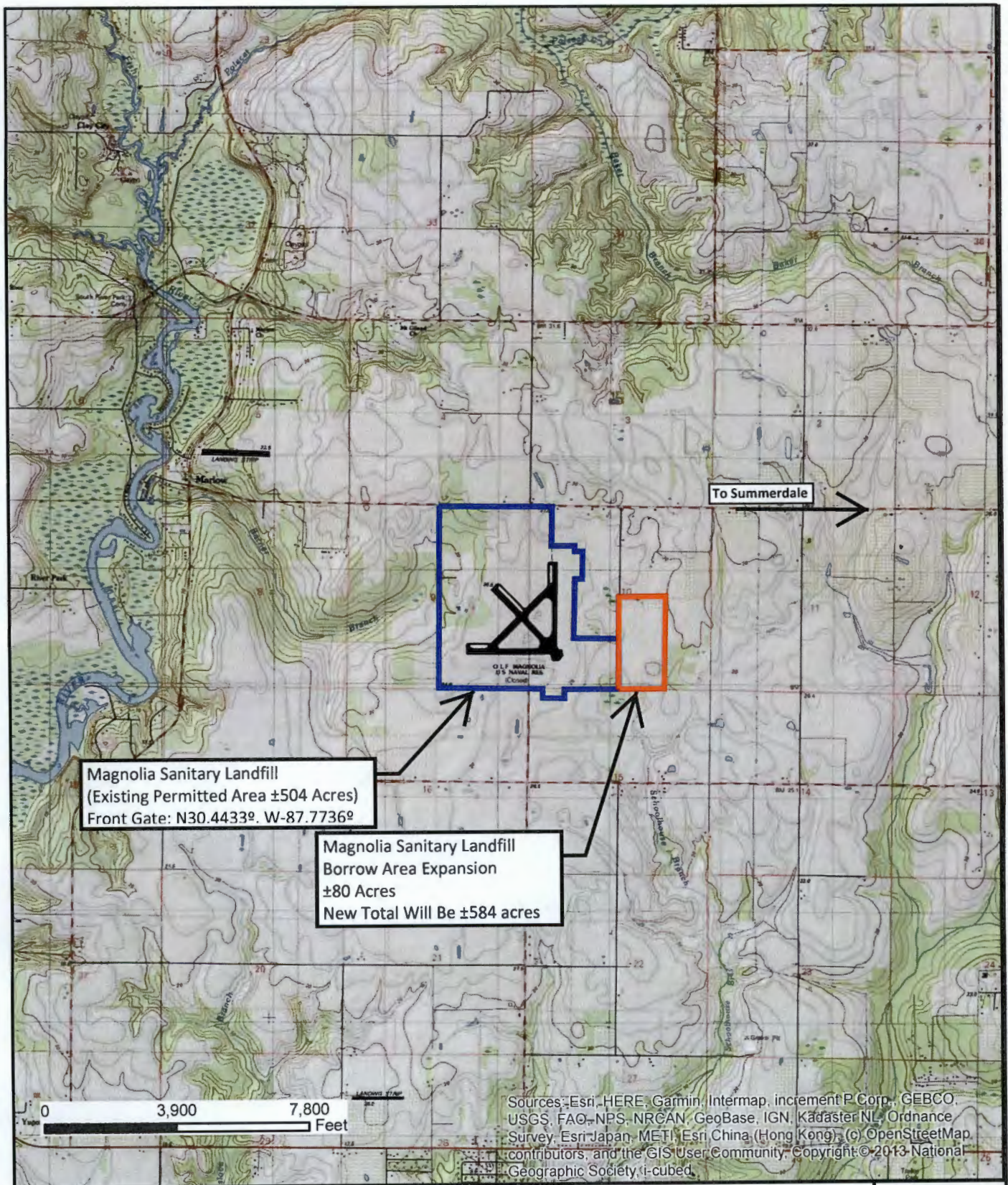


Figure 1 - USGS Topographic Map

MAGNOLIA SANITARY LANDFILL  
Baldwin County, Alabama



Engineering. Environmental. Answers.  
www.cdge.com





Figure 2 - Site Property Boundary

MAGNOLIA SANITARY LANDFILL  
Baldwin County, Alabama



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Approximate Scale in Feet

0 100 200



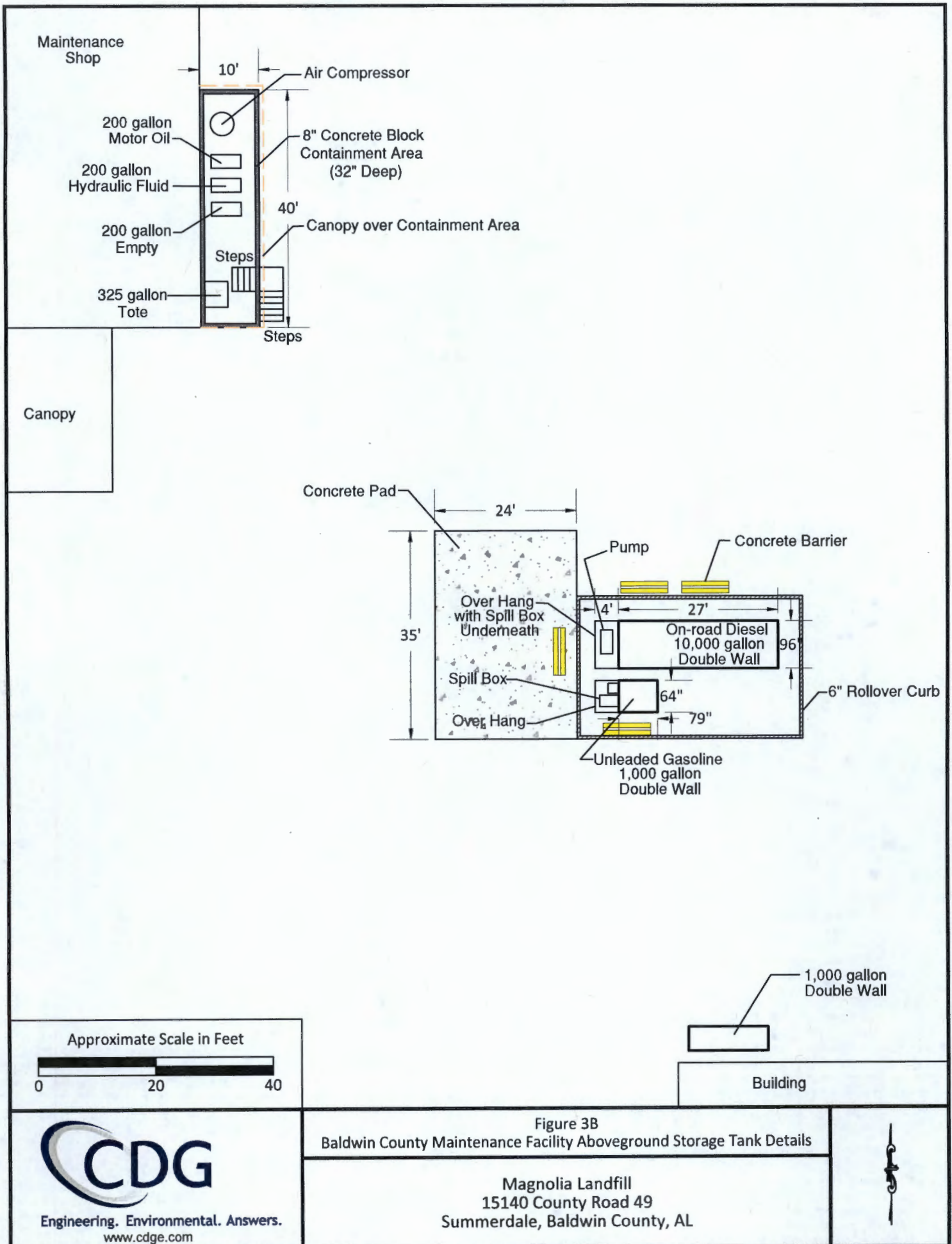
Engineering. Environmental. Answers.  
www.cdg.com

Figure 3A  
Baldwin County Maintenance Facility Showing AST Locations

Magnolia Landfill  
15140 County Road 49  
Summerdale, Baldwin County, AL







# **Spill Release Form**



**APPENDIX B**

**SPCC**  
**Emergency Discharge/Spill Reporting Information**  
**Form**

**Date:** \_\_\_\_\_

**Reported By:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Reported To:** \_\_\_\_\_

**EXACT ADDRESS OF FACILITY**

**ADDRESS** \_\_\_\_\_

**Telephone #** \_\_\_\_\_

**Exact Location of Discharge/Spill at Facility:**

\_\_\_\_\_  
\_\_\_\_\_

**Type of Material Discharged/Spilled:**

\_\_\_\_\_  
\_\_\_\_\_

**Source of Discharge/Spill:**

\_\_\_\_\_  
\_\_\_\_\_

**Cause of Discharge/Spill:**

\_\_\_\_\_  
\_\_\_\_\_

**Description of Affected Area:**

\_\_\_\_\_  
\_\_\_\_\_

**Emergency Corrective Actions in Use at Present Time:**

\_\_\_\_\_  
\_\_\_\_\_

**Are INJURIES caused by Discharge/Spill?** \_\_\_\_\_

**If So, How Many? Has EMS been dispatched to facility?**

\_\_\_\_\_

**AT PRESENT, Do you foresee Evacuation of the facility or surrounding area?**



**Names of Individuals and/or Organizations that have been contacted concerning the emergency situation:**

**Additional Information That Would Assist Responding Agencies:**

RECEIVED  
JUN 25 2021  
INDUSTRIAL SECTION

# **Certification for the Applicability of the Substantial Harm Criteria Checklist**



**APPENDIX C**

## CERTIFICATION OF THE APPLICABILITY OF THE SUBSTANTIAL HARM CRITERIA CHECKLIST

FACILITY NAME: Magnolia Landfill

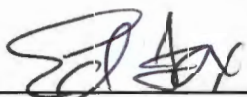
FACILITY ADDRESS: 15140 County Road 49, Summerdale, Alabama 36580

1. Does the facility transfer oil over water to or from vessels and does the facility have a total oil storage capacity greater than or equal to 42,000 gallons?  
Yes \_\_\_ No x
2. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and does the facility lack secondary containment that is sufficiently large to contain the capacity of the largest aboveground oil storage tank plus sufficient freeboard to allow for precipitation within any aboveground oil storage tank area?  
Yes \_\_\_ No x
3. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and is the facility located at a distance (as calculated using the formula in Attachment C-III, Appendix C, 40 CFR 112 or a comparable formula<sup>1</sup>) such that a discharge from the facility could cause injury to fish and wildlife and sensitive environments? For further description of fish and wildlife and sensitive environments, see Appendices 1, 11, and III to DOC/NOAA's Guidance for Facility and Vessel Response Environments" (Section 10, Appendix E, 40 CFR 112 for availability) and the applicable Area Contingency Plan.  
Yes \_\_\_ No x
4. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and is the facility located at a distance (as calculated using the appropriate formula (Attachment C-III, Appendix C, 40 CFR 112 or a comparable formula<sup>1</sup>) such that a discharge from the facility would shut down a public drinking water intake<sup>2</sup>?  
Yes \_\_\_ No x
5. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and has the facility experienced a reportable oil spill in an amount greater than or equal to 10,000 gallons within the last 5 years?  
Yes \_\_\_ No x

### CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document, and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Name Ed Fox  
Please print

Signature 

Date 6/7/21



# **Facility and Tank Inspection Checklist**



**APPENDIX D**

## BMP Bi-Weekly Facility Inspection Report

General Information			
<b>Facility Name</b>	Magnolia Landfill		
<b>NPDES Permit No.</b>	AL0069345		
<b>Date of Inspection</b>		<b>Start/End Time</b>	
<b>Inspector's Name(s)</b>			
<b>Inspector's Title(s)</b>			
Weather Information			
<b>Weather at time of this inspection?</b> <input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snow <input type="checkbox"/> High Winds <input type="checkbox"/> Other: _____      Temperature: _____			
<b>Have any previously unidentified discharges of pollutants occurred since the last inspection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe: _____			
<b>Are there any discharges occurring at the time of inspection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe: _____			

**Areas of Industrial Materials or Activities exposed to storm water**

*Below are some general areas that should be assessed during routine inspections. Customize this list as needed for the specific types of industrial materials or activities at your facility.*

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Material loading/unloading and storage areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Equipment operations and maintenance areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Fueling areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Outdoor vehicle and equipment washing areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Waste handling and disposal areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Erodible areas/construction	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Non-stormwater discharges	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Dust generation and vehicle tracking	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
10	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	

#### Non-Compliance

Describe any incidents of non-compliance observed and not described above:

#### Additional Control Measures

Describe any additional control measures needed to comply with the permit requirements:

#### CERTIFICATION STATEMENT

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Print name and title: Terri Graham, Development and Environmental  
 Signature: Terri Graham Date: 6.7.2021 Director



## MONTHLY FACILITY AND TANK INSPECTION CHECKLIST

DATE: _____  TIME: _____  INSPECTOR: _____	X = Satisfactory NA = Not Applicable O = None C = See Comment
--	--

### Monthly Facility and Tank Inspection Checklist

**Task Instructions:** \*\*\*\*INITIAL EACH ITEM ON THE LINE PRECEDING INSTRUCTION AFTER IT'S PERFORMED\*\*\*\*

1. AST's	YES	NO	EXPLANATION, IF NECESSARY
A. Tank surfaces checked for signs of leakage.			
B. General appearance of paint on shell and structural members:			
C. Tank condition good (no rusting, corrosion, pitting)			
D. Bolts, rivets, or seams are not damaged.			
Tank Foundation intact.			
E. Valves, flanges, and gaskets are free from leaks.			
Are all pieces tight?			
Are any pieces missing or require repairs?			
Are all insulating flange washers and sleeves in place?			
F. Are all ground and/or anode straps in place?			
G. Hoses and Piping			
General appearance of hoses.			
Any leaks? If so, explain.			
Piping free of leaks?			
H. No visible oil sheen in containment area.			
I. Level gauges and alarms working properly.			
J. Vents are not obstructed.			
K. Water/product in tank interstice (Double-wall tanks)			
2. CONTAINMENT AREAS			
A. No standing water in containment area.			
B. Containment walls are intact.			
C. Warning signs posted?			
D. Free of trash?			
E. Not used for storage?			
F. Free of excessive water?			
2. DRAINAGE			
A. Any noticeable oil sheen on runoff.			
B. Containment area drainage valves are closed and locked.			
3. SPILL RESPONSE EQUIPMENT			
A. Are designated storage areas adequately stocked.			
4. SECURITY			
A. Fence and gates intact.			
B. Gates have locks.			
C. AST's locked when not in use.			
D. Starter controls for pumps locked when not in use.			
E. Lighting is working properly.			

REMARKS/RECOMMENDATIONS:

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# **Secondary Containment Calculations**



**APPENDIX E**

**Magnolia Landfill  
Summerdale, Baldwin County, Alabama  
Containment Area Calculations**

Recommended Available Volume Calculations for Dike Containment Areas				
1) Containment Area for Bulk Storage AST's (3 - 200 gal ASTs and 1 - 325 gal tote)				
Containment Area Dimensions (Total Capacity)				
	Area (ft <sup>2</sup> )	Avg. Depth (ft)	Volume (ft <sup>3</sup> )	Volume (gal)
Bulk Storage Tank Area	301.58	2.67	804.23	6015.20
Available Containment			804.23	6015.20
Bulk Storage Tank Containment Area Available Capacity				
Structures within Containment	Capacity (gal)	Number	Volume (ft <sup>3</sup> )	Volume (gal)
325 Gallon Tote	325.00	1	43.46	325.00
200 Gallon ASTs	200.00	2	53.48	400.00
5 Gallon Containers	5.00	75	50.14	375.00
			147.08	1100.00
Total Volume of Containment Area			804.23	
Minus Volume of Structures Inside Containment Area			147.08	
Total Available Volume (ft <sup>3</sup> )			657.2	
Total Available Volume (Gallons)			4,915	
Largest Storage Tank Capacity in Service			200	
Available Capacity Percentage			2457.57%	
Notes:				
1. Tank volume calculations are based on dimension measurements made in the field.				



# **NPDES Storm Water Permit**



**APPENDIX F**

# **SPCC Related Training Documentation Log**



**APPENDIX G**

## SPCC Related Training Documentation Log

***Note: New employees shall receive initial training in the contents and implementation of this SPCC plan upon start of their employment. All employees shall receive annual refresher training in the contents and implementation of this SPCC plan.***

[illegible]