



Alabama Department of Environmental Management
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SEP 28 2020

Mr. WILLIAM R. HENDERSON, GENERAL MANAGER
THE WATER WORKS & SANITARY SEWER BOARD OF THE CITY OF MONTGOMERY
POST OFFICE BOX 1631
MONTGOMERY, ALABAMA 36102

RE: Draft Permit
NPDES Permit No. AL0027863
Catoma Creek WWTP
Montgomery County, Alabama

Dear Mr. Henderson:

Transmitted herein is a 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.


Please be aware that Part I.C.1.c of your permit requires participation in the Department's web-based Electronic Environmental (E2) Reporting System Program for submittal of DMRs upon issuance of this permit unless valid justification as to why you cannot participate is submitted in writing. Please also be aware that Part I.C.2.e of your permit requires participation in the Department's web-based electronic environmental (E2) reporting system for submittal of SSOs unless valid justification as to why you cannot participate is submitted in writing. SSO hotline notifications and hard copy Form 415 SSO reports may be used only with the written approval from the Department. The E2 Program allows ADEM to electronically validate, acknowledge receipt, and upload data to the state's central wastewater database. This improves the accuracy of reported compliance data and reduces costs to both the regulated community and ADEM. The Permittee Participation Package may be downloaded online at <https://e2.adem.alabama.gov/npdes> or you may obtain a hard copy by submitting a written request or by emailing e2admin@adem.alabama.gov.

Please also be aware that Part IV. of your permit requires that you develop, implement, and maintain a Sanitary Sewer Overflow Response Plan.

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.

Should you have any questions, please contact the undersigned by email at storbert@adem.alabama.gov or by phone at (334) 271-7800.

Sincerely,


Shanda Torbert
Municipal Section
Water Division

Enclosure

cc: Environmental Protection Agency Email
Ms. Elaine Snyder/U.S. Fish and Wildlife Service
Ms. Elizabeth Brown/Alabama Historical Commission
Advisory Council on Historic Preservation
Department of Conservation and Natural Resources

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Mobile-Coastal
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: THE WATER WORKS AND SANITARY SEWER BOARD OF
THE CITY OF MONTGOMERY
POST OFFICE BOX 1631
MONTGOMERY, ALABAMA 36102

FACILITY LOCATION: CATOMA CREEK WWTP (35.0) MGD
6000 RICHARD E. HANAN DRIVE
MONTGOMERY, ALABAMA
MONTGOMERY COUNTY

PERMIT NUMBER: AL0027863

RECEIVING WATERS: ALABAMA RIVER (WOODRUFF LAKE),
ANTIOCH BRANCH (STORM WATER)

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:

Draft

**MUNICIPAL 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

1. Outfall 0012 Discharge Limits

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 Outfall 0012, which is described more fully in the Permittee’s application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Discharge Limitations*							Monitoring Requirements**			
	Monthly Average	Weekly Average	Monthly Average	Weekly Average	Daily Minimum	Daily Maximum	Percent Removal	(1) Sample Location	(2) Sample Type	(3) Measurement Frequency	(4) Seasonal
Oxygen, Dissolved (DO) 00300 1 0 0	*****	*****	*****	*****	2.0 mg/l	*****	*****	E	GRAB	C	*****
pH 00400 1 0 0	*****	*****	*****	*****	6.0 S.U.	9.0 S.U.	*****	E	GRAB	C	*****
Solids, Total Suspended 00530 1 0 0	8757 lbs/day	13135 lbs/day	30.0 mg/l	45.0 mg/l	*****	*****	*****	E	COMP24	C	*****
Solids, Total Suspended 00530 G 0 0	REPORT lbs/day	REPORT lbs/day	REPORT mg/l	REPORT mg/l	*****	*****	*****	I	COMP24	C	*****
Nitrogen, Ammonia Total (As N) 00610 1 0 0	2919 lbs/day	4378 lbs/day	10.0 mg/l	15.0 mg/l	*****	*****	*****	E	COMP24	C	S
Nitrogen, Ammonia Total (As N) 00610 1 0 0	5838 lbs/day	8757 lbs/day	20.0 mg/l	30.0 mg/l	*****	*****	*****	E	COMP24	C	W
Nitrogen, Kjeldahl Total (As N) 00625 1 0 0	5838 lbs/day	8757 lbs/day	20.0 mg/l	30.0 mg/l	*****	*****	*****	E	COMP24	C	S
Nitrogen, Kjeldahl Total (As N) 00625 1 0 0	11676 lbs/day	17514 lbs/day	40.0 mg/l	60.0 mg/l	*****	*****	*****	E	COMP24	C	W
Nitrite Plus Nitrate Total I Det. (As N) 00630 1 0 0	REPORT lbs/day	REPORT lbs/day	REPORT mg/l	REPORT mg/l	*****	*****	*****	E	COMP24	G See Note 5	*****
Phosphorus, Total (As P) 00665 1 0 0	REPORT lbs/day	REPORT lbs/day	REPORT mg/l	REPORT mg/l	*****	*****	*****	E	COMP24	G See Note 5	*****

* See Part II.C.1. (Bypass); Part II.C.2. (Upset)

** Monitoring Requirements

(1) Sample Location

- I – Influent
- E – Effluent
- X – End Chlorine Contact Chamber
- K - Percent Removal of the Monthly Avg. Influent Concentration from the Monthly Avg. Effluent Concentration.
- RS - Receiving Stream

(2) Sample Type:

- CONTIN - Continuous
- INSTAN - Instantaneous
- COMP-8 - 8-Hour Composite
- COMP24 - 24-Hour Composite
- GRAB – Grab
- CALCTD - Calculated

(3) Measurement Frequency: See also Part I.B.2.

- A - 7 days per week
- B - 5 days per week
- C - 3 days per week
- D - 2 days per week
- E - 1 day per week
- F - 2 days per month
- G - 1 day per month
- H - 1 day per quarter
- J - Annual
- Q - For Effluent Toxicity Testing, see Provision IV.B.

(4) Seasonal Limits:

- S = Summer (May – October)
- W = Winter (November - April)
- ECS = E. coli Summer (May – October)
- ECW = E. coli Winter (November – April)

(5) If only one sampling event occurs during a month, the sample result shall be reported on the DMR as both the monthly average, weekly average, and/or the daily maximum.

Limits for Outfall 0012 continued on the next page.

2. Outfall 0012 Discharge Limits (continued)

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 Outfall 0012, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Discharge Limitations*							Monitoring Requirements**			
	Monthly Average	Weekly Average	Monthly Average	Weekly Average	Daily Minimum	Daily Maximum	Percent Removal	(1) Sample Location	(2) Sample Type	(3) Measurement Frequency	(4) Seasonal
Flow, In Conduit or Thru Treatment Plant 50050 1 0 0	REPORT MGD	*****	*****	*****	*****	*****	*****	E	CONTIN	A	*****
Chlorine, Total Residual 50060 1 0 0	*****	*****	0.835 mg/l	*****	*****	1.0 mg/l	*****	E	GRAB	C See Note 5	*****
E. Coli 51040 1 0 0	*****	*****	126 col/100mL	*****	*****	298 col/100mL	*****	E	GRAB	C	ECS
E. Coli 51040 1 0 0	*****	*****	548 col/100mL	*****	*****	2507 col/100mL	*****	E	GRAB	C	ECW
BOD, Carbonaceous 05 Day, 20C 80082 1 0 0	6421 lbs/day	9632 lbs/day	22.0 mg/l	33.0 mg/l	*****	*****	*****	E	COMP24	C	S
BOD, Carbonaceous 05 Day, 20C 80082 1 0 0	7297 lbs/day	10946 lbs/day	25.0 mg/l	37.5 mg/l	*****	*****	*****	E	COMP24	C	W
BOD, Carbonaceous 05 Day, 20C 80082 G 0 0	REPORT lbs/day	REPORT lbs/day	REPORT mg/l	REPORT mg/l	*****	*****	*****	I	COMP24	C	*****
BOD, Carb-5 Day, 20 Deg C, Percent Remvl 80091 K 0 0	*****	*****	*****	*****	*****	*****	85.0%	K	CALCTD	G	*****
Solids, Suspended Percent Removal 81011 K 0 0	*****	*****	*****	*****	*****	*****	85.0%	K	CALCTD	G	*****

* See Part II.C.1. (Bypass); Part II.C.2. (Upset)

** Monitoring Requirements

(1) Sample Location

- I – Influent
- E – Effluent
- X – End Chlorine Contact Chamber
- K - Percent Removal of the Monthly Avg. Influent Concentration from the Monthly Avg. Effluent Concentration.
- RS - Receiving Stream

(2) Sample Type:

- CONTIN - Continuous
- INSTAN - Instantaneous
- COMP-8 - 8-Hour Composite
- COMP24 - 24-Hour Composite
- GRAB – Grab
- CALCTD - Calculated

(3) Measurement Frequency: See also Part I.B.2.

- A - 7 days per week
- B - 5 days per week
- C - 3 days per week
- D - 2 days per week
- E - 1 day per week
- F - 2 days per month
- G - 1 day per month
- H - 1 day per quarter
- J - Annual
- Q - For Effluent Toxicity Testing, see Provision IV.B.

(4) Seasonal Limits:

- S = Summer (May – October)
- W = Winter (November - April)
- ECS = E. coli Summer (May – October)
- ECW = E. coli Winter (November – April)

(5) See Part IV.C. for Total Residual Chlorine (TRC). Monitoring for TRC is applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR.

3. Outfall 001T Discharge Limits - Toxicity

Outfall 001T represents the same physical outfall as Outfall 0012. The Department uses the 001T designation for all samples and analyzed for Toxicity testing, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Discharge Limitations*							Monitoring Requirements**			
	Monthly Average	Weekly Average	Monthly Average	Weekly Average	Daily Minimum	Daily Maximum	Percent Removal	(1) Sample Location	(2) Sample Type	(3) Measurement Frequency	(4) Seasonal
Toxicity, Ceriodaphnia Chronic 61426 1 0 0	*****	Pass = 0 Fail = 1	*****	*****	*****	*****	*****	E	COMP24	Q	*****
Toxicity, Pimephales Chronic 61428 1 0 0	*****	Pass = 0 Fail = 1	*****	*****	*****	*****	*****	E	COMP24	Q	*****

* See Part II.C.1. (Bypass); Part II.C.2. (Upset)

** Monitoring Requirements

(1) Sample Location

- I - Influent
- E - Effluent
- X - End Chlorine Contact Chamber
- K - Percent Removal of the Monthly Avg. Influent Concentration from the Monthly Avg. Effluent Concentration.
- RS - Receiving Stream

(2) Sample Type:

- CONTIN - Continuous
- INSTAN - Instantaneous
- COMP-8 - 8-Hour Composite
- COMP24 - 24-Hour Composite
- GRAB - Grab
- CALCTD - Calculated

(3) Measurement Frequency: See also Part I.B.2.

- A - 7 days per week
- B - 5 days per week
- C - 3 days per week
- D - 2 days per week
- E - 1 day per week
- F - 2 days per month
- G - 1 day per month
- H - 1 day per quarter
- J - Annual
- Q - For Effluent Toxicity Testing, see Provision IV.B.

(4) Seasonal Limits:

- S = Summer (May - October)
- W = Winter (November - April)
- ECS = E. coli Summer (May - October)
- ECW = E. coli Winter (November - April)

4. Outfall 002S Discharge Limits - Storm Water Monitoring

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 Outfall 002S, which is described more fully in the Permittee’s application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Discharge Limitations*							Monitoring Requirements**			
	Monthly Average	Weekly Average	Monthly Average	Weekly Average	Daily Minimum	Daily Maximum	Percent Removal	(1) Sample Location	(2)(5) Sample Type	(3) Measurement Frequency	(4) Seasonal
pH 00400 SW 0 0	*****	*****	*****	*****	REPORT S.U.	REPORT S.U.	*****	SW	FFGS	J	*****
Solids, Total Suspended 00530 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Oil & Grease 00556 SW 0 0	*****	*****	*****	*****	*****	15.0 mg/l	*****	SW	FFGS	J	*****
Nitrogen, Ammonia Total (As N) 00610 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Nitrogen, Kjeldahl Total (As N) 00625 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Nitrite Plus Nitrate Total 1 Det. (As N) 00630 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Phosphorus, Total (As P) 00665 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Flow, In Conduit or Thru Treatment Plant 50050 SW 0 0	*****	*****	*****	*****	*****	REPORT MGD	*****	SW	CALCTD See Note 6	J	*****
E. Coli 51040 SW 0 0	*****	*****	*****	*****	*****	REPORT col/100mL	*****	SW	FFGS	J	*****
BOD, Carbonaceous 05 Day, 20C 80082 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****

* See Part II.C.1. (Bypass); Part II.C.2. (Upset)

** Monitoring Requirements

(1) Sample Location

- I – Influent
- E – Effluent
- X – End Chlorine Contact Chamber
- K - Percent Removal of the Monthly Avg. Influent Concentration from the Monthly Avg. Effluent Concentration.
- RS - Receiving Stream
- SW – Storm Water

(2) Sample Type:

- CONTIN - Continuous
- INSTAN - Instantaneous
- COMP-8 - 8-Hour Composite
- COMP24 - 24-Hour Composite
- GRAB – Grab
- CALCTD - Calculated

(3) Measurement Frequency: See also Part I.B.2.

- A - 7 days per week
- B - 5 days per week
- C - 3 days per week
- D - 2 days per week
- E - 1 day per week
- F - 2 days per month
- G - 1 day per month
- H - 1 day per quarter
- J - Annual
- Q - For Effluent Toxicity Testing, see Provision IV.B.

(4) Seasonal Limits:

- S = Summer (May – October)
- W = Winter (November - April)
- ECS = E. coli Summer (May – October)
- ECW = E. coli Winter (November – April)

(5) See Note Part IV.F.3.

(6) For all storm water parameters, samples shall be first flushed grab samples (FFGS) collected during the first 30 minutes of discharge.

5. Outfall 003S Discharge Limits - Storm Water Monitoring

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 Outfall 003S, which is described more fully in the Permittee’s application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Discharge Limitations*							Monitoring Requirements**			
	Monthly Average	Weekly Average	Monthly Average	Weekly Average	Daily Minimum	Daily Maximum	Percent Removal	(1) Sample Location	(2) (5) Sample Type	(3) Measurement Frequency	(4) Seasonal
pH 00400 SW 0 0	*****	*****	*****	*****	REPORT S.U.	REPORT S.U.	*****	SW	FFGS	J	*****
Solids, Total Suspended 00530 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Oil & Grease 00556 SW 0 0	*****	*****	*****	*****	*****	15.0 mg/l	*****	SW	FFGS	J	*****
Nitrogen, Ammonia Total (As N) 00610 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Nitrogen, Kjeldahl Total (As N) 00625 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Nitrite Plus Nitrate Total I Det. (As N) 00630 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Phosphorus, Total (As P) 00665 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****
Flow, In Conduit or Thru Treatment Plant 50050 SW 0 0	*****	*****	*****	*****	*****	REPORT MGD	*****	SW	CALCTD See Note 6	J	*****
E. Coli 51040 SW 0 0	*****	*****	*****	*****	*****	REPORT col/100mL	*****	SW	FFGS	J	*****
BOD, Carbonaceous 05 Day, 20C 80082 SW 0 0	*****	*****	*****	*****	*****	REPORT mg/l	*****	SW	FFGS	J	*****

* See Part II.C.1. (Bypass); Part II.C.2. (Upset)

** Monitoring Requirements

(1) Sample Location

- I – Influent
- E – Effluent
- X – End Chlorine Contact Chamber
- K - Percent Removal of the Monthly Avg. Influent Concentration from the Monthly Avg. Effluent Concentration.
- RS - Receiving Stream
- SW – Storm Water

(2) Sample Type:

- CONTIN - Continuous
- INSTAN - Instantaneous
- COMP-8 - 8-Hour Composite
- COMP24 - 24-Hour Composite
- GRAB – Grab
- CALCTD - Calculated

(3) Measurement Frequency: See also Part I.B.2.

- A - 7 days per week
- B - 5 days per week
- C - 3 days per week
- D - 2 days per week
- E - 1 day per week
- F - 2 days per month
- G - 1 day per month
- H - 1 day per quarter
- J - Annual
- Q - For Effluent Toxicity Testing, see Provision IV.B.

(4) Seasonal Limits:

- S = Summer (May – October)
- W = Winter (November - April)
- ECS = E. coli Summer (May – October)
- ECW = E. coli Winter (November – April)

(5) See Note Part IV.F.3.

(6) For all storm water parameters, samples shall be first flushed grab samples (FFGS) collected during the first 30 minutes of discharge.

B. DISCHARGE MONITORING AND RECORD KEEPING REQUIREMENTS

1. Representative Sampling

Sample collection and measurement actions shall be representative of the volume and nature of the monitored discharge and shall be in accordance with the provisions of this permit. The effluent sampling point shall be at the nearest accessible location just prior to discharge and after final treatment, unless otherwise specified in the permit.

2. Measurement Frequency

Measurement frequency requirements found in Provision I.A. shall mean:

- a. Seven days per week shall mean daily.
- b. Five days per week shall mean any five days of discharge during a calendar weekly period of Sunday through Saturday.
- c. Three days per week shall mean any three days of discharge during a calendar week.
- d. Two days per week shall mean any two days of discharge during a calendar week.
- e. One day per week shall mean any day of discharge during a calendar week.
- f. Two days per month shall mean any two days of discharge during the month that are no less than seven days apart. However, if discharges occur only during one seven-day period in a month, then two days per month shall mean any two days of discharge during that seven day period.
- g. One day per month shall mean any day of discharge during the calendar month.
- h. Quarterly shall mean any day of discharge during each calendar quarter.
- i. The Permittee may increase the frequency of sampling, listed in Provisions I.B.2.a through I.B.2.h; however, all sampling results are to be reported to the Department.

3. 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. 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.

4. 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.
5. Records Retention and Production
- a. 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 should not be submitted unless requested.
 - b. 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.
6. Reduction, Suspension or Termination of Monitoring and/or Reporting
- a. The Director may, with respect to any point source identified in Provision I.A. of this permit, authorize the Permittee to reduce, suspend or terminate the monitoring and/or reporting required by this permit upon the submission of a written request for such reduction, suspension or termination by the Permittee, supported by sufficient data which demonstrates to the satisfaction of the Director that the discharge from such point source will continuously meet the discharge limitations specified in Provision I.A. of this permit.
 - b. It remains the responsibility of the Permittee to comply with the monitoring and reporting requirements of this permit until written authorization to reduce, suspend or terminate such monitoring and/or reporting is received by the Permittee from the Director.
7. 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. At a minimum, flow measurement devices shall be calibrated at least once every 12 months.

C. DISCHARGE REPORTING REQUIREMENTS

1. Reporting of Monitoring Requirements
- a. The Permittee shall conduct the required monitoring in accordance with the following schedule:
 - (1) **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.
 - (2) **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 should be reported on the last DMR due for the quarter (i.e., March, June, September and December DMRs).
 - (3) **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 reported on the last DMR due for the month of the semiannual period (i.e., June and December DMRs).
 - (4) **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 reported on the December DMR.

- b. The Permittee shall submit discharge monitoring reports (DMRs) on the forms approved by the Department and in accordance with the following schedule:
- (1) **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 the month following the month the permit becomes effective. 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, unless otherwise directed by the Department.
 - (2) **REPORTS OF QUARTERLY TESTING** shall be submitted on a quarterly basis. The first report is due on the 28th day of the month following the first complete calendar quarter the permit becomes effective. 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, unless otherwise directed by the Department.
 - (3) **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, unless otherwise directed by the Department.
 - (4) **REPORTS OF ANNUAL TESTING** shall be submitted on an annual basis. Unless specified elsewhere in the permit, 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, unless otherwise directed by the Department.
- 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. by utilizing the Department's web-based Electronic Environmental (E2) Reporting System.
- (1) If the permittee is unable to complete the electronic submittal of DMR data due to technical problems originating with the Department's E2 Reporting 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.

If the E2 Reporting System is down on the 28th 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 E2 Reporting System resuming operation, the permittee shall enter the data into the E2 Reporting System, unless an alternate timeframe is approved by the Department. An attachment should be included with the E2 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 and Regulations, 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
Environmental Data Section, Permits & Services Division
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
Environmental Data Section, Permits & Services Division
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
Municipal Section, Water Division
Post Office Box 301463
Montgomery, Alabama 36130-1463**

Certified and Registered Mail shall be addressed to:

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

- g. If this permit is a reissuance, 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 Notifications and Reports

- a. The Permittee shall notify the Department if, for any reason, the Permittee's discharge:
- (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) Potentially threatens human health or welfare;
 - (3) Threatens fish or aquatic life;
 - (4) Causes an in-stream water quality criterion to be exceeded;
 - (5) 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);
 - (6) Contains a quantity of a hazardous substance that may be harmful to public health or welfare under Section 311(b)(4) of the FWPCA, 33 U.S.C. Section 1321(b)(4);
 - (7) Exceeds any discharge limitation for an effluent parameter listed in Part I.A. as a result of an unanticipated bypass or upset; or
 - (8) Is an unpermitted direct or indirect discharge of a pollutant to a water of the state. (Note that unpermitted discharges properly reported to the Department under any other requirement are not required to be reported under this provision.)

The Permittee shall orally or electronically provide notification of any of the above occurrences, describing the circumstances and potential effects, to the Director or Designee within 24-hours after the Permittee becomes aware of the occurrence of such discharge. In addition to the oral or electronic notification, the Permittee shall submit a report to the Director or Designee, as provided in Provision I.C.2.c. or I.C.2.e., no later than five days after becoming aware of the occurrence of such discharge or occurrence.

- b. If, for any reason, the Permittee's discharge does not comply with any limitation of this permit, then the Permittee shall submit a written report to the Director or Designee, as provided in Provision I.C.2.c below. This report must be submitted with the next Discharge Monitoring Report required to be submitted by Provision I.C.1 of this permit after becoming aware of the occurrence of such noncompliance.
- c. Except for notifications and reports of notifiable SSOs which shall be submitted in accordance with the applicable Provisions of this permit, the Permittee shall submit the reports required under Provisions I.C.2.a. and b. to the Director or Designee on ADEM Form 421, available on the Department's website (<http://www.adem.state.al.us/DeptForms/Form421.pdf>). The completed Form must document the following information:
 - (1) A description of the discharge and cause of noncompliance;
 - (2) The period of noncompliance, including exact dates, times, and duration of the noncompliance. If the noncompliance is not corrected by the due date of the written report, then the Permittee shall provide an estimated date by which the noncompliance will be corrected; and
 - (3) A description of the steps taken by the Permittee and the steps planned to be taken by the Permittee to reduce or eliminate the noncompliant discharge and to prevent its recurrence.

d. Immediate notification

The Permittee shall provide notification to the Director, the public, the county health department, and any other affected entity such as public water systems, as soon as possible upon becoming aware of any notifiable sanitary sewer overflow. Notification to the Director shall be completed utilizing the Department's web-based electronic environmental SSO reporting system in accordance with Provision I.C.2.e.

- e. The Department is utilizing a web-based electronic environmental (E2) reporting system for notification and submittal of SSO reports. **If the Permittee is not already participating in the E2 Reporting System for SSO reports, the Permittee must apply for participation in the system within 30 days of coverage under this permit unless the Permittee submits in writing valid justification as to why it cannot participate and the Department approves in writing utilization of verbal notifications and hard copy SSO report submittals.** Once the Permittee is enrolled in the E2 Reporting System for SSO reports, the Permittee must utilize the system for notification and submittal of all SSO reports unless otherwise allowed by this permit. The Permittee shall include in the SSO reports the information requested by ADEM Form 415. In addition, the Permittee shall include the latitude and longitude of the SSO in the report except when the SSO is a result of an extreme weather event (e.g., hurricane). To participate in the E2 Reporting System for SSO reports, the Permittee Participation Package may be downloaded online at <https://e2.adem.alabama.gov/npdes>. If the E2 Reporting System is down (i.e., electronic submittal of SSO data cannot be completed due to technical problems originating with the Department's system), the Permittee is not relieved of its obligation to notify the Department or submit SSO reports to the Department by the required submittal date, and the Permittee shall submit the data in an alternate manner and format acceptable to the Department. Preapproved alternate acceptable methods include verbal reports, reports submitted via the SSO hotline, or reports submitted via fax, e-mail, mail, or hand-delivery such that they are received by the required reporting date. Within five calendar days of the E2 Reporting System resuming operation, the Permittee shall enter the data into the E2 Reporting System, unless an alternate timeframe is approved by the Department. For any alternate notification, records of the date, time, notification method, and person submitting the notification should be maintained by the Permittee. If a Permittee is allowed to submit SSO reports via an alternate method, the SSO report must be in a format approved by the Department and must be legible.
- f. The Permittee shall maintain a record of all known wastewater discharge points that are not authorized as permitted outfalls, including but not limited to SSOs. The Permittee shall include this record in its Municipal Water Pollution Prevention (MWPP) Annual Reports, which shall be submitted to the Department each year by May 31st for the prior calendar year period beginning January 1st and ending December 31st. The MWPP Annual Reports shall contain a list of all known wastewater discharge points that are not authorized as permitted outfalls and any discharges that occur prior to the headworks of the wastewater treatment plant covered by this permit. The Permittee shall also provide in the MWPP Annual Reports a list of any discharges reported during the applicable time period in accordance with Provision I.C.2.a. The Permittee shall include in its MWPP Annual Reports the following information for each known unpermitted discharge that occurred:
 - (1) The cause of the discharge;

- (2) Date, duration and volume of discharge (estimate if unknown);
- (3) Description of the source (e.g., manhole, lift station);
- (4) Location of the discharge, by latitude and longitude (or other appropriate method as approved by the Department);
- (5) The ultimate destination of the flow (e.g., surface waterbody, municipal separate storm sewer to surface waterbody). Location should be shown on a USGS quad sheet or copy thereof; and
- (6) Corrective actions taken and/or planned to eliminate future discharges.

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 or 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.

E. SCHEDULE OF COMPLIANCE

1. Compliance with discharge limits

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. Schedule

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 (BMP)

- 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 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. Certified Operator

The Permittee shall not operate any wastewater treatment plant unless the competency of the operator to operate such plant has been duly certified by the Director pursuant to AWPCA, and meets the requirements specified in ADEM Administrative Code, Rule 335-10-1.

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:

- (1) 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;
- (2) Have access to and copy, at reasonable times, any records that must be kept under the conditions of the permits;
- (3) Inspect any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under the permit; and
- (4) 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 or negate the Permittee's responsibility to apply for, obtain, or comply with other Federal, State, or Local Government permits, certifications, or licenses or to preclude from obtaining other federal, state, or local approvals, including those applicable to other ADEM programs and regulations.

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 Boulevard Montgomery, Alabama 36110-2059.
- 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

Prior to any facility expansion, process modification or any significant change in the method of operation of the Permittee's treatment works, the Permittee shall provide the Director with information concerning the planned expansion, modification or change. The Permittee shall apply for a permit modification at least 180 days prior to any facility expansion, process modification, any significant change in the method of operation of the Permittee's treatment works or other actions that could result in the discharge of additional pollutants or increase the quantity of a discharged pollutant or could result in an additional discharge point. This condition 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.

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. 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. Suspension

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

7. Stay

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. NOTICE TO DIRECTOR OF INDUSTRIAL USERS

1. The Permittee shall not allow the introduction of wastewater, other than domestic wastewater, from a new direct discharger prior to approval and permitting, if applicable, of the discharge by the Department.
2. The Permittee shall not allow an existing indirect discharger to increase the quantity or change the character of its wastewater, other than domestic wastewater, prior to approval and permitting, if applicable, of the increased discharge by the Department.
3. The Permittee shall report to the Department any adverse impact caused or believed to be caused by an indirect discharger on the treatment process, quality of discharged water, or quality of sludge. Such report shall be submitted within seven days of the Permittee becoming aware of the adverse impacts.

H. PROHIBITIONS

The Permittee shall not allow, and shall take effective enforcement action to prevent and terminate, the introduction of any of the following into its treatment works by industrial users:

1. Pollutants which create a fire or explosion hazard in the treatment works;
2. Pollutants which will cause corrosive structural damage to the treatment works, or dischargers with a pH lower than 5.0 s.u., unless the works are specifically designed to accommodate such discharges;
3. Solid or viscous pollutants in amounts which will cause obstruction of flow in sewers, or other interference with the treatment works;
4. Pollutants, including oxygen demanding pollutants, released in a discharge of such volume or strength as to cause interference in the treatment works;
5. Heat in amounts which will inhibit biological activity in the treatment plant resulting in interference or in such quantities that the temperature of the treatment plant influent exceeds 40°C (104° F) unless the treatment plant is designed to accommodate such heat; and
6. Pollutants in amounts which exceed any applicable pretreatment standard under Section 307 of FWPCA or any approved revisions thereof.

PART III ADDITIONAL REQUIREMENTS, CONDITIONS, AND LIMITATIONS

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, 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 are 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 this paragraph.
4. Final plans and specifications for a waste treatment facility at a new source or new discharger, or a modification to an existing waste treatment facility must be submitted to and examined by the Department prior to initiating construction of such treatment facility by the Permittee.
5. Upon completion of construction of waste treatment facilities and prior to operation of such facilities, the Permittee shall submit to the Department a certification from a registered professional engineer, licensed to practice in the State of Alabama, that the treatment facilities have been built according to plans and specifications submitted to and examined by the Department.

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 waste into waters of the state". Code of Alabama 1975, Section 22-22-1(b)(9).
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 8 equal volume samples collected at constant time intervals of not more than 1 hour 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 the arithmetic mean of all the composite or grab samples taken for the daily discharges collected in 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:
 - a. From which there is or may be a discharge of pollutants;
 - b. From which the discharge of pollutants did not commence prior to August 13, 1979, and which is not a new source; and

- c. 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. Notifiable sanitary sewer overflow – means an overflow, spill, release or diversion of wastewater from a sanitary sewer system that:
- Reaches a surface water of the State; or
 - May imminently and substantially endanger human health based on potential for public exposure including but not limited to close proximity to public or private water supply wells or in areas where human contact would be likely to occur.
31. Permit application – means forms and additional information that is required by ADEM Administrative Code Rule 335-6-6-.08 and applicable permit fees.
32. 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).
33. 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.
34. 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".
35. 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.
36. Receiving Stream – means the "waters" receiving a "discharge" from a "point source".
37. 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.
38. 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.
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 8 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 SPECIFIC REQUIREMENTS, CONDITIONS, AND LIMITATIONS

A. SLUDGE MANAGEMENT PRACTICES

1. Applicability
 - a. Provisions of Provision IV.A. apply to a sewage sludge generated or treated in treatment works that is applied to agricultural and non-agricultural land, or that is otherwise distributed, marketed, incinerated, or disposed in landfills or surface disposal sites.
 - b. Provisions of Provision IV.A. do not apply to:
 - (1) Sewage sludge generated or treated in a privately owned treatment works operated in conjunction with industrial manufacturing and processing facilities and which receive no domestic wastewater.
 - (2) Sewage sludge that is stored in surface impoundments located at the treatment works prior to ultimate disposal.
2. Submitting Information
 - a. If applicable, the Permittee must submit annually with its Municipal Water Pollution Prevention (MWPP) report the following:
 - (1) Type of sludge stabilization/digestion method;
 - (2) Daily or annual sludge production (dry weight basis);
 - (3) Ultimate sludge disposal practice(s).
 - b. The Permittee shall provide sludge inventory data to the Director as requested. These data may include, but are not limited to, sludge quantity and quality reported in Provision IV.A.2.a as well as other specific analyses required to comply with State and Federal laws regarding solid and hazardous waste disposal.
 - c. The Permittee shall give prior notice to the Director of at least 30 days of any change planned in the Permittee's sludge disposal practices.
3. Reopener or Modification
 - a. Upon review of information provided by the Permittee as required by Provision IV.A.2. or, based on the results of an on-site inspection, the permit shall be subject to modification to incorporate appropriate requirements.
 - b. If an applicable "acceptable management practice" or if a numerical limitation for a pollutant in sewage sludge promulgated under Section 405 of FWPCA is more stringent than the sludge pollutant limit or acceptable management practice in this permit. This permit shall be modified or revoked or reissued to conform to requirements promulgated under Section 405. The Permittee shall comply with the limitations no later than the compliance deadline specified in applicable regulations as required by Section 405 of FWPCA.

B. EFFLUENT TOXICITY LIMITATIONS AND BIOMONITORING REQUIREMENTS FOR CHRONIC TOXICITY

1. Chronic Toxicity Test
 - a. The permittee shall perform short-term chronic toxicity tests on the wastewater at Outfall 0012.
 - b. The samples shall be diluted using appropriate control water to the Instream Waste Concentration (IWC) which is **4.00 percent** effluent. The IWC is the actual concentration of effluent, after mixing, in the receiving stream during a 7-day, 10-year low flow period.
 - c. Any test result that shows a statistically significant reduction in survival, growth, or reproduction between the control and test samples at the 95% confidence level indicates chronic toxicity and shall constitute noncompliance with this permit.
2. General Test Requirements
 - a. A minimum of three (3) 24-hour composite samples shall be obtained for use in the above biomonitoring tests. Samples shall be collected every other day so that the laboratory receives water samples on the first, third, and fifth day of the seven-day test period. The holding time for each composite sample shall not exceed 36 hours. The control water shall be a water prepared in the laboratory in accordance with the EPA procedure described in EPA 821-R-02-013 (most current edition) or another control water selected by the Permittee and approved by the Department.
 - b. Test results shall be deemed unacceptable and the Permittee shall rerun the tests as soon as practical within the monitoring period for the following:
 - (1) For testing with *P. promelas*, effluent toxicity tests with control survival of less than 80% or if dry weight per surviving control organism is less than 0.25 mg;

- (2) For testing with *C. dubia*:, if the number of young per surviving control organism is less than 15 or if less than 60% of surviving control females produce three broods; or
 - (3) If the other requirements of the EPA Test Procedure are not met.
 - c. In the event of an invalid test, upon subsequent completion of a valid test, the results of all tests, valid and invalid, are to be reported to the Department along with an explanation of the tests performed and the test results.
 - d. Toxicity tests shall be conducted for the duration of this permit in the month of **OCTOBER**. Should results from the Annual Toxicity test indicate that Outfall 001-2 exhibits chronic toxicity, then the Permittee must conduct the follow-up testing described in Part IV.B.4.a. In addition, the Permittee may then also be required to conduct toxicity testing in the months of JANUARY, APRIL, JULY, and OCTOBER.
3. Reporting Requirements
 - a. The Permittee shall notify the Department in writing within 48 hours after toxicity has been demonstrated by the scheduled test(s).
 - b. Biomonitoring test results obtained during each monitoring period shall be summarized and reported using the appropriate Discharge Monitoring Report (DMR) form approved by the Department. In accordance with Section 2 of this part, an effluent toxicity report containing the information in Sections 2 and 6 shall be included with the DMR. Two copies of the test results must be submitted to the Department no later than 28 days after the month that tests were performed.
4. Additional Testing Requirements
 - a. If chronic toxicity is indicated (i.e., noncompliance with permit limit), then the Permittee must perform two additional valid chronic toxicity tests in accordance with these procedures to determine the extent and duration of the toxic condition. The toxicity tests shall run consecutively beginning on the first calendar week following the date that the Permittee became aware of the permit noncompliance. The results of these follow-up tests shall be submitted to the Department no later than 28 days following the month the tests were performed.
 - b. After evaluation of the results of the follow-up tests, the Department will determine if additional action is appropriate and may require additional testing and/or toxicity reduction measures. The permittee may be required to perform a Toxicity Identification Evaluation (TIE) and/or a Toxicity Reduction Evaluation (TRE). The TIE/TRE shall be performed in accordance with the most recent protocols and guidance outlined by EPA (e.g., EPA/600/2-88/062, EPA/600/R-92/080, EPA/600/R-91-003, EPA/600/R-92/081, EPA/833/B-99/022, and/or EPA/600/6-91/005F)
5. Test Methods

The tests shall be performed in accordance with the latest edition of the "EPA Short-Term Methods for Estimating the Chronic Toxicity of Effluents and Receiving Waters to Freshwater Organisms." The Larval Survival and Growth Test, Method 1000.0, shall be used for the fathead minnow (*Pimephales promelas*) test and the Survival and Reproduction Test, Method 1002.0, shall be used for the cladoceran (*Ceriodaphnia dubia*) test.
6. Effluent Toxicity Testing Reports

The following information shall be submitted with each DMR unless otherwise directed by the Department. The Department may at any times suspend or reinstate this requirement or may decrease or increase the frequency of submittals.

 - a. Introduction
 - (1) Facility name, location and county
 - (2) Permit number
 - (3) Toxicity testing requirements of permit
 - (4) Name of receiving water body
 - (5) Contract laboratory information (if tests are performed under contract)
 - (a) Name of firm
 - (b) Telephone number
 - (c) Address
 - (6) Objective of test
 - b. Plant Operations
 - (1) Discharge Operating schedule (if other than continuous)
 - (2) Volume of discharge during sample collection to include Mean daily discharge on sample collection dates (MGD, CFS, GPM)
 - (3) Design flow of treatment facility at time of sampling

c. Source of Effluent and Dilution Water

(1) Effluent samples

- (a) Sampling point
- (b) Sample collection dates and times (to include composite sample start and finish times)
- (c) Sample collection method
- (d) Physical and chemical data of undiluted effluent samples (water temperature, pH, alkalinity, hardness, specific conductance, total residual chlorine (if applicable), etc.)
- (e) Lapsed time from sample collection to delivery
- (f) Lapsed time from sample collection to test initiation
- (g) Sample temperature when received at the laboratory

(2) Dilution Water

- (a) Source
- (b) Collection/preparation date(s) and time(s)
- (c) Pretreatment (if applicable)
- (d) Physical and chemical characteristics (water temperature, pH, alkalinity, hardness, specific conductance, etc.)

d. Test Conditions

- (1) Toxicity test method utilized
- (2) End point(s) of test
- (3) Deviations from referenced method, if any, and reason(s)
- (4) Date and time test started
- (5) Date and time test terminated
- (6) Type and volume of test chambers
- (7) Volume of solution per chamber
- (8) Number of organisms per test chamber
- (9) Number of replicate test chambers per treatment
- (10) Test temperature, pH, and dissolved oxygen as recommended by the method (to include ranges)
- (11) Specify if aeration was needed
- (12) Feeding frequency, amount, and type of food
- (13) Specify if (and how) pH control measures were implemented
- (14) Light intensity (mean)

e. Test Organisms

- (1) Scientific name
- (2) Life stage and age
- (3) Source
- (4) Disease(s) treatment (if applicable)

f. Quality Assurance

- (1) Reference toxicant utilized and source
- (2) Date and time of most recent chronic reference toxicant test(s), raw data, and current control chart(s). (The most recent chronic reference toxicant test shall be conducted within 30 days of the routine.)
- (3) Dilution water utilized in reference toxicant test
- (4) Results of reference toxicant test(s) (NOEC, IC25, etc.); report concentration-response relationship and evaluate test sensitivity
- (5) Physical and chemical methods utilized

g. Results

- (1) Provide raw toxicity data in tabular form, including daily records of affected organisms in each concentration (including controls) and replicate
- (2) Provide table of endpoints: NOECs, IC25s, PASS/FAIL, etc. (as required in the applicable NPDES permit)
- (3) Indicate statistical methods used to calculate endpoints
- (4) Provide all physical and chemical data required by method
- (5) Results of test(s) (NOEC, IC25, PASS/FAIL, etc.), report concentration-response relationship (definitive test only), report percent minimum significant difference (PMSD) calculated for sublethal endpoints determined by hypothesis testing.

h. Conclusions and Recommendations

- (1) Relationship between test endpoints and permit limits

(2) Actions to be taken

1/ Adapted from "Short-Term Methods for Estimating the Chronic Toxicity of Effluents and Receiving Waters to Freshwater Organisms", Fourth Edition, October 2002 (EPA 821-R-02-013), Section 10, Report Preparation.

C. TOTAL RESIDUAL CHLORINE (TRC) REQUIREMENTS

1. If chlorine is not utilized for disinfection purposes, TRC monitoring under Part I of this Permit is not required. If TRC monitoring is not required (conditional monitoring), "*9" or "NODI = 9" (if hard copy) should be reported on the DMR forms.
2. Testing for TRC shall be conducted according to either the amperometric titration method or the DPD colorimetric method as specified in Section 408(C) or (E), Standards Methods for the Examination of Water and Wastewater, 18th edition. If chlorine is not detected prior to actual discharge to the receiving stream using one of these methods (i.e., the analytical result is less than the detection level), the Permittee shall report on the DMR form "*B", "NODI = B" (if hard copy), or "0". The Permittee shall then be considered to be in compliance with the daily maximum concentration limit for TRC.
3. This permit contains a maximum allowable TRC level in the effluent. The Permittee is responsible for determining the minimum TRC level needed in the chlorine contact chamber to comply with E.coli limits. The effluent shall be dechlorinated if necessary to meet the maximum allowable effluent TRC level.
4. The sample collection point for effluent TRC shall be at a point downstream of the chlorine contact chamber (downstream of dechlorination if applicable). The exact location is to be approved by the Director.

D. PLANT CLASSIFICATION

The Permittee shall report to the Director within 30 days of the effective date of this permit, the name, address and operator number of the certified wastewater operator in responsible charge of the facility. Unless specified elsewhere in this permit, this facility shall be classified in accordance with ADEM Admin. Code R. 335-10-1-.03.

E. POLLUTANT SCANS

The Permittee shall sample and analyze for the pollutants listed in 40 CFR 122 Appendix J Table 2. The Permittee shall provide data from a minimum of three samples collected within the four and one half years prior to submitting a permit application. Samples must be representative of the seasonal variation in the discharge from each outfall.

F. STORM WATER REQUIREMENTS

1. Prohibitions

- a. The Permittee shall not allow the discharge of non-storm water into permitted storm water outfall(s) unless said discharge is already subject to an NPDES permit.
- b. Pollutants removed in the course of treatment or control shall be disposed in a manner that complies with all applicable Department rules and regulations.

2. Operational and Management Practices

The permittee shall prepare and implement a Storm Water Pollution Prevention (SWPP) Plan within one year of the effective date of this permit.

a. In the SWPP Plan, the Permittee shall:

- (1) Assess the treatment plant site by developing and presenting site drainage maps, materials inventory, and best management operational practices. The plan shall also include a description of all spill or leak sources;
- (2) Describe mechanisms and procedures to prevent the contact of sewage sludge, screenings, raw or partially treated wastewater, or any other waste product or pollutant with storm water discharged from the facility;
- (3) Provide for daily inspection on workdays of any structures that function to prevent storm water pollution or that remove pollutants from storm water;
- (4) Provide for daily inspection of the facility in general to ensure that the SWPP Plan is continually implemented and effective;
- (5) Include a Best Management Practices (BMP) Plan that, as a minimum, addresses housekeeping, preventative maintenance, spill prevention and response, and non-storm water discharges;

- (6) Describe mechanisms and procedures to provide sediment control sufficient to prevent or control storm water pollution storm water by particles resulting from soil or sediment migration from the site due to significant clearing, grading, or excavation activities;
 - (7) Designate by position or name the person or persons responsible for the day to day implementation of the SWPP Plan; and
 - (8) Bear the signature of an individual meeting signatory requirements as defined in ADEM Administrative Code, Rule 335-6-6-.09.
- b. The Director or his designee may notify the permittee at any time that the SWPP Plan is deficient and will require correction of the deficiency. The permittee shall correct any SWPP Plan 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.
- c. Administrative Procedures
- (1) A copy of the SWPP Plan shall be maintained at the facility and shall be available for inspection by the Department.
 - (2) A log of daily inspections required by Provision IV.F.2.a.(3.) of the permit shall be maintained at the facility and shall be made available for inspection by the Department upon request. The log shall contain records of all inspections performed and each daily entry shall be signed by the person performing the inspection.
 - (3) The Permittee shall provide training for any personnel required to implement the SWPP Plan and shall retain documentation of such training at the facility. Training records for all personnel shall be available for inspection by the Department. Training shall be performed prior to the date implementation is required.
3. Monitoring Requirements
- a. Storm water discharged through each storm water outfall shall be sampled once per calendar year, using first flush grab samples (FFGS) collected during the first 30 minutes of discharge.
 - b. The total volume of storm water discharged for the event must be monitored, including the date and duration (in hours) 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 in accordance with Provision I.B.5. of this permit. The volume may be measured using flow measurement devices or may be estimated using any method approved in writing by the Department.

G. SANITARY SEWER OVERFLOW RESPONSE PLAN

1. SSO Response Plan

Within 120 days of the effective date of this Permit, the Permittee shall develop a Sanitary Sewer Overflow (SSO) Response Plan to establish timely and effective methods for responding to notifiable sanitary sewer overflows. The SSO Response Plan shall address each of the following:

- a. General Information:
 - (1) Approximate population of City/Town, if applicable
 - (2) Approximate number of customers served by the Permittee
 - (3) Identification of any subbasins designated by the Permittee, if applicable
 - (4) Identification of estimated linear feet of sanitary sewers
 - (5) Number of Pump/Lift Stations in the collection system
- b. Responsibility Information:
 - (1) The title(s) and contact information of key position(s) who will coordinate the SSO response, including information for a backup coordinator in the event that the primary SSO coordinator is unavailable. The SSO coordinator is the person responsible for assessing the SSO and initiating a series of response actions based on the type, severity, and destination of the SSO, except for routine SSOs for which the coordinator may pre-

approve written procedures. Routine SSOs are those for which the corrective action procedures are generally consistent.

- (2) The title(s), and contact information of key position(s) who will respond to SSOs, including information for backup responder(s) in the event the primary responder(s) are unavailable (i.e., position(s) who provide notification to the Department, the public, the county health department, and other affected entities such as public water systems; position(s) responsible for organizing crews for response; position(s) responsible for addressing public inquiries)
- c. SSO and Surface Water Assessment
- (1) Identification of locations within the collection system at which an SSO is likely to occur (e.g., based upon historical SSOs, lift stations where electricity may be lost, etc.)
 - (2) A map of the general collection system area, including identification of surface waterbodies and the location(s) of public drinking water source(s). Mapping of all collection system piping, pump stations, etc. is not required; however, if this information is already available, it should be included.
 - (3) Identification of surface waterbodies within the collection system area which are classified as Swimming according to ADEM Admin. Code chap. 335-6-11. References available to assist in this requirement include: <http://www.adem.state.al.us/alEnviroRegLaws/files/Division6Vol1.pdf> and http://gis.adem.alabama.gov/ADEM_Dash/use_class/index.html
 - (4) Identification of surface waterbodies within the collection system area which are not classified as Swimming as indicated in paragraph c above, but are known locally as areas where swimming occurs or as areas that are heavily recreated
- d. Public Reporting of SSOs
- (1) Contact information for the public to report an SSO to the Permittee, during both normal and outside of normal business hours (e.g., telephone number, website, email address, etc.)
 - (2) Information requested from the person reporting an SSO to assist the Permittee in identifying the SSO (e.g., date, time, location, contact information)
 - (3) Procedures for communication of the SSO report to the appropriate positions for follow-up investigation and response, if necessary
- e. Procedures to immediately notify the Department, the county health department, and other affected entities (such as public water systems) upon becoming aware of notifiable SSOs
- f. Public Notification Methods for SSOs
- (1) A listing of methods that are feasible, as determined by the Permittee, for public notifications (e.g., flyers distributed to nearby residents; signs posted at the location of the SSO, where the SSO enters a water of the state, and/or at a central public location; signs posted at fishing piers, boat launches, parks, swimming waterbodies, etc.; website and/or social media notifications; local print or radio and broadcast media notifications; "opt in" email, text message, or automated phone message notifications)
 - (a) If signage is a feasible method for public notification, procedures for use and removal of signage (e.g., availability and maintenance of signs, appropriate duration of postings)
 - (2) Minimum information to be included in public notifications (e.g., identification that an SSO has occurred, date, duration if known, estimated volume if known, location of the SSO by street address or other appropriate method, initial destination of the SSO)
 - (3) Procedures developed by the Permittee for determining the appropriate public notification method(s) based upon the potential for public exposure to health risks associated with the SSO
- g. Standard Procedures shall be developed by the Permittee and shall include, at a minimum:
- (1) General SSO Response Procedures (e.g., procedures for dispatching staff to assess/correct an SSO; procedures for routine SSO corrective actions such as those for sewer blockages, overflowing manholes, line breakages, pump station power failure, etc.; procedures for disinfection of affected area, if applicable);

- (2) Procedures for collection and proper disposal of the SSO, if feasible.
 - (3) General procedures for coordinating instream water quality monitoring, including, but not limited to, procedures for mobilizing staff, collecting samples, and typical test methods should the Department or the Permittee determine monitoring is appropriate following an SSO. Identification of a contractor who will collect and analyze the sample(s) may be listed in lieu of the procedures.
 - (4) References to other documents (such as Standard Operating Procedures for SSO Responses) may be acceptable for this section; however, the referenced document shall be identified and shall be reviewed at a frequency of at least that required by the Administrative Procedures Section.
- h. Date of the SSO Response Plan, dates of all modifications and/or reviews, the title and signature of the reviewer(s) for each date and the signature of the responsible official or the appropriate designee.
2. SSO Response Plan Implementation

Except as otherwise required by this Permit, the Permittee shall fully implement the SSO Response Plan as soon as practicable, but no later than 180 days after the effective date of this Permit.
 3. Department Review of the SSO Response Plan
 - a. When requested by the Director or his designee, the Permittee shall make the SSO Response Plan available for review by the Department.
 - b. Upon review, the Director or his designee may notify the Permittee that the SSO Response Plan is deficient and require modification of the Plan.
 - c. Within thirty days of receipt of notification, or an alternate timeframe as approved by the Department, the Permittee shall modify any SSO Response Plan deficiency identified by the Director or his designee and shall certify to the Department that the modification has been made.
 4. SSO Response Plan Administrative Procedures
 - a. The Permittee shall maintain a copy of the SSO Response Plan at the permitted facility or an alternate location approved by the Department in writing and shall make it available for inspection by the Department.
 - b. The Permittee shall make a copy of the SSO Response Plan available to the public upon written request within 30 days of such request. The Permittee may redact information which may present security issues, such as location of public water supplies, identification of specific details of vulnerabilities, employee information, etc.
 - c. The Permittee shall provide training for any personnel required to implement the SSO Response Plan and shall retain at the facility documentation of such training. This documentation shall be available for inspection by the Department. Training shall be provided for existing personnel prior to the date by which implementation of the SSO Response Plan is required and for new personnel as soon as possible. Should significant revisions be made to the SSO Response Plan, training regarding the revisions shall be conducted as soon as possible.
 - d. The Permittee shall complete a review and evaluation of the SSO Response Plan at least once every three years. Documentation of the SSO Response Plan review and evaluation shall be signed and dated by the responsible official or the appropriate designee as part of the SSO Response Plan.

NPDES PERMIT RATIONALE

NPDES Permit No: **AL0027863** Date: March 25, 2020

Permit Applicant: The Water Works & Sanitary Sewer Board of the City of Montgomery
Post Office Box 1631
Montgomery, Alabama 36102

Location: Catoma Creek WWTP
6000 Richard E. Hanan Drive
Montgomery, Alabama 36108
Montgomery County

Draft Permit is: Initial Issuance:
Reissuance due to expiration:
Modification of existing permit:
Revocation and Reissuance:

Basis for Limitations: Water Quality Model: CBOD₅, NH₃N, TKN, and DO
Reissuance with no modification: NH₃N, TKN, DO, TSS, pH, and
Percent Removals
Instream calculation at 7Q10: IWC ≈ 4%
Toxicity based: TRC
Secondary Treatment Levels: TSS and Percent Removals
Other (described below): E.coli and pH

Design Flow in Million Gallons per Day: 35 MGD

Major: Yes

Description of Discharge: Outfall Number 0012; Effluent discharge to Alabama
River (Woodruff Lake), which is classified as Fish and
Wildlife (F&W).

Outfall Numbers 002S and 003S; Storm water runoff to
Antioch Branch, which is classified as Fish and Wildlife
(F&W).

Discussion: This permit is a reissuance due to expiration. The effluent limits for Five-Day Carbonaceous Biochemical Oxygen Demand (CBOD₅), Total Ammonia as Nitrogen (NH₃N), Total Kjeldahl Nitrogen (TKN), and Dissolved Oxygen (DO) were developed based on a Waste Load Allocation (WLA) model completed by the Department's Water Quality Branch on January 8, 2020.

CBOD₅ in this proposed permit now has seasonal limits. The summer (May through October) and winter (November through April) monthly average limits for CBOD₅ are 22.0 mg/L and 25.0 mg/L, respectively; while, the summer and winter monthly average limits for NH₃N are 10.0 mg/L and 20.0 mg/L, respectively. The summer and winter monthly average limits for TKN are 20.0 mg/L and 40.0 mg/L, while DO has a daily minimum limit of 2.0 mg/L.

The pH limits were developed in accordance with the Water-Use designation of the receiving stream and the Municipal Section's Permit Development Guidance. The daily minimum and daily maximum limits are 6.0 s.u. and 9.0 s.u., respectively.

The monthly average Total Suspended Solids (TSS) limit is established at 30.0 mg/L in accordance with ADEM's Permit Development Rationale and 40 CFR 133.102. Minimum percent removal limits of 85 percent are imposed for both CBOD₅ and TSS in accordance with 40 CFR 133.102.

The receiving stream is the Alabama River (Woodruff Lake) and it is a Tier I waterbody. The stream is not listed on the current 303(d) list and there are no State of Alabama TMDL affecting this discharge point at this time. However, the storm water monitoring points are upstream of the Catoma Creek-Antioch Branch segment which has a September 23, 2009 TMDL for pathogens; however, the Antioch Branch is not listed on the current 303 (d) list. The Department conducted a review of Discharge Monitoring Reports and the continuation of monitoring along with the requirement in Part II.D.2 of the Permit should be consistent with the assumptions and requirements of the TMDL. In addition, this permit issuance does not include a facility expansion. Therefore the amount of E. Coli being discharged should not change significantly.

This permit imposes monthly monitoring for the following nutrient-related parameters: Total Phosphorus (TP) and Nitrate plus Nitrite-Nitrogen (NO₂+NO₃N). Monitoring for these nutrient-related parameters is imposed so that sufficient information will be available regarding the nutrient contribution from this point source, should it be necessary at some later time to impose nutrient limits on this discharge. The monitoring frequency will be once per month.

This Permittee treats both municipal and industrial wastewater, and is classified as a major facility. Therefore, the Department completed a Reasonable Potential Analysis (RPA) of the wastewater data submitted in EPA Form 2A Table C of the Permittee's application (i.e., per 40 CFR Par 122 Appendix J – Table 2) and data from the Permittee's Discharge Monitoring Reports. The RPA indicated whether any pollutants in the treated effluent have the potential to contribute to excursions of Alabama's in-stream water quality standards. The RPA was based on a 7Q10 of 4056 cfs, a mean annual flow of 24,156 cfs, and a hardness of 50.0 mg/L. Additional instream background data was not available. For this discharge, the RPA indicates that no pollutants in the treated effluent would likely contribute to excursions of Alabama's instream water quality standards. Total Recoverable Mercury monitoring is not included in this permit based on the Reasonable Potential reassessment using the effluent DMR data for Mercury showing no reasonable potential for mercury to contribute excursions to the receiving water. Removing monitoring for Mercury is not backsliding because it is consistent with the Department's anti-degradation policy and water quality standards are being attained.

The Department revised bacteriological criteria in ADEM Administrative Code R.335-6-10-.09. As a result, this permit includes E. coli limits and seasons that are consistent with the revised regulations. The imposed E. coli limits were determined based on the water-use classification of the receiving stream. Since Alabama River (Woodruff Lake) is classified as Fish & Wildlife, the E. coli limits for summer (May through October) are 126 col/100 mL (monthly average) and 298 col/100 mL (daily maximum), while the limits for the winter (November through April) are 548 col/ 100 mL (monthly average) and 2507 col/100 mL (daily maximum).

Monthly average and daily maximum Total Residual Chlorine (TRC) limits of 0.835 mg/L and 1.0 mg/L are being imposed at Outfall 0012. The TRC limits were developed based on EPA suggested WQ criteria and the Department's Permit Development Rationale, and should be protective of acute and chronic toxicity criteria in the receiving stream. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR.

Based on the Department's review of the application and receiving water conditions, chronic toxicity testing is warranted in this proposed permit. Testing is required yearly during the month of October. The IWC for the facility is 4%. The IWC was based on a January 8, 2020 Mixing Zone Analysis performed by the Department's Water Quality Branch.

In the permit application, the Permittee reported two storm water outfalls from the facility. The outfalls for storm water runoff monitoring are Outfall 002S and 003S in the permit. Storm water monitoring will be required on an annual basis. The requirement to report the monthly average flow is being removed from storm water monitoring as it was inadvertently included in the previous permit. Therefore, backsliding would not be applicable since Water Quality standards will be attained and it is consistent with the Department's anti-degradation policy.

The monitoring frequency for most parameters is three days per week. The monitoring frequency for nutrient-related parameters (TP and $\text{NO}_2+\text{NO}_3\text{N}$) is once per month. Flow is to be monitored continuously as in the previous permit. The monitoring frequency for percent removals will be monthly.

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 application submitted by the facility is not for a new discharge or expanded discharge to a Tier II water, so the applicant is not required to demonstrate that the discharge is necessary for economic and social development.

Prepared by: Torbert

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	Catoma Creek WWTP	
NPDES Permit Number:	AL0027863	
Receiving Stream:	Alabama River (Woodruff Lake)	
Facility Design Flow (Qw):	35.000 MGD	
Receiving Stream 7Q10:	4056.000 cfs	
Receiving Stream 1Q10:	3042.000 cfs	(Estimated at 0.75 * 7Q10)
Winter Headwater Flow (WHF):	6313.00 cfs	
Summer Temperature for CCC:	30 deg. Celsius	
Winter Temperature for CCC:	20 deg. Celsius	
Headwater Background NH3-N Level:	0.05 mg/l	
Receiving Stream pH:	7.0 s.u.	
Headwater Background FC Level (summer):	N/A.	(Only applicable for facilities with diffusers.)
(winter):	N/A.	

The Stream Dilution Ratio (SDR) is calculated using the 7Q10 for all stream classifications.

$$\text{Stream Dilution Ratio (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 1.32\%$$

AMMONIA TOXICITY LIMITATIONS

Toxicity-based ammonia limits are calculated in accordance with the Ammonia Toxicity Protocol and the General Guidance for *Writing Water Quality Based Toxicity Permits*.

If the Limiting Dilution is less than 1%, the waterbody is considered stream-dominated and the CMC applies.

If the Limiting Dilution is greater than 1%, the waterbody is considered effluent-dominated and the CCC applies.

$$\text{Limiting Dilution} = \frac{Q_w}{7Q_{10} + Q_w} = 1.32\% \quad \text{Effluent-Dominated, CCC Applies}$$

Criterion Maximum Concentration (CMC): $CMC = 0.411 / (1 + 10^{(7.204 - pH)}) + 58.4 / (1 + 10^{(pH - 7.204)})$

Criterion Continuous Concentration (CCC): $CCC = [0.0577 / (1 + 10^{(7.688 - pH)}) + 2.487 / (1 + 10^{(pH - 7.688)})] * \text{Min}[2.85, 1.45 * 10^{(0.028 * (25 - T))}]$

	<u>CMC</u>	<u>CCC</u>
Allowable Summer Instream NH3-N:	36.09 mg/l	2.18 mg/l
Allowable Winter Instream NH3-N:	36.09 mg/l	4.15 mg/l

$$\text{Summer NH}_3\text{-N Toxicity Limit} = \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} = 161.6 \text{ mg/l NH}_3\text{-N at 7Q}_{10}$$

$$\text{Winter NH}_3\text{-N Toxicity Limit} = \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} = 482.2 \text{ mg/l NH}_3\text{-N at Winter Flow}$$

The ammonia limits established in the permit will be the lesser of the DO-based ammonia limit (from the wasteload allocation model) or the toxicity limits calculated above.

	<u>DO-based NH3-N limit</u>	<u>Toxicity-based NH3-N limit</u>
Summer	10.00 mg/l NH3-N	161.60 mg/l NH3-N
Winter	20.00 mg/l NH3-N	482.20 mg/l NH3-N

Summer: The DO based limit of 10.00 mg/l NH3-N applies.

Winter: The DO based limit of 20.00 mg/l NH3-N applies.

TOXICITY TESTING REQUIREMENTS (REFERENCE: MUNICIPAL BRANCH TOXICITY PERMITTING STRATEGY)

The following factors trigger toxicity testing requirements:

1. Facility design flow is equal to or greater than 1.0 MGD (major facility).
2. There are significant industrial contributors (SID permits).

Acute toxicity testing is specified for A&I receiving streams, or for stream dilution ratios of 1% or less.

Chronic toxicity testing is specified for all other situations requiring toxicity testing.

Chronic toxicity testing is required

Instream Waste Concentration (IWC) = Based on Cormix Model = **3.79%** Note: This number will be rounded up for toxicity testing purposes.

DISINFECTION REQUIREMENTS

Bacteria limits are required, and will be the water quality limit for the receiving stream, except where diffusers are used the limit may be adjusted for the dilution provided by the diffuser.

See the attached Disinfection Guidance for applicable stream standards.

(Non-coastal limits apply)

Applicable Stream Classification: **Fish & Wildlife**

Disinfection Type: **Chlorination**

Limit calculation method: **Limits adjusted for the dilution provided by the diffuser.**

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
<u>E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)</u>		
Monthly limit as monthly average (November through April):	548	528
Monthly limit as monthly average (May through October):	126	126
Daily Max (November through April):	2507	2507
Daily Max (May through October):	298	298
<u>Enterococci (applies to Coastal)</u>		
Monthly limit as geometric mean (November through April):	Not applicable	Not applicable
Monthly limit as geometric mean (May through October):	Not applicable	Not applicable
Daily Max (November through April):	Not applicable	Not applicable
Daily Max (May through October):	Not applicable	Not applicable

MAXIMUM ALLOWABLE CHLORINATION LIMITS

Toxicity-based chlorine limits are calculated in accordance with the General Guidance for Writing Water Quality Based Toxicity Permits.

Chlorine has been shown to be acutely toxic at 0.019 mg/l and chronically toxic at 0.011 mg/l.

Maximum allowable TRC in effluent:	0.835 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	1.442 mg/l (acute)	(0.019)/(SDR)

NOTE: A maximum chlorine limit will be imposed such that the instream concentration will not exceed acutely toxic concentrations in A & I streams and chronically toxic concentrations in all other streams, but may not exceed 1.0 mg/l.

Prepared By: Shanda Torbert Date: 3/23/2020



Alabama Department of Environmental Management
adem.alabama.gov

1400 Coliseum Blvd. 36110-2400 ■ Post Office Box 301463
Montgomery, Alabama 36130-1463
(334) 271-7700 ■ FAX (334) 271-7950

FACT SHEET

**APPLICATION FOR
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
PERMIT TO DISCHARGE POLLUTANTS TO WATERS OF
THE STATE OF ALABAMA**

Date: September 21, 2020

Prepared By: Shanda Torbert

NPDES Permit No. AL0027863

1. Name and Address of Applicant:

The Water Works & Sanitary Sewer Board of the City of Montgomery
Post Office Box 1631
Montgomery, AL 36102

2. Name and Address of Facility:

Catoma Creek WWTP
6000 Richard E. Hanan Drive
Montgomery, Alabama 36108

3. Description of Applicant's Type of Facility and/or Activity Generating the Discharge:

Waste Water Treatment Plant

4. Applicant's Receiving Waters

<u>Receiving Waters</u>	<u>Classifications</u>
Alabama River (Woodruff Lake)	F&W
Antioch Branch	F&W

For the Outfall latitude and longitude see the permit application.

5. Permit Conditions:

See attached Rationale and Draft Permit.

6. PROCEDURES FOR THE FORMULATION OF FINAL DETERMINATIONS

a. Comment Period

The Alabama Department of Environmental Management proposes to issue this NPDES permit subject to the limitations and special conditions outlined above. This determination is tentative.

Interested persons are invited to submit written comments on the draft permit to the following address:

Birmingham Branch
110 Vulcan Road
Birmingham, AL 35209-4702
(205) 942-6168
(205) 941-1603 (FAX)

Decatur Branch
2715 Sandlin Road, S.W.
Decatur, AL 35603-1333
(256) 353-1713
(256) 340-9359 (FAX)



Mobile Branch
2204 Perimeter Road
Mobile, AL 36615-1131
(251) 450-3400
(251) 479-2593 (FAX)

Mobile-Coastal
3664 Dauphin Street, Suite B
Mobile, AL 36608
(251) 304-1176
(251) 304-1189 (FAX)

Jeffery W. Kitchens, Chief
ADEM-Water Division
1400 Coliseum Blvd.
[Mailing address: PO Box 301463; Zip 36130-1463]
Montgomery, Alabama 36110-2400
(334) 271-7823
water-permits@adem.alabama.gov

All comments received prior to the closure of the public notice period (see public notice for date) will be considered in the formulation of the final determination with regard to this permit.

b. Public Hearing

A written request for a public hearing may be filed within the public notice period and must state the nature of the issues proposed to be raised in the hearing. A request for a hearing should be filed with the Department at the following address:

Jeffery W. Kitchens, Chief
ADEM-Water Division
1400 Coliseum Blvd.
[Mailing address: PO Box 301463; Zip 36130-1463]
Montgomery, Alabama 36110-2400
(334) 271-7823
water-permits@adem.alabama.gov

The Director shall hold a public hearing whenever it is found, on the basis of hearing requests, that there exists a significant degree of public interest in a permit application or draft permit. The Director may hold a public hearing whenever such a hearing might clarify one or more issues involved in the permit decision. Public notice of such a hearing will be made in accordance with ADEM Admin. Code r. 335-6-6-.21.

c. Issuance of the Permit

All comments received during the public comment period shall be considered in making the final permit decision. At the time that any final permit decision is issued, the Department shall prepare a response to comments in accordance with ADEM Admin. Code r. 335-6-6-.21. **The permit record, including the response to comments, will be available to the public via the eFile System (<http://app.adem.alabama.gov/eFile/>) or an appointment to review the record may be made by writing the Permits and Services Division at the above address.**

Unless a request for a stay of a permit or permit provision is granted by the Environmental Management Commission, the proposed permit contained in the Director's determination shall be issued and effective, and such issuance will be the final administrative action of the Alabama Department of Environmental Management.

d. Appeal Procedures

As allowed under ADEM Admin. Code chap. 335-2-1, any person aggrieved by the Department's final administrative action may file a request for hearing to contest such action. Such requests should be received by the Environmental Management Commission within thirty days of issuance of the permit. Requests should be filed with the Commission at the following address:

**Alabama Environmental Management Commission
1400 Coliseum Blvd
(Mailing Address: Post Office Box 301463; Zip 36130-1463)
Montgomery, Alabama 36110-2059**

All requests must be in writing and shall contain the information provided in ADEM Admin. Code r. 335-2-1-.04.

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$							Enter Max Daily	Enter Avg Daily	Partition Coefficient (Stream / Lake)	
ID	Pollutant	Carcinogen Yes*	Type	Background from upstream source (C _{d1}) Daily Max	Background from upstream source (C _{d2}) Monthly Avg	Background Instream (C _s) Daily Max	Background Instream (C _s) Monthly Avg	Discharge as reported by Applicant (C _d) Max	Discharge as reported by Applicant (C _d) Avg	Partition Coefficient (Stream / Lake)
1	Antimony		Metals	0	0	0	0	0	0	
2	Arsenic**	YES	Metals	0	0	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0	0	
4	Cadmium**		Metals	0	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	0	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	0	0	
7	Copper**		Metals	0	0	0	0	0	0	0.388
8	Lead**		Metals	0	0	0	0	0	0	0.206
9	Mercury**		Metals	0	0	0	0	0.009	0.00277	0.302
10	Nickel**		Metals	0	0	0	0	23.4	20	0.505
11	Selenium		Metals	0	0	0	0	0	0	
12	Silver		Metals	0	0	0	0	0	0	
13	Thallium		Metals	0	0	0	0	0	0	
14	Zinc**		Metals	0	0	0	0	144	76.7	0.330
15	Cyanide		Metals	0	0	0	0	8.2	7.5	
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0	
17	Hardness (As CaCO3)		Metals	0	0	0	0	125000	116000	
18	Acrolein		VOC	0	0	0	0	0	0	
19	Acrylonitrile*	YES	VOC	0	0	0	0	0	0	
20	Aldrin	YES	VOC	0	0	0	0	0	0	
21	Benzene*	YES	VOC	0	0	0	0	0	0	
22	Bromoform*	YES	VOC	0	0	0	0	0	0	
23	Carbon Tetrachloride*	YES	VOC	0	0	0	0	0	0	
24	Chlordane	YES	VOC	0	0	0	0	0	0	
25	Chlorobenzene		VOC	0	0	0	0	0	0	
26	Chlorodibromo-Methane*	YES	VOC	0	0	0	0	4.36	4	
27	Chloroethane		VOC	0	0	0	0	0	0	
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	0	0	
29	Chloroform*	YES	VOC	0	0	0	0	13.5	12.8	
30	4,4'-DDD	YES	VOC	0	0	0	0	0	0	
31	4,4'-DDE	YES	VOC	0	0	0	0	0	0	
32	4,4'-DDT	YES	VOC	0	0	0	0	0	0	
33	Dichlorobromo-Methane*	YES	VOC	0	0	0	0	9.3	5.5	
34	1,1-Dichloroethane*		VOC	0	0	0	0	0	0	
35	1,2-Dichloroethane*	YES	VOC	0	0	0	0	0	0	
36	Trans-1,2-Dichloro-Ethylene		VOC	0	0	0	0	0	0	
37	1,1-Dichloroethylene*	YES	VOC	0	0	0	0	0	0	
38	1,2-Dichloropropane		VOC	0	0	0	0	0	0	
39	1,3-Dichloro-Propylene		VOC	0	0	0	0	0	0	
40	Dieldrin	YES	VOC	0	0	0	0	0	0	
41	Ethylbenzene		VOC	0	0	0	0	0	0	
42	Methyl Bromide		VOC	0	0	0	0	0	0	
43	Methyl Chloride		VOC	0	0	0	0	0	0	
44	Methylene Chloride*	YES	VOC	0	0	0	0	0	0	
45	1,1,1,2-Tetrachloro-Ethane*	YES	VOC	0	0	0	0	0	0	
46	Tetrachloro-Ethylene*	YES	VOC	0	0	0	0	0	0	
47	Toluene		VOC	0	0	0	0	0	0	
48	Toxaphene	YES	VOC	0	0	0	0	0	0	
49	Tributyltine (TBT)	YES	VOC	0	0	0	0	0	0	
50	1,1,1-Trichloroethane		VOC	0	0	0	0	0	0	
51	1,1,2-Trichloroethane*	YES	VOC	0	0	0	0	0	0	
52	Trichloroethylene*	YES	VOC	0	0	0	0	0	0	
53	Vinyl Chloride*	YES	VOC	0	0	0	0	0	0	
54	p-Chloro-H-Cresol		Acids	0	0	0	0	0	0	
55	2-Chlorophenol		Acids	0	0	0	0	0	0	
56	2,4-Dichlorophenol		Acids	0	0	0	0	0	0	
57	2,4-Dimethylphenol		Acids	0	0	0	0	0	0	
58	4,6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	
59	2,4-Dinitrophenol		Acids	0	0	0	0	0	0	
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0	0	
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0	0	
62	2-Nitrophenol		Acids	0	0	0	0	0	0	
63	4-Nitrophenol		Acids	0	0	0	0	0	0	
64	Pentachlorophenol*	YES	Acids	0	0	0	0	0	0	
65	Phenol		Acids	0	0	0	0	0	0	
66	2,4,6-Trichlorophenol*	YES	Acids	0	0	0	0	0	0	
67	Acephenanthrene		Bases	0	0	0	0	0	0	
68	Acenaphthylene		Bases	0	0	0	0	0	0	
69	Anthracene		Bases	0	0	0	0	0	0	
70	Benzidine		Bases	0	0	0	0	0	0	
71	Benzo(A)Anthracene*	YES	Bases	0	0	0	0	0	0	
72	Benzo(A)Pyrene*	YES	Bases	0	0	0	0	0	0	
73	3,4-Benzo-Fluoranthene		Bases	0	0	0	0	0	0	
74	Benzo(G)Fluoranthene		Bases	0	0	0	0	0	0	
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	0	
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0	
77	Bis (2-Chloroethyl) Ether*	YES	Bases	0	0	0	0	0	0	
78	Bis (2-Chloroisopropyl) Ether		Bases	0	0	0	0	0	0	
79	Bis (2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	0	0	
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0	
82	2-Chloronaphthalene		Bases	0	0	0	0	0	0	
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0	
84	Chrysene*	YES	Bases	0	0	0	0	0	0	
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0	
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0	
87	Dibenzo(A,H)Anthracene*	YES	Bases	0	0	0	0	0	0	
88	1,2-Dichlorobenzene		Bases	0	0	0	0	0	0	
89	1,3-Dichlorobenzene		Bases	0	0	0	0	0	0	
90	1,4-Dichlorobenzene		Bases	0	0	0	0	0	0	
91	3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	0	0	
92	Diethyl Phthalate		Bases	0	0	0	0	0	0	
93	Dimethyl Phthalate		Bases	0	0	0	0	0	0	
94	2,4-Dinitrotoluene*	YES	Bases	0	0	0	0	0	0	
95	2,6-Dinitrotoluene		Bases	0	0	0	0	0	0	
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0	
97	Endosulfan (alpha)	YES	Bases	0	0	0	0	0	0	
98	Endosulfan (beta)	YES	Bases	0	0	0	0	0	0	
99	Endosulfan sulfate	YES	Bases	0	0	0	0	0	0	
100	Endrin	YES	Bases	0	0	0	0	0	0	
101	Endrin Aldehyde	YES	Bases	0	0	0	0	0	0	
102	Fluoranthene		Bases	0	0	0	0	0	0	
103	Fluorene		Bases	0	0	0	0	0	0	
104	Heptachlor	YES	Bases	0	0	0	0	0	0	
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	
106	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	0	
107	Hexachlorobutadiene*	YES	Bases	0	0	0	0	0	0	
108	Hexachlorocyclohexan (alpha)	YES	Bases	0	0	0	0	0	0	
109	Hexachlorocyclohexan (beta)	YES	Bases	0	0	0	0	0	0	
110	Hexachlorocyclohexan (gamma)	YES	Bases	0	0	0	0	0	0	
111	Hexachloroindipentadecene		Bases	0	0	0	0	0	0	
112	Hexachlorobenzene		Bases	0	0	0	0	0	0	
113	Indeno(1,2,3-CD)Pyrene*	YES	Bases	0	0	0	0	0	0	
114	Isophorone		Bases	0	0	0	0	0	0	
115	Naphthalene		Bases	0	0	0	0	0	0	
116	Nitrobenzene		Bases	0	0	0	0	0	0	
117	N-Nitrosodi-N-Propylamine*	YES	Bases	0	0	0	0	0	0	
118	N-Nitrosodi-N-Methylamine*	YES	Bases	0	0	0	0	0	0	
119	N-Nitrosodi-N-Phenylamine*	YES	Bases	0	0	0	0	0	0	
120	PCB-1016	YES	Bases	0	0	0	0	0	0	
121	PCB-1221	YES	Bases	0	0	0	0	0	0	
122	PCB-1232	YES	Bases	0	0	0	0	0	0	
123	PCB-1242	YES	Bases	0	0	0	0	0	0	
124	PCB-1248	YES	Bases	0	0	0	0	0	0	
125	PCB-1254	YES	Bases	0	0	0	0	0	0	
126	PCB-1260	YES	Bases	0	0	0	0	0	0	
127	Phenanthrene		Bases	0	0	0	0	0	0	
128	Pyrene		Bases	0	0	0	0	0	0	
129	1,2,4-Trichlorobenzene		Bases	0	0	0	0	0	0	

35	Enter Q _d = wastewater discharge flow from facility (MGD)
54.153015	Q _d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q _{d2} = background stream flow in MGD above point of discharge
0	Q _{d2} = background stream flow from upstream source (cfs)
4056	Enter 7Q10, Q _s = background stream flow in cfs above point of discharge
3042	Enter or estimated, 1Q10, Q _s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
24156	Enter Mean Annual Flow, Q _s = background stream flow in cfs above point of discharge
6313	Enter TQ2, Q _s = background stream flow in cfs above point of discharge (For LWF class streams)
Enter to Left	Enter C _s = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q _d + Q _{d2} + Q _s	Q _r = resultant in-stream flow, after discharge
Calculated on other	C _r = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
50	Enter, Background Hardness above point of discharge (assumed 50 South of Birmingham and 100 North of Birmingham)
7.00 p.u.	Enter, Background pH above point of discharge
YES	Enter, is discharge to a stream? "YES" Other option would be to a Lake. (This changes the partition coefficients for the metals)

** Using Partition Coefficients

August 10, 2020

Freshwater F&W classification				Freshwater Acute (µg/l) Q ₁ +1010				Freshwater Chronic (µg/l) Q ₁ = 7010				Human Health Consumption Fish only (µg/l)							
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C ₂₅) Daily Max	Max Daily Discharge as reported by Applicant (C _{max})	Water Quality Criteria (C ₁)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP?	Background from upstream source (C ₂₅) Monthly Ave	Avg Daily Discharge as reported by Applicant (C _{max})	Water Quality Criteria (C ₁)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C ₁)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP?
1	Arsimony			0	0					0						3.73E+02	2.83E+04	5.67E+03	No
2	Arsenic		YES	0	0					0						3.03E-01	1.35E+02	2.71E+01	No
3	Beryllium			0	0					0									
4	Cadmium			0	0					0									
5	Chromium/Chromium III			0	0					0									
6	Chromium/Chromium VI			0	0					0									
7	Copper			0	0					0									
8	Lead			0	0					0									
9	Mercury			0	0.009					0.00277									
10	Nickel			23.4	2.400					20									
11	Selenium			0	20.000					5.000									
12	Silver			0	0.976					0									
13	Thallium			0	0					0									
14	Zinc			144	107.369					76.7									
15	Cyanide			8.2	22.000					7.5									
16	Total Phenolic Compounds			0	0					0									
17	Hardness (As CaCO3)			0	128000					116000									
18	Aroclain			0	0					0									
19	Acylnitrile		YES	0	0					0									
20	Alrin		YES	0	0					0									
21	Benzene		YES	0	0					0									
22	Bromofarm		YES	0	0					0									
23	Carbon Tetrachloride		YES	0	0					0									
24	Chlordane		YES	0	0					0									
25	Chlorobenzene			0	0					0									
26	Chlorodibromo-Methane		YES	0	4.36					4									
27	Chloroethane			0	0					0									
28	2-Chloro-Ethylvinyl Ether			0	0					0									
29	Chloroform		YES	0	13.5					12.8									
30	4,4' - DDD		YES	0	0					0									
31	4,4' - DDE		YES	0	0					0									
32	4,4' - DDT		YES	0	0					0									
33	Dichlorobromo-Methane		YES	0	9.3					5.5									
34	1,1-Dichloroethane			0	0					0									
35	1,2-Dichloroethane		YES	0	0					0									
36	Trans-1,2-Dichloro-Ethylene			0	0					0									
37	1,1-Dichloroethylene		YES	0	0					0									
38	1,2-Dichloropropane			0	0					0									
39	1,3-Dichloro-Propylene			0	0					0									
40	Dieldrin		YES	0	0					0									
41	Ethylbenzene			0	0					0									
42	Methyl Bromide			0	0					0									
43	Methyl Chloride			0	0					0									
44	Methylene Chloride		YES	0	0					0									
45	1,1,2,2-Tetrachloro-Ethane		YES	0	0					0									
46	Tetrachloro-Ethylene		YES	0	0					0									
47	Toluene			0	0					0									
48	Toxaphene		YES	0	0					0									
49	Tributyltin (TBT)		YES	0	0					0									
50	1,1,1-Trichloroethane			0	0					0									
51	1,1,2-Trichloroethane		YES	0	0					0									
52	Trichlorethylene		YES	0	0					0									
53	Vinyl Chloride		YES	0	0					0									
54	p-Chloro-m-Cresol			0	0					0									
55	2-Chlorophenol			0	0					0									
56	2,4-Dichlorophenol			0	0					0									
57	2,4-Dimethylphenol			0	0					0									
58	4,6-Dinitro-O-Cresol			0	0					0									
59	2,4-Dinitrophenol			0	0					0									
60	4,6-Dinitro-2-methylphenol		YES	0	0					0									
61	Dioxin (2,3,7,8-TCDD)		YES	0	0					0									
62	2-Nitrophenol			0	0					0									
63	4-Nitrophenol			0	0					0									
64	Pentachlorophenol		YES	0	0					0									
65	Phenol			0	0					0									
66	2,4,6-Trichlorophenol		YES	0	0					0									
67	Acenaphthene			0	0					0									
68	Acenaphthylene			0	0					0									
69	Anthracene			0	0					0									
70	Benzidine			0	0					0									
71	Benzo(A)Anthracene		YES	0	0					0									
72	Benzo(A)Pyrene		YES	0	0					0									
73	Benzo(b)fluoranthene			0	0					0									
74	Benzo(GH)Perylene			0	0					0									
75	Benzo(K)Fluoranthene			0	0					0									
76	Bis (2-Chloroethoxy) Methane			0	0					0									
77	Bis (2-Chloroethyl)-Ether		YES	0	0					0									
78	Bis (2-Chloroisopropyl) Ether			0	0					0									
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0					0									
80	4-Bromophenyl Phenyl Ether			0	0					0									
81	Butyl Benzyl Phthalate			0	0					0									
82	2-Chlorophthalene			0	0					0									
83	4-Chlorophenyl Phenyl Ether			0	0					0									
84	Chrysene		YES	0	0					0									
85	Di-N-Butyl Phthalate			0	0					0									
86	Di-N-Octyl Phthalate			0	0					0									
87	Dibenz(A,H)Anthracene		YES	0	0					0									
88	1,2-Dichlorobenzene			0	0					0									
89	1,3-Dichlorobenzene			0	0					0									
90	1,4-Dichlorobenzene			0	0					0									
91	3,3-Dichlorobenzidine		YES	0	0					0									
92	Diethyl Phthalate			0	0					0									
93	Dimethyl Phthalate			0	0					0									
94	2,4-Dinitrotoluene		YES	0	0														

Permit Number: AL0027863

Monitoring Point: 001Q

Stage: Effluent Gross Value

Parameter Name: Total Recoverable Mercury

Parameter Code: 71901

Monitoring Period	Monthly Average	Daily Maximum	Conc. Unit
July 2015 - September 2015	0.00268	0.00268	µg/L
October 2015 - December 2015	0.002	0.002	µg/L
January 2016 - March 2016	0.002	0.002	µg/L
April 2016 - June 2016	0.002	0.002	µg/L
July 2016 - September 2016	0.001	0.001	µg/L
October 2016 - December 2016	0.004	0.004	µg/L
January 2017 - March 2017	0.009	0.009	µg/L
April 2017 - June 2017	0.003	0.003	µg/L
July 2017 - September 2017	0.005	0.005	µg/L
October 2017 - December 2017	0.003	0.003	µg/L
January 2018 - March 2018	0.0021	0.0021	µg/L
April 2018 - June 2018*			µg/L
July 2018 - September 2018	0.0013	0.0013	µg/L
October 2018 - December 2018	0.0013	0.0013	µg/L
January 2019 - March 2019	0.002	0.002	µg/L
April 2019 - June 2019	0.002	0.002	µg/L
July 2019 - September 2019	0.002	0.002	µg/L
October 2019 - December 2019	0.0025	0.0025	µg/L
January 2020 - March 2020	0.003	0.003	µg/L
<i>Average</i>	0.00277		µg/L
<i>Maximum</i>		0.009	µg/L

* E = Analysis Not Conducted/No Sample

Waste Load Allocation Summary

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REQUEST INFORMATION

Request Number:

3660

From:	Shanda Torbert	In Branch/Section	Municipal
Date Submitted	11/8/2019	Date Required	12/8/2019
FUND Code	605		
Date Permit application received by NPDES program		10/29/2019	

Receiving Waterbody	Alabama River (Woodruff Lake)		
Previous Stream Name			
Facility Name	Catoma Creek WWTP	(Name of Discharger-WQ will use to file)	
		Previous Discharger Name	
River Basin	Alabama	Outfall Latitude	32.367000 (decimal degrees)
County	Montgomery	Outfall Longitude	-86.474000 (decimal degrees)
Permit Number	AL0027863	Permit Type	Permit Reissuance
		Permit Status	Active
		Type of Discharger	MUNICIPAL

Do other discharges exist that may impact the model? Yes No

If yes, impacting dischargers names.

Wetumpka Wilako WWTP
Millbrook WWTP
Montgomery Econchate WWTP
Montgomery Towassa WWTP
Pine Creek WWTP
International Paper-Prattville
SABIC

Impacting dischargers permit numbers.

AL0064025
AL0049921
AL0022225
AL0022241
AL0027723
AL0003115
AL0054704

Existing Discharge Design Flow	35	MGD	Note: The flow rates given should be those requested for modeling.
Proposed Discharge Design Flow	35	MGD	

Comments included

Yes No

Information Verified By

KDP

Year File Was Created

Response ID Number 1734

Lat/Long Method

Arcview

12 Digit HUC Code	031502010501
Use Classification	F&W
Site Visit Completed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Waterbody Impaired?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Antidegradation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Waterbody Tier Level	Tier I
Use Support Category	1

Date of Site Visit	11/15/2019
Date of WLA Response	2/4/2020
Approved TMDL?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Approval Date of TMDL	

Waste Load Allocation Information

Modeled Reach Length	63.5	Miles	Date of Allocation	1/8/2020
Name of Model Used	QUAL2E		Allocation Type	2 Seasons
Model Completed by	KDP		Type of Model Used	Calibrated
Allocation Developed by	Water Quality Branch			

Waste Load Allocation Summary

Annual Effluent Limits	Conventional Parameters				Other Parameters								
	Qw	35	MGD		Qw	35	MGD		Qw	MGD	Qw	MGD	
Season	Summer		Season	Winter		Season				Season			
From	May		From	Nov		From				From			
Through	Oct		Through	Apr		Through				Through			
CBOD5			CBOD5	22	mg/L	CBOD5	25	mg/L	TP		TP		
NH3-N			NH3-N	10	mg/L	NH3-N	20	mg/L	TN		TN		
TKN			TKN	20	mg/L	TKN	40	mg/L	TSS		TSS		
D.O.			D.O.	2	mg/L	D.O.	2	mg/L					

"Monitor Only" Parameters for Effluent:				Parameter	Frequency	Parameter	Frequency
				TP	Monthly		
				NO2+NO3-N	Monthly		

Water Quality Characteristics Immediately Upstream of Discharge						
Parameter	Summer			Winter		
	CBODu	0.94	mg/l		1.33	mg/l
NH3-N	0.05	mg/l		0.16	mg/l	
Temperature	30	°C		20	°C	
pH	7	su		7	su	

Hydrology at Discharge Location

Drainage Area Qualifier	Drainage Area	15594	sq mi
Estimated	Stream 7Q10	4056	cfs
	Stream 1Q10	3042	cfs
	Stream 7Q2	6313	cfs
	Annual Average	24156	cfs

Method Used to Calculate
ADEM Estimate w/USGS Gage Data
75% of 7Q10
ADEM Estimate w/USGS Gage Data
ADEM Estimate w/USGS Gage Data

Comments and/or Notations

Mixing Zone Analysis Summary

Page 1

REQUEST INFORMATION

request number: 3660

From: (Responsible Engineer) Shanda Torbert In Branch/Section Municipal
Date Submitted 11/8/2019 Date Required 12/8/2019 FUND Code 605
Date Permit application received by NPDES program 10/29/2019

Receiving Waterbody Alabama River (Woodruff Lake)
Previous Stream Name

Facility Name Catoma Creek WWTP (Name of Discharger-WQ will use to file)
Previous Discharger Name

River Basin Alabama Outfall Latitude 32.367000 (decimal degrees)
*County Montgomery Outfall Longitude -86.474000 (decimal degrees)

Permit Number AL0027863 Permit Type Permit Reissuance
Permit Status Active
Type of Discharger MUNICIPAL

Do other discharges exist that may impact the model? Yes No

If yes, impacting dischargers names.

Impacting dischargers permit numbers.

Existing Discharge Design Flow 35 MGD
Proposed Discharge Design Flow 35 MGD **Note: The flow rates given should be those requested for modeling.**

Seasonal limits requested? Yes No **If not seasonal, only the summer sections will be used**

Comments included Yes No
Information Verified By KDP Year File Was Started

12 Digit HUC Code 031502010501 Date of MZ Response 2/4/2020
Use Classification F&W Date of Site Visit 11/15/2019
Site Visit Completed? Yes No

Hydrology		
<u>Drainage Area</u>	<u>15594</u>	<u>sq mi</u>
<u>Stream 7Q10</u>	<u>4056</u>	<u>cfs</u>
<u>Stream 1Q10</u>	<u>3042</u>	<u>cfs</u>
<u>Stream 7Q2</u>	<u>6313</u>	<u>cfs</u>
<u>Annual Average</u>	<u>24156</u>	<u>cfs</u>

Method Used to Calculate	
<u>ADEM Estimate w/USGS Gage Data</u>	<u>75% of 7Q10</u>
<u>ADEM Estimate w/USGS Gage Data</u>	
<u>ADEM Estimate w/USGS Gage Data</u>	

Date of MZ Analysis 1/8/2020 Model Completed by KDP

Pollutant Category
Whole Effluent Toxicity (WET) Thermal Pathogens

Mixing Zone Analysis Summary

WET Parameters

Summer

Acute

Ambient Streamflow cfs
 ZID Length Meters
 ZID IWC %

Chronic

Ambient Streamflow 4056 cfs
 Mixing Zone Length 92.5 Meters
 Mixing Zone IWC 3.79 %

Winter

Acute

Ambient Streamflow cfs
 ZID Length Meters
 ZID IWC %

Chronic

Ambient Streamflow cfs
 Mixing Zone Length 92.5 Meters
 Mixing Zone IWC %

Thermal Parameters

Summer

Ambient Streamflow cfs
 Mixing Zone Length Meters
 Max. Effluent Temp °C

Winter

Ambient Streamflow cfs
 Mixing Zone Length Meters
 Max. Effluent Temp °C

Pathogen Parameters

Summer

Ambient Streamflow cfs
 ZID Length Meters
 Max. Effluent Fecal Conc Cols/100 mls
 Max. Effluent E. coli Conc Cols/100 mls
 Monthly Average Effluent E. coli Conc Cols/100 mls
 Max. Effluent Enterococci Conc (for coastal waters) Cols/100 mls

Winter

Ambient Streamflow cfs
 ZID Length Meters
 Max. Effluent Fecal Conc Cols/100 mls
 Max. Effluent E. coli Conc Cols/100 mls
 Monthly Average Effluent E. coli Conc Cols/100 mls
 Max. Effluent Enterococci Conc (for coastal waters) Cols/100 mls

Comments
 and/or
 Notations

EPA Identification Number
110064421460

NPDES Permit Number
AL0027863

Facility Name
Catoma Creek WWTP

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

Form
2A
NPDES



U.S. Environmental Protection Agency
Application for NPDES Permit to Discharge Wastewater
NEW AND EXISTING PUBLICLY OWNED TREATMENT WORKS

SECTION 1. BASIC APPLICATION INFORMATION FOR ALL APPLICANTS (40 CFR 122.21(j)(1) and (9))

JUL 27 2020
IND/MUN BRANCH

Facility Information	1.1	Facility name Catoma Creek WWTP		
		Mailing address (street or P.O. box) P.O. Box 1631		
		City or town Montgomery	State AL	ZIP code 36102
		Contact name (first and last) Tim Logiotatos	Title WPC Superintendent	Phone number (334) 206-1722
		Email address tlogio@mwwssb.com		
		Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address 6000 Richard E. Hanan Dr		
		City or town Montgomery	State AL	ZIP code 36108
	1.2	Is this application for a facility that has yet to commence discharge? <input type="checkbox"/> Yes → See instructions on data submission requirements for new dischargers. <input checked="" type="checkbox"/> No		
Applicant Information	1.3	Is applicant different from entity listed under Item 1.1 above? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 1.4.		
		Applicant name The Water Works and Sanitary Sewer Board of the City of Montgomery		
		Applicant address (street or P.O. box) PO Box 1631		
		City or town Montgomery	State AL	ZIP code 36102
		Contact name (first and last) William R. Henderson	Title General Manager	Phone number (334) 206-1607
	Email address bhenders@mwwssb.com			
	1.4	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Both		
	1.5	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)		
Existing Environmental Permits	1.6	Indicate below any existing environmental permits. (Check all that apply and print or type the corresponding permit number for each.)		
		Existing Environmental Permits		
		<input checked="" type="checkbox"/> NPDES (discharges to surface water) AL0027863	<input type="checkbox"/> RCRA (hazardous waste)	<input type="checkbox"/> UIC (underground injection control)
		<input type="checkbox"/> PSD (air emissions)	<input type="checkbox"/> Nonattainment program (CAA)	<input type="checkbox"/> NESHAPs (CAA)
	<input type="checkbox"/> Ocean dumping (MPRSA)	<input type="checkbox"/> Dredge or fill (CWA Section 404)	<input checked="" type="checkbox"/> Other (specify) Biosolids ALL027863	

Collection System and Population Served	1.7	Provide the collection system information requested below for the treatment works.				
	Municipality Served	Population Served	Collection System Type (indicate percentage)		Ownership Status	
	Montgomery, AL	104,200	100 0 <input type="checkbox"/>	% separate sanitary sewer % combined storm and sanitary sewer Unknown	<input checked="" type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input checked="" type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
			_____ _____ <input type="checkbox"/>	% separate sanitary sewer % combined storm and sanitary sewer Unknown	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
			_____ _____ <input type="checkbox"/>	% separate sanitary sewer % combined storm and sanitary sewer Unknown	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
			_____ _____ <input type="checkbox"/>	% separate sanitary sewer % combined storm and sanitary sewer Unknown	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
	Total Population Served	104,200				
				Separate Sanitary Sewer System	Combined Storm and Sanitary Sewer	
Total percentage of each type of sewer line (in miles)			100 %	%		
Indian Country	1.8	Is the treatment works located in Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	1.9	Does the facility discharge to a receiving water that flows through Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Design and Actual Flow Rates	1.10	Provide design <i>and</i> actual flow rates in the designated spaces.			Design Flow Rate	
					35 mgd	
	Annual Average Flow Rates (Actual)					
	Two Years Ago		Last Year		This Year	
	14.0 mgd		15.8 mgd		16.4 mgd	
	Maximum Daily Flow Rates (Actual)					
Two Years Ago		Last Year		This Year		
44.1 mgd		63.6 mgd		54.4 mgd		
Discharge Points by Type	1.11	Provide the total number of effluent discharge points to waters of the United States by type.				
	Total Number of Effluent Discharge Points by Type					
	Treated Effluent	Untreated Effluent	Combined Sewer Overflows	Bypasses	Constructed Emergency Overflows	
1	0	0	0	0		

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Outfalls and Other Discharge or Disposal Methods

Outfalls Other Than to Waters of the United States

1.12 Does the POTW discharge wastewater to basins, ponds, or other surface impoundments that do not have outlets for discharge to waters of the United States?
 Yes No → SKIP to Item 1.14.

1.13 Provide the location of each surface impoundment and associated discharge information in the table below.

Surface Impoundment Location and Discharge Data

Location	Average Daily Volume Discharged to Surface Impoundment	Continuous or Intermittent (check one)
	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent

1.14 Is wastewater applied to land?
 Yes No → SKIP to Item 1.16.

1.15 Provide the land application site and discharge data requested below.

Land Application Site and Discharge Data

Location	Size	Average Daily Volume Applied	Continuous or Intermittent (check one)
	acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
	acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
	acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent

1.16 Is effluent transported to another facility for treatment prior to discharge?
 Yes No → SKIP to Item 1.21.

1.17 Describe the means by which the effluent is transported (e.g., tank truck, pipe).

1.18 Is the effluent transported by a party other than the applicant?
 Yes No → SKIP to Item 1.20.

1.19 Provide information on the transporter below.

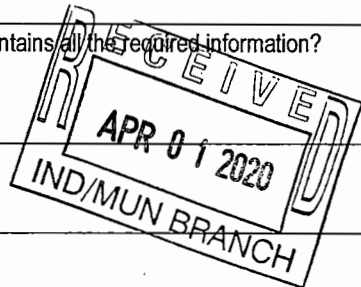
Transporter Data

Entity name		Mailing address (street or P.O. box)	
City or town		State	ZIP code
Contact name (first and last)		Title	
Phone number		Email address	

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Outfalls and Other Discharge or Disposal Methods Continued	1.20	In the table below, indicate the name, address, contact information, NPDES number, and average daily flow rate of the receiving facility.					
	Receiving Facility Data						
	Facility name				Mailing address (street or P.O. box)		
	City or town				State	ZIP code	
	Contact name (first and last)				Title		
	Phone number				Email address		
	NPDES number of receiving facility (if any) <input type="checkbox"/> None				Average daily flow rate		
	1.21	Is the wastewater disposed of in a manner other than those already mentioned in Items 1.14 through 1.21 that do not have outlets to waters of the United States (e.g., underground percolation, underground injection)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.23.					
Outfalls and Other Discharge or Disposal Methods Continued	1.22	Provide information in the table below on these other disposal methods.					
	Information on Other Disposal Methods						
		Disposal Method Description	Location of Disposal Site	Size of Disposal Site	Annual Average Daily Discharge Volume	Continuous or Intermittent (check one)	
				acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent	
				acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent	
			acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent		
Variance Requests	1.23	Do you intend to request or renew one or more of the variances authorized at 40 CFR 122.21(n)? (Check all that apply. Consult with your NPDES permitting authority to determine what information needs to be submitted and when.) <input type="checkbox"/> Discharges into marine waters (CWA Section 301(h)) <input type="checkbox"/> Water quality related effluent limitation (CWA Section 302(b)(2)) <input checked="" type="checkbox"/> Not applicable					
Contractor Information	1.24	Are any operational or maintenance aspects (related to wastewater treatment and effluent quality) of the treatment works the responsibility of a contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 2.					
	1.25	Provide location and contact information for each contractor in addition to a description of the contractor's operational and maintenance responsibilities.					
	Contractor Information						
			Contractor 1		Contractor 2		Contractor 3
		Contractor name (company name)					
		Mailing address (street or P.O. box)					
		City, state, and ZIP code					
		Contact name (first and last)					
		Phone number					
	Email address						
	Operational and maintenance responsibilities of contractor						

SECTION 2. ADDITIONAL INFORMATION (40 CFR 122.21(j)(1) and (2))

Design Flow	Outfalls to Waters of the United States						
	2.1	Does the treatment works have a design flow greater than or equal to 0.1 mgd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 3.					
Inflow and Infiltration	2.2	Provide the treatment works' current average daily volume of inflow and infiltration.	Average Daily Volume of Inflow and Infiltration 5,400,000 gpd				
	Indicate the steps the facility is taking to minimize inflow and infiltration. Rehabilitation will be performed as identified in the Comprehensive Plan and as needed.						
Topographic Map	2.3	Have you attached a topographic map to this application that contains all the required information? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Flow Diagram	2.4	Have you attached a process flow diagram or schematic to this application that contains all the required information? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Scheduled Improvements and Schedules of Implementation	2.5	Are improvements to the facility scheduled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 3.					
	Briefly list and describe the scheduled improvements.						
	1. Rehabilitation/replacement of thickener process (scheduled to begin Spring 2020)						
	2.						
	3.						
	4.						
Scheduled Improvements and Schedules of Implementation	2.6	Provide scheduled or actual dates of completion for improvements.					
	Scheduled or Actual Dates of Completion for Improvements						
		Scheduled Improvement (from above)	Affected Outfalls (list outfall number)	Begin Construction (MM/DD/YYYY)	End Construction (MM/DD/YYYY)	Begin Discharge (MM/DD/YYYY)	Attainment of Operational Level (MM/DD/YYYY)
		1.	0012	04/20/2020	03/20/2021		
		2.					
		3.					
	4.						
Scheduled Improvements and Schedules of Implementation	2.7	Have appropriate permits/clearances concerning other federal/state requirements been obtained? Briefly explain your response. <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> None required or applicable					
	Explanation:						



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SECTION 3. INFORMATION ON EFFLUENT DISCHARGES (40 CFR 122.21(j)(3) to (5))

Description of Outfalls	3.1	Provide the following information for each outfall. (Attach additional sheets if you have more than three outfalls.)		
		Outfall Number <u>0012</u>	Outfall Number _____	Outfall Number _____
	State	Alabama		
	County	Montgomery		
	City or town	Montgomery		
	Distance from shore	1000 ft.	ft.	ft.
	Depth below surface	40 ft.	ft.	ft.
	Average daily flow rate	15.4 mgd	mgd	mgd
	Latitude	32° 22' 1" N	° ' "	° ' "
	Longitude	86° 28' 28" W	° ' "	° ' "
Seasonal or Periodic Discharge Data	3.2	Do any of the outfalls described under Item 3.1 have seasonal or periodic discharges? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.4.		
	3.3	If so, provide the following information for each applicable outfall.		
		Outfall Number _____	Outfall Number _____	Outfall Number _____
	Number of times per year discharge occurs			
	Average duration of each discharge (specify units)			
Diffuser Type	3.4	Are any of the outfalls listed under Item 3.1 equipped with a diffuser? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.6.		
	3.5	Briefly describe the diffuser type at each applicable outfall.		
		Outfall Number <u>0012</u>	Outfall Number _____	Outfall Number _____
		200 ft diffuser with 20 - 8" outlets with deflector plates		
Waters of the U.S.	3.6	Does the treatment works discharge or plan to discharge wastewater to waters of the United States from one or more discharge points? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.		

Receiving Water Description	3.7	Provide the receiving water and related information (if known) for each outfall.		
		Outfall Number 0012	Outfall Number _____	Outfall Number _____
	Receiving water name	Alabama River		
	Name of watershed, river, or stream system	Alabama		
	U.S. Soil Conservation Service 14-digit watershed code	031502010311		
	Name of state management/river basin	Alabama Basin (upper)		
	U.S. Geological Survey 8-digit hydrologic cataloging unit code	03150201		
	Critical low flow (acute)	NA cfs	cfs	cfs
	Critical low flow (chronic)	4350 cfs	cfs	cfs
	Total hardness at critical low flow	NA mg/L of CaCO ₃	mg/L of CaCO ₃	mg/L of CaCO ₃
Treatment Description	3.8	Provide the following information describing the treatment provided for discharges from each outfall.		
		Outfall Number 0012	Outfall Number _____	Outfall Number _____
	Highest Level of Treatment (check all that apply per outfall)	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input checked="" type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input type="checkbox"/> Other (specify) _____
	Design Removal Rates by Outfall	0012		
	BOD ₅ or CBOD ₅	85 %	%	%
	TSS	85 %	%	%
	Phosphorus	<input checked="" type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %
	Nitrogen	<input checked="" type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %
	Other (specify) _____	<input checked="" type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %

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Treatment Description Continued	3.9	Describe the type of disinfection used for the effluent from each outfall in the table below. If disinfection varies by season, describe below.						
			Outfall Number <u>0012</u>	Outfall Number _____	Outfall Number _____			
	Disinfection type	chlorination						
	Seasons used	year round						
	Dechlorination used?	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No			
Effluent Testing Data	3.10	Have you completed monitoring for all Table A parameters and attached the results to the application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
	3.11	Have you conducted any WET tests during the 4.5 years prior to the date of the application on any of the facility's discharges or on any receiving water near the discharge points? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.13.						
	3.12	Indicate the number of acute and chronic WET tests conducted since the last permit reissuance of the facility's discharges by outfall number or of the receiving water near the discharge points.						
			Outfall Number <u>0012</u>		Outfall Number _____		Outfall Number _____	
			Acute	Chronic	Acute	Chronic	Acute	Chronic
	Number of tests of discharge water		4					
	Number of tests of receiving water							
	3.13	Does the treatment works have a design flow greater than or equal to 0.1 mgd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.16.						
	3.14	Does the POTW use chlorine for disinfection, use chlorine elsewhere in the treatment process, or otherwise have reasonable potential to discharge chlorine in its effluent? <input checked="" type="checkbox"/> Yes → Complete Table B, including chlorine. <input type="checkbox"/> No → Complete Table B, omitting chlorine.						
	3.15	Have you completed monitoring for all applicable Table B pollutants and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
3.16	Does one or more of the following conditions apply? <ul style="list-style-type: none"> The facility has a design flow greater than or equal to 1 mgd. The POTW has an approved pretreatment program or is required to develop such a program. The NPDES permitting authority has informed the POTW that it must sample for the parameters in Table C, must sample other additional parameters (Table D), or submit the results of WET tests for acute or chronic toxicity for each of its discharge outfalls (Table E). <input checked="" type="checkbox"/> Yes → Complete Tables C, D, and E as applicable. <input type="checkbox"/> No → SKIP to Section 4.							
3.17	Have you completed monitoring for all applicable Table C pollutants and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
3.18	Have you completed monitoring for all applicable Table D pollutants required by your NPDES permitting authority and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No additional sampling required by NPDES permitting authority.							

Effluent Testing Data Continued	3.19	Has the POTW conducted either (1) minimum of four quarterly WET tests for one year preceding this permit application or (2) at least four annual WET tests in the past 4.5 years?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No → Complete tests and Table E and SKIP to Item 3.26.	
	3.20	Have you previously submitted the results of the above tests to your NPDES permitting authority?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No → Provide results in Table E and SKIP to Item 3.26.	
	3.21	Indicate the dates the data were submitted to your NPDES permitting authority and provide a summary of the results.			
		Date(s) Submitted (MM/DD/YYYY)	Summary of Results		
		11/19/2015	11/23/2016, 11/21/2017, 11/20/2018 All results passed		
	3.22	Regardless of how you provided your WET testing data to the NPDES permitting authority, did any of the tests result in toxicity?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No → SKIP to Item 3.26.	
	3.23	Describe the cause(s) of the toxicity:			
	3.24	Has the treatment works conducted a toxicity reduction evaluation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 3.26.	
3.25	Provide details of any toxicity reduction evaluations conducted.				
3.26	Have you completed Table E for all applicable outfalls and attached the results to the application package?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Not applicable because previously submitted information to the NPDES permitting authority.		

SECTION 4. INDUSTRIAL DISCHARGES AND HAZARDOUS WASTES (40 CFR 122.21(j)(6) and (7))

Industrial Discharges and Hazardous Wastes	4.1	Does the POTW receive discharges from SIUs or NSCIUs?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.7.	
	4.2	Indicate the number of SIUs and NSCIUs that discharge to the POTW.			
		Number of SIUs	Number of NSCIUs		
		6	6		
	4.3	Does the POTW have an approved pretreatment program?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	4.4	Have you submitted either of the following to the NPDES permitting authority that contains information substantially identical to that required in Table F: (1) a pretreatment program annual report submitted within one year of the application or (2) a pretreatment program?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No → SKIP to Item 4.6.	
4.5	Identify the title and date of the annual report or pretreatment program referenced in Item 4.4. SKIP to Item 4.7.				
4.6	Have you completed and attached Table F to this application package?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		

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Industrial Discharges and Hazardous Wastes Continued

4.7 Does the POTW receive, or has it been notified that it will receive, by truck, rail, or dedicated pipe, any wastes that are regulated as RCRA hazardous wastes pursuant to 40 CFR 261?
 Yes No → SKIP to Item 4.9.

4.8 If yes, provide the following information:

Hazardous Waste Number	Waste Transport Method (check all that apply)		Annual Amount of Waste Received	Units
	<input type="checkbox"/> Truck <input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Rail <input type="checkbox"/> Other (specify) _____		
	<input type="checkbox"/> Truck <input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Rail <input type="checkbox"/> Other (specify) _____		
	<input type="checkbox"/> Truck <input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Rail <input type="checkbox"/> Other (specify) _____		

4.9 Does the POTW receive, or has it been notified that it will receive, wastewaters that originate from remedial activities, including those undertaken pursuant to CERCLA and Sections 3004(7) or 3008(h) of RCRA?
 Yes No → SKIP to Section 5.

4.10 Does the POTW receive (or expect to receive) less than 15 kilograms per month of non-acute hazardous wastes as specified in 40 CFR 261.30(d) and 261.33(e)?
 Yes → SKIP to Section 5. No

4.11 Have you reported the following information in an attachment to this application: identification and description of the site(s) or facility(ies) at which the wastewater originates; the identities of the wastewater's hazardous constituents; and the extent of treatment, if any, the wastewater receives or will receive before entering the POTW?
 Yes No

SECTION 5. COMBINED SEWER OVERFLOWS (40 CFR 122.21(j)(8))

CSO Map and Diagram

5.1 Does the treatment works have a combined sewer system?
 Yes No → SKIP to Section 6.


5.2 Have you attached a CSO system map to this application? (See instructions for map requirements.)
 Yes No

5.3 Have you attached a CSO system diagram to this application? (See instructions for diagram requirements.)
 Yes No

CSO Outfall Description	5.4	For each CSO outfall, provide the following information. (Attach additional sheets as necessary.)		
		CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
	City or town			
	State and ZIP code			
	County			
	Latitude	° ' "	° ' "	° ' "
	Longitude	° ' "	° ' "	° ' "
	Distance from shore	ft.	ft.	ft.
Depth below surface	ft.	ft.	ft.	
CSO Monitoring	5.5	Did the POTW monitor any of the following items in the past year for its CSO outfalls?		
		CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
	Rainfall	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	CSO flow volume	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	CSO pollutant concentrations	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Receiving water quality	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	CSO frequency	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of storm events	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
CSO Events in Past Year	5.6	Provide the following information for each of your CSO outfalls.		
		CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
	Number of CSO events in the past year	events	events	events
	Average duration per event	hours <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	hours <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	hours <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated
	Average volume per event	million gallons <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	million gallons <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	million gallons <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated
Minimum rainfall causing a CSO event in last year	inches of rainfall <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	inches of rainfall <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	inches of rainfall <input type="checkbox"/> Actual or <input type="checkbox"/> Estimated	

CSO Receiving Waters	5.7	Provide the information in the table below for each of your CSO outfalls.		
		CSO Outfall Number _____	CSO Outfall Number _____	CSO Outfall Number _____
	Receiving water name			
	Name of watershed/ stream system			
	U.S. Soil Conservation Service 14-digit watershed code (if known)	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown
	Name of state management/river basin			
	U.S. Geological Survey 8-Digit Hydrologic Unit Code (if known)	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown
	Description of known water quality impacts on receiving stream by CSO (see instructions for examples)			

SECTION 6. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	6.1	In Column 1 below, mark the sections of Form 2A 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: Basic Application Information for All Applicants	<input type="checkbox"/> w/ variance request(s)	<input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 2: Additional Information	<input checked="" type="checkbox"/> w/ topographic map <input type="checkbox"/> w/ additional attachments	<input checked="" type="checkbox"/> w/ process flow diagram
	<input checked="" type="checkbox"/>	Section 3: Information on Effluent Discharges	<input checked="" type="checkbox"/> w/ Table A <input checked="" type="checkbox"/> w/ Table B <input checked="" type="checkbox"/> w/ Table C	<input type="checkbox"/> w/ Table D <input type="checkbox"/> w/ Table E <input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 4: Industrial Discharges and Hazardous Wastes	<input type="checkbox"/> w/ SIU and NSCIU attachments <input type="checkbox"/> w/ additional attachments	<input checked="" type="checkbox"/> w/ Table F
	<input type="checkbox"/>	Section 5: Combined Sewer Overflows	<input type="checkbox"/> w/ CSO map <input type="checkbox"/> w/ CSO system diagram	<input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 6: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments	
	6.2	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 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.		
	Name (print or type first and last name) William R. Henderson		Official title General Manager	
	Signature 		Date signed 10-25-19	

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Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Biochemical oxygen demand <input type="checkbox"/> BOD ₅ or <input checked="" type="checkbox"/> CBOD ₅ (report one)	7	mg/L	3	mg/L	357	20SM5210B	1 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Fecal coliform (E. coli)	3466	MPN/100mL	66	MPN/100mL	156	20SM9223B-QT	OMP/100 <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Design flow rate	54.4	MGD	16.6	MGD	365		
pH (minimum)	7.03	S.U.					
pH (maximum)	7.93	S.U.					
Temperature (winter)	27.8	C	21.7	C	365		
Temperature (summer)	29.4	C	26.8	C	365		
Total suspended solids (TSS)	19	mg/L	5	mg/L	357	20SM2540D	1 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL

¹ 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. EFFLUENT PARAMETERS FOR ALL POTWS WITH A FLOW EQUAL TO OR GREATER THAN 0.1 MGD

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Ammonia (as N)	3.27	mg/L	<0.50	mg/L	357	EPA 350.1	0.5 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chlorine (total residual, TRC) ²	0.98	mg/L	0.71	mg/L	365	20SM4500-Cl G	0.01 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Dissolved oxygen	9.99	mg/L	8.36	mg/L	365	20SM4500-O G	1 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Nitrate/nitrite	18.7	mg/L	12.6	mg/L	14	EPA 300.0	1.1 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Kjeldahl nitrogen	5.74	mg/L	1.82	mg/L	357	EPA 351.2	0.5 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Oil and grease	<5	mg/L	<5	mg/L	3	EPA 1664B	5 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Phosphorus	6.38	mg/L	3.37	mg/L	52	EPA 365.1	0.5 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Total dissolved solids	458	mg/L	312	mg/L	3	20SM2540C	0.5 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL

¹ 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).

² Facilities that do not use chlorine for disinfection, do not use chlorine elsewhere in the treatment process, and have no reasonable potential to discharge chlorine in their effluent are not required to report data for chlorine.

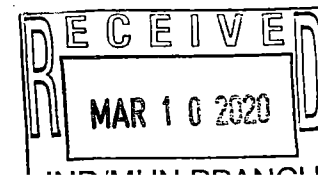
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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Metals, Cyanide, and Total Phenols							
Hardness (as CaCO ₃)	128	mg/L	118	mg/L	3	20SM2340B	1.45 mg/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Antimony, total recoverable	<20	ug/L	<20	ug/L	3	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Arsenic, total recoverable	<60	ug/L	<60	ug/L	14	EPA 200.7	60 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Beryllium, total recoverable	<20	ug/L	<20	ug/L	3	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Cadmium, total recoverable	<20	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chromium, total recoverable	<20	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Copper, total recoverable	<20	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Lead, total recoverable	<20	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Mercury, total recoverable	0.0021	ug/L	0.0016	ug/L	3	EPA 1631E	0.0002 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nickel, total recoverable	23.4	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Selenium, total recoverable	<20	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Silver, total recoverable	<20	ug/L	<20	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Thallium, total recoverable	<20	ug/L	<20	ug/L	3	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Zinc, total recoverable	144	ug/L	76.7	ug/L	14	EPA 200.7	20 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Cyanide	8.2	ug/L	7.5	ug/L	3	EPA 335.4	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Total phenolic compounds	<15	mg/L	<15	mg/L	3	EPA 420.1	15 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Volatile Organic Compounds							
Acrolein	<50	ug/L	<50	ug/L	3	EPA 624.1	50 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Acrylonitrile	<50	ug/L	<50	ug/L	3	EPA 624.1	50 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Benzene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Bromoform	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL



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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Carbon tetrachloride	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chlorobenzene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chlorodibromomethane	4.36	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chloroethane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2-chloroethylvinyl ether	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chloroform	13.5	ug/L	12.8	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Dichlorobromomethane	9.3	ug/L	5.5	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,1-dichloroethane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichloroethane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
trans-1,2-dichloroethylene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,1-dichloroethylene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichloropropane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,3-dichloropropylene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Ethylbenzene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Methyl bromide	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Methyl chloride	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Methylene chloride	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,1,2,2-tetrachloroethane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Tetrachloroethylene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Toluene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,1,1-trichloroethane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,1,2-trichloroethane	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Trichloroethylene	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Vinyl chloride	<4	ug/L	<4	ug/L	3	EPA 624.1	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Acid-Extractable Compounds							
p-chloro-m-cresol	<6	ug/L	<6	ug/L	3	EPA 625	6 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2-chlorophenol	<5	ug/L	<5	ug/L	3	EPA 625	5 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dichlorophenol	<4	ug/L	<4	ug/L	3	EPA 625	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dimethylphenol	<4	ug/L	<4	ug/L	3	EPA 625	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
4,6-dinitro-o-cresol	<8	ug/L	<8	ug/L	3	EPA 625	8 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrophenol	<31	ug/L	<31	ug/L	3	EPA 625	31 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2-nitrophenol	<5	ug/L	<5	ug/L	3	EPA 625	5 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
4-nitrophenol	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Pentachlorophenol	<3	ug/L	<3	ug/L	3	EPA 625	3 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Phenol	<8	ug/L	<8	ug/L	3	EPA 625	8 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2,4,6-trichlorophenol	<4	ug/L	<4	ug/L	3	EPA 625	4 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Base-Neutral Compounds							
Acenaphthene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Acenaphthylene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Anthracene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Benzidine	<12	ug/L	<12	ug/L	3	EPA 625	12 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(a)anthracene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(a)pyrene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
3,4-benzofluoranthene	<12	ug/L	<12	ug/L	3	EPA 625	12 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	<7	ug/L	<7	ug/L	3	EPA 625	7 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(k)fluoranthene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethoxy) methane	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethyl) ether	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroisopropyl) ether	<7	ug/L	<7	ug/L	3	EPA 625	7 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-ethylhexyl) phthalate	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
4-bromophenyl phenyl ether	<7	ug/L	<7	ug/L	3	EPA 625	7 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Butyl benzyl phthalate	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2-chloronaphthalene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
4-chlorophenyl phenyl ether	<8	ug/L	<8	ug/L	3	EPA 625	8 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chrysene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
di-n-butyl phthalate	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
di-n-octyl phthalate	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Dibenzo(a,h)anthracene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichlorobenzene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,3-dichlorobenzene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,4-dichlorobenzene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
3,3-dichlorobenzidine	<6	ug/L	<6	ug/L	3	EPA 625	6 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Diethyl phthalate	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Dimethyl phthalate	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrotoluene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
2,6-dinitrotoluene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Fluoranthene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Fluorene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorobenzene	<6	ug/L	<6	ug/L	3	EPA 625	6 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorobutadiene	<3	ug/L	<3	ug/L	3	EPA 625	3 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorocyclo-pentadiene	<8	ug/L	<8	ug/L	3	EPA 625	8 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachloroethane	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Indeno(1,2,3-cd)pyrene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Isophorone	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Naphthalene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Nitrobenzene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodi-n-propylamine	<6	ug/L	<6	ug/L	3	EPA 625	6 ug/L <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodimethylamine	<7	ug/L	<7	ug/L	3	EPA 625	7 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodiphenylamine	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Phenanthrene	<9	ug/L	<9	ug/L	3	EPA 625	9 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Pyrene	<10	ug/L	<10	ug/L	3	EPA 625	10 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
1,2,4-trichlorobenzene	<7	ug/L	<7	ug/L	3	EPA 625	7 ug/L <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL

¹ 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 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Outfall Number 0012
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY			
The table provides response space for one whole effluent toxicity sample. Copy the table to report additional test results.			
Test Information			
	Test Number _____	Test Number _____	Test Number _____
Test species	NA -DATA SUBMITTED		
Age at initiation of test	TO PERMITTING AUTHORITY		
Outfall number			
Date sample collected			
Date test started			
Duration			
Toxicity Test Methods			
Test method number			
Manual title			
Edition number and year of publication			
Page number(s)			
Sample Type			
Check one:	<input type="checkbox"/> Grab <input type="checkbox"/> 24-hour composite	<input type="checkbox"/> Grab <input type="checkbox"/> 24-hour composite	<input type="checkbox"/> Grab <input type="checkbox"/> 24-hour composite
Sample Location			
Check one:	<input type="checkbox"/> Before Disinfection <input type="checkbox"/> After Disinfection <input type="checkbox"/> After Dechlorination	<input type="checkbox"/> Before Disinfection <input type="checkbox"/> After Disinfection <input type="checkbox"/> After Dechlorination	<input type="checkbox"/> Before disinfection <input type="checkbox"/> After disinfection <input type="checkbox"/> After dechlorination
Point in Treatment Process			
Describe the point in the treatment process at which the sample was collected for each test.			
Toxicity Type			
Indicate for each test whether the test was performed to asses acute or chronic toxicity, or both. (Check one response.)	<input type="checkbox"/> Acute <input type="checkbox"/> Chronic <input type="checkbox"/> Both	<input type="checkbox"/> Acute <input type="checkbox"/> Chronic <input type="checkbox"/> Both	<input type="checkbox"/> Acute <input type="checkbox"/> Chronic <input type="checkbox"/> Both

EPA Identification Number 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Outfall Number 0012
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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY			
The table provides response space for one whole effluent toxicity sample. Copy the table to report additional test results.			
	Test Number _____	Test Number _____	Test Number _____
Test Type			
Indicate the type of test performed. (Check one response.)	<input type="checkbox"/> Static <input type="checkbox"/> Static-renewal <input type="checkbox"/> Flow-through	<input type="checkbox"/> Static <input type="checkbox"/> Static-renewal <input type="checkbox"/> Flow-through	<input type="checkbox"/> Static <input type="checkbox"/> Static-renewal <input type="checkbox"/> Flow-through
Source of Dilution Water			
Indicate the source of dilution water. (Check one response.)	<input type="checkbox"/> Laboratory water <input type="checkbox"/> Receiving water	<input type="checkbox"/> Laboratory water <input type="checkbox"/> Receiving water	<input type="checkbox"/> Laboratory water <input type="checkbox"/> Receiving water
If laboratory water, specify type.			
If receiving water, specify source.			
Type of Dilution Water			
Indicate the type of dilution water. If salt water, specify "natural" or type of artificial sea salts or brine used.	<input type="checkbox"/> Fresh water <input type="checkbox"/> Salt water (specify)	<input type="checkbox"/> Fresh water <input type="checkbox"/> Salt water (specify)	<input type="checkbox"/> Fresh water <input type="checkbox"/> Salt water (specify)
Percentage Effluent Used			
Specify the percentage effluent used for all concentrations in the test series.			
Parameters Tested			
Check the parameters tested.	<input type="checkbox"/> pH <input type="checkbox"/> Salinity <input type="checkbox"/> Temperature	<input type="checkbox"/> Ammonia <input type="checkbox"/> Dissolved oxygen	<input type="checkbox"/> pH <input type="checkbox"/> Salinity <input type="checkbox"/> Temperature
		<input type="checkbox"/> Ammonia <input type="checkbox"/> Dissolved oxygen	<input type="checkbox"/> pH <input type="checkbox"/> Salinity <input type="checkbox"/> Temperature
			<input type="checkbox"/> Ammonia <input type="checkbox"/> Dissolved oxygen
Acute Test Results			
Percent survival in 100% effluent		%	%
LC ₅₀			
95% confidence interval		%	%
Control percent survival		%	%

EPA Identification Number 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Outfall Number 0012
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY

The table provides response space for one whole effluent toxicity sample. Copy the table to report additional test results.

	Test Number _____	Test Number _____	Test Number _____
Acute Test Results Continued			
Other (describe)			
Chronic Test Results			
NOEC	%	%	%
IC ₂₅	%	%	%
Control percent survival	%	%	%
Other (describe)			
Quality Control/Quality Assurance			
Is reference toxicant data available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Was reference toxicant test within acceptable bounds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes
What date was reference toxicant test run (MM/DD/YYYY)?			
Other (describe)			

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EPA Identification Number
110064421460

NPDES Permit Number
AL0027863

Facility Name
Catoma Creek WWTP

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

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

Response space is provided for three SIUs. Copy the table to report information for additional SIUs.

	SIU <u>89</u>	SIU <u>115</u>	SIU <u>71</u>
Name of SIU	Coca Cola	Flowers Bakery	Hager Companies
Mailing address (street or P.O. box)	300 Coca-Cola Road	140 Folmar Parkway	150 Folmary Parkway
City, state, and ZIP code	Montgomery, AL 36105	Montgomery, AL 36105	Montgomery, AL 36105
Description of all industrial processes that affect or contribute to the discharge.	BOD (00310), TSS (00530), pH (S.U.), COD (00340)	BOD (00310), TSS (00530), O&G (00550), pH (S.U.), COD (00340)	pH (S.U.), Cd (01027), Pb (01051), Ag (1077), Cn (00720), Cr (01034), Cu (01042), Ni (01067), Zn (01092), Ag (1077), Mg (0921), Mo (1062) Cr+6 (1032)
List the principal products and raw materials that affect or contribute to the SIU's discharge.	soft drink manufacturer/ sugars, coloring water	processed breads and pastries/ flour, yeast, sugars	electroplating/ plating metals solutions
Indicate the average daily volume of wastewater discharged by the SIU.	252,000 gpd	20000 gpd	80000 gpd
How much of the average daily volume is attributable to process flow?	247,000 gpd	15000 gpd	77000 gpd
How much of the average daily volume is attributable to non-process flow?	5000 gpd	5000 gpd	3000 gpd
Is the SIU subject to local limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the SIU subject to categorical standards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EPA Identification Number
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AL0027863

Facility Name
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Form Approved 03/05/19
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TABLE F. INDUSTRIAL DISCHARGE INFORMATION

Response space is provided for three SIUs. Copy the table to report information for additional SIUs.

	SIU <u>89</u>	SIU <u>115</u>	SIU <u>71</u>
Under what categories and subcategories is the SIU subject?	Non-Categorical (SIC 2086 - Bottled and Canned Soft Drinks and Carbonated Waters)	Non-Categorical (SIC 2051 - Bread and other Bakery Products)	40 CFR 433.15 - Metal Finishing Subcategory (PSES)
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, describe.			

EPA Identification Number
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Facility Name
Catoma Creek WWTP

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

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

Response space is provided for three SIUs. Copy the table to report information for additional SIUs.

	SIU <u>326</u>	SIU <u>107</u>	SIU <u>145</u>
Name of SIU	Hyundai Motors Montgomery	Koch Foods Montgomery	West Rock Company
Mailing address (street or P.O. box)	700 Hyundai Blvd	3500 Western Blvd	111 Folmar Parkway
City, state, and ZIP code	Montgomery, AL 36105	Montgomery, AL 36108	Montgomery, AL 36105
Description of all industrial processes that affect or contribute to the discharge.	BOD (00310), TSS (00530), O&G (00550), pH (S.U.), COD (00340), NH3-N (00610), Cn (00720), Cd (01027), Cr (01034), Cu (01042), Pb (01051), Ni (01067), Zn (01092), T phos (0665), Ag (1077), Mg (0921), Cl (0940)	BOD (00310), TSS (00530), O&G (00550), pH (S.U.), NH3-N (00610), TKN (0625), NO2 +NO3 (0630), Tphos (0665)	BOD (00310), TSS (00530), pH (S.U.), COD (00340), Cd (01027), Cr (01034), Cu (01042), Pb (01051), Ni (01067), Zn (01092)
List the principal products and raw materials that affect or contribute to the SIU's discharge.	automobile assembly/ automobile components	poultry processing/ poultry	cardboard containers/ papers/glues
Indicate the average daily volume of wastewater discharged by the SIU.	850,000 gpd	1,401,000 gpd	13000 gpd
How much of the average daily volume is attributable to process flow?	840,000 gpd	1,400,000 gpd	12500 gpd
How much of the average daily volume is attributable to non-process flow?	10000 gpd	1000 gpd	500 gpd
Is the SIU subject to local limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the SIU subject to categorical standards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EPA Identification Number
110064421460

NPDES Permit Number
AL0027863

Facility Name
Catoma Creek WWTP

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

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

Response space is provided for three SIUs. Copy the table to report information for additional SIUs.

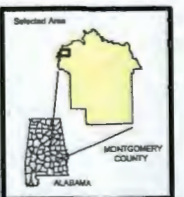
	SIU <u>326</u>	SIU <u>107</u>	SIU <u>145</u>
Under what categories and subcategories is the SIU subject?	40 CFR 433.17 - Metal Finishing Subcategory (PSNS)	Non-Categorical (SIC 2015 - Poultry Slaughtering and Processing)	Non-Categorical (SIC 2653 - Corrugated and Solid Fiber Boxes)
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, describe.			



The Mission of the Montgomery Water and Sewer Board
"To provide the highest quality water
and sanitary sewer service in harmony
with the environment"

Catoma WPCP
32° 21' 49" N
86° 26' 37" W

- Property Line
- Sewer Plants
- Existing Collector
- Existing Interceptor
- Existing Outfall
- Existing Force Main

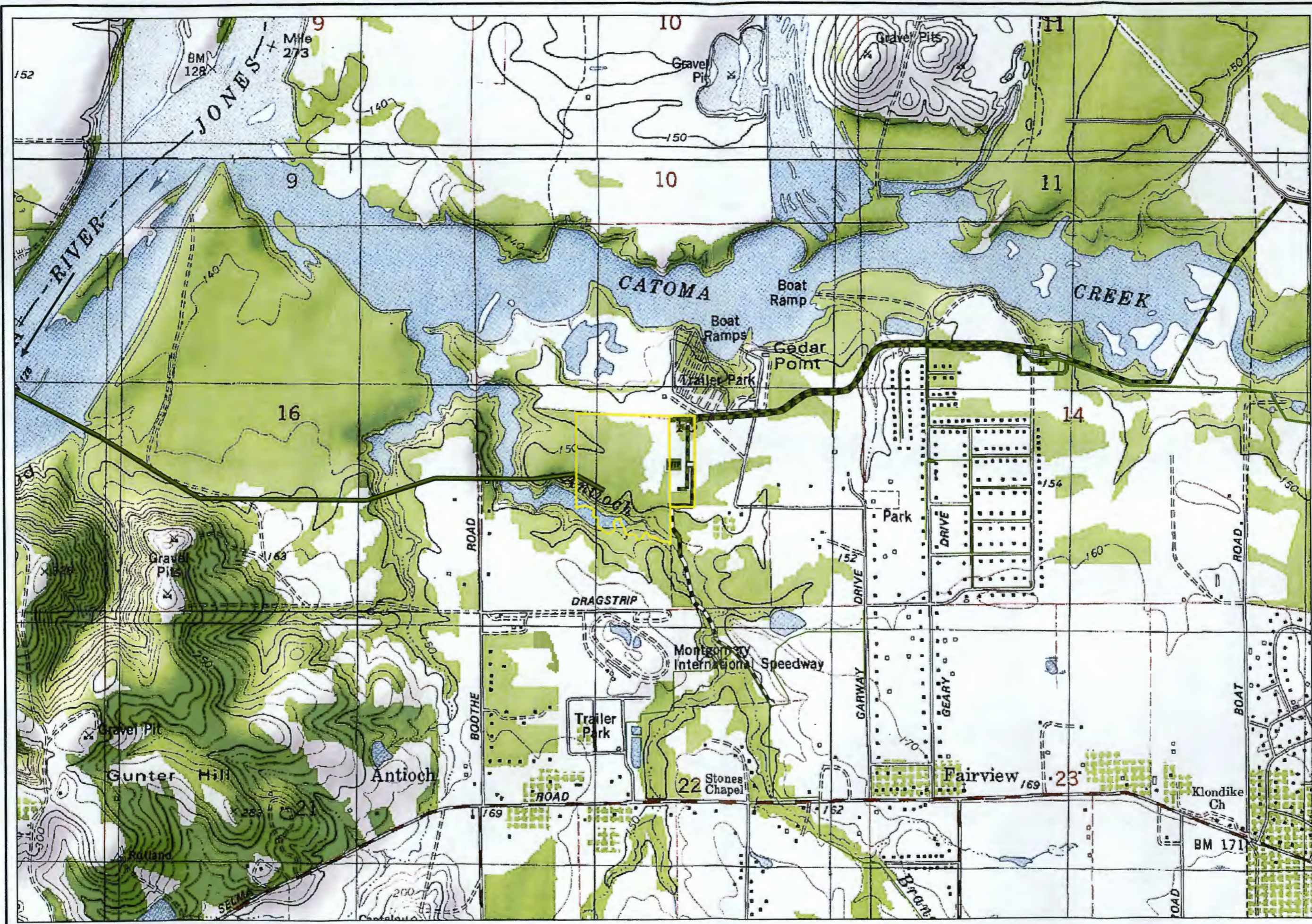


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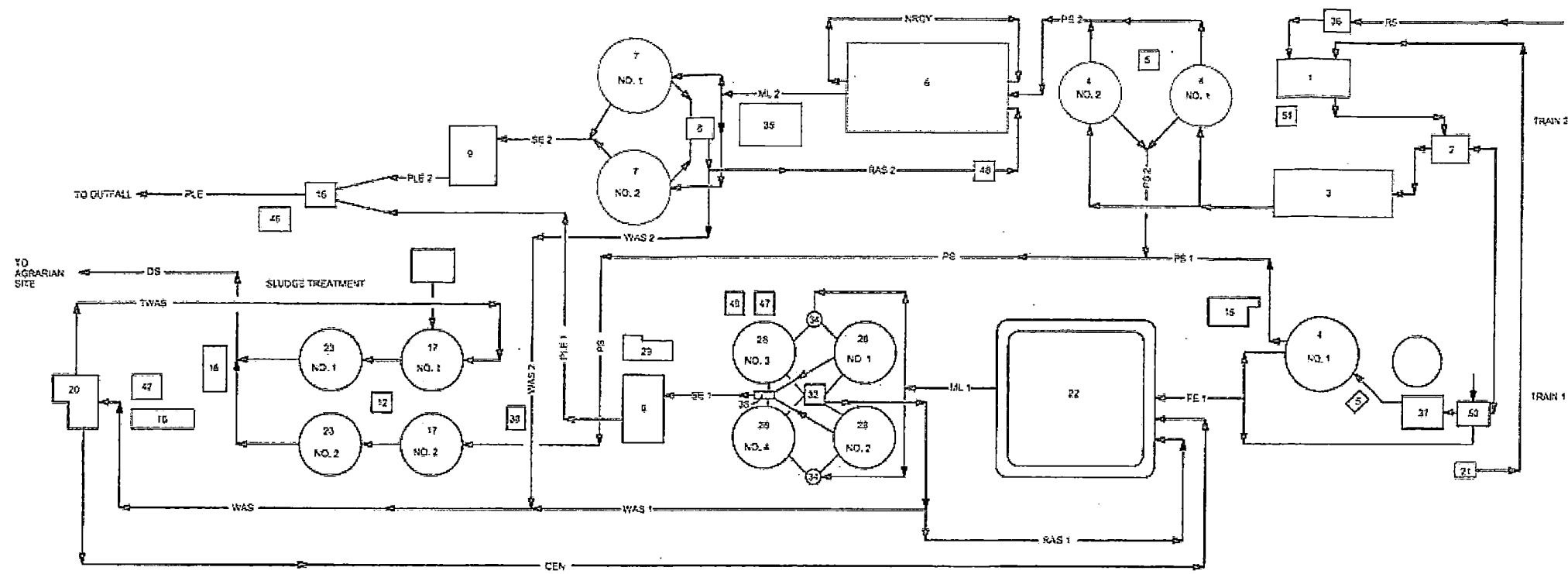
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STRUCTURE LEGEND-FACILITY NUMBER

1. PRELIMINARY TREATMENT FACILITY
2. PRELIMINARY SLUTTER
3. PREAERATION BASIN
4. PRIMARY CLARIFIER
5. PRIMARY SLUDGE PUMP BUILDING
6. ANAEROBIC BACH
7. SECONDARY CLARIFIER
8. TRAIN 2 RAS PUMP STATION
9. CHLORINE CONTACT BASIN
10. CHLORINE BUILDING
11. DIGESTED SLUDGE PUMP BUILDING
12. SLUDGE HEATING BUILDING
13. LAB BUILDING
14. MAINTENANCE BUILDING
15. STANDBY POWER BUILDING
16. DIVERSION BOX
17. PRIMARY DIGESTER
18. SLUDGE DEWATERING BUILDING
19. TRUCK LOADING STATION
20. CENTRIFUGE BUILDING
21. IN-PLANT PUMP STATION
22. TRAIN 1 AERATION BASIN
23. SECONDARY DIGESTER
24. GRAVITY THICKENER
25. TRAIN 1 HEADWORKS (ABANDONED)
26. NOT USED
27. STORAGE BUILDING
28. TRAIN 1 SECONDARY CLARIFIER
29. PUMP STATION
30. SCUMER BUILDING
31. SLUDGE DRYING BEDS
32. TRAIN 1 RAS PUMP STATION
33. TRAIN 1 RAS/WAS PUMP CONTROL BUILDING
34. TRAIN 1 SECONDARY CLARIFIER SPLITTER BOX
35. BLOWER BUILDING
36. INFLUENT FLOW METERS
37. TRAIN 1 PRE AERATION BASIN
38. TRAIN 1 PARSHALL FLOW
39. NOT USED
40. NOT USED
41. NOT USED
42. CHLORINE SCRUBBER
43. NOT USED
44. OPERATIONS BUILDING
45. NOT USED
46. SODIUM BISULFITE SYSTEM
47. TRAIN 1 SECONDARY SCUM PUMP STATION
48. TRAIN 2 RAS SPLITTER BOX
49. DIGESTER GAS FACILITY
50. TRAIN 1 PRELIMINARY BYPASS
51. PFF ODOR CONTROL FACILITY



STREAM IDENTIFICATION	STREAM ABBREVIATIONS	MMADF			ADF		
		FLOW (MGD)	BOD5 (lb/day)	TSS (lb/day)	FLOW (MGD)	BOD5 (lb/day)	TSS (lb/day)
1. RAW SEWAGE	RS	35.00	67177	64702	31.50	63459	76232
2. PRIMARY EFFLUENT	PE	34.83	47024	33280	31.39	42323	35482
2.1 TRAIN 1	PE 1	19.93	26871	19360	17.94	24184	17424
2.2 TRAIN 2	PE 2	14.90	20153	14020	13.45	18139	13058
3. MIXED LIQUOR	ML	57.79			52.01		
3.1 TRAIN 1	ML 1	32.34			29.11		
3.2 TRAIN 2	ML 2	25.45			22.90		
4. SECONDARY EFFLUENT	SE	34.81	5809	5809	31.33	5229	5229
4.1 TRAIN 1	SE 1	20.05	3346	3346	16.05	3012	3012
4.2 TRAIN 2	SE 2	14.76	2463	2463	15.28	2217	2217
5. PLANT EFFLUENT	PLE	34.81	5809	5809	31.33	5229	5229
5.1 TRAIN 1	PLE 1	20.05	3346	3346	16.05	3012	3012
5.2 TRAIN 2	PLE 2	14.76	2463	2463	15.28	2217	2217
6. PRIMARY SLUDGE	PS	0.122		10221	0.110		9379
6.1 TRAIN 1	PS 1	0.070		29041	0.063		26137
6.2 TRAIN 2	PS 2	0.052		21760	0.047		18602
7. RETURN ACTIVATED SLUDGE	RAS	22.50			23.25		
7.1 TRAIN 1	RAS 1	12.00			19.80		
7.2 TRAIN 2	RAS 2	10.50			9.45		
8. NITRATE RICH RECYCLE (TRAIN 2 ONLY)	NRCCY	30.28		87670	30.00		84606
9. WASTE ACTIVATED SLUDGE	WAS	0.48		33714	0.43		30433
9.1 TRAIN 1	WAS 1	0.29		20472	0.26		18425
9.2 TRAIN 2	WAS 2	0.19		13242	0.17		12008
10. THICKENED WASTE ACTIVATED SLUDGE	TWAS	0.074		32172	0.063		28954
11. CENTRIFUGE RETURN	CEN	0.409	847	1623	0.368	702	1524
12. DIGESTED SLUDGE	DPS	0.178		33542	0.176		30184
12.1 DIGESTED TWAS	DWAS	0.092		24267	0.083		21832
12.2 DIGESTED PLE	DPE						

NOTES ON MASS BALANCE CALCULATIONS:

1. BASED ON MAXIMUM MONTH AVERAGE DAILY FLOW (MMADF=35MGD) AND AVERAGE DAILY FLOW (ADF=31.5 MGD)
2. BASED ON AN INFLUENT TSS AND BOD CONCENTRATION OF 200 mg/l AND 230 mg/l, RESPECTIVELY
3. BASED ON A LOSS OF 1,000 mg/l IN TRAIN 1 @ 20.0 MGD AND A LOSS OF 3,500 mg/l IN TRAIN 2 @ 15.0 MGD
4. BASED ON A RAS RECYCLE RATIO OF 0.6 AND 0.7 FOR TRAINS 1 AND 2, RESPECTIVELY.
5. BASED ON A NRCCY FLOW RATE OF 30.0 MGD (TRAIN 2 ONLY)
6. BASED ON EFFLUENT SUSPENDED SOLIDS AND BOD OF 23.0 mg/l EACH.
7. BASED ON 55% VOLATILE SOLIDS FOR PRIMARY SLUDGE AND 60% VOLATILE SOLIDS FOR WAS.
8. BASED ON 7 AND 8 DAY SRT FOR TRAINS 1 AND 2, RESPECTIVELY.
9. BASED ON 20% REMOVAL OF BOD AND 60% REMOVAL OF TSS IN PRIMARY CLARIFIERS
10. BASED ON 5% SOLIDS IN PS AND 5.5% SOLIDS IN TWAS ENTERING THE SLUDGE DIGESTERS WITH 40% VSS REDUCTION DURING ANAEROBIC DIGESTION AND 3% SOLIDS IN DIGESTED SLUDGE.
11. BASED ON 0.25% SOLIDS IN WAS FROM SECONDARY CLARIFIERS.
12. BASED ON 85% CAPTURE OF WAS SOLIDS BY CENTRIFUGE.
13. THIS SHEET NOT IN CONTRACT. PROVIDED FOR ENGINEER AND OWNER INFORMATION AND COORDINATION ONLY.

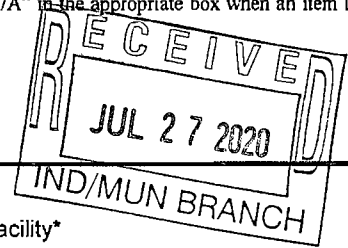
FIGURE 3-4
MONTGOMERY COMP PLAN UPDATE
 CATOMA WPCP
 PROCESS FLOW DIAGRAM

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)
NPDES INDIVIDUAL PERMIT APPLICATION

SUPPLEMENTARY INFORMATION FOR PUBLICLY-OWNED TREATMENT WORKS (POTW), OTHER TREATMENT WORKS TREATING DOMESTIC SEWAGE (TWTDS), AND PUBLIC WATER SUPPLY TREATMENT PLANTS

Instructions: This form should be used to submit the required supplementary information for an application for an NPDES individual permit for Publicly Owned Treatment Works (POTW) and other Treatment Works Treating Domestic Sewage (TWTDS). 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
Municipal Section
P O Box 301463
Montgomery, AL 36130-1463



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.

SECTION A - GENERAL INFORMATION

1. Facility Name: Catoma Creek WWTP
 - a. Operator Name: The Water Works & Sanitary Sewer Board of the City of Montgomery
 - b. Is the operator identified in A.1.a, the owner of the facility? Yes No
If no, provide name and address of the operator and submit information indicating the operator's scope of responsibility for the facility.

 - c. Name of Permittee* if different than Operator: _____
**Permittee will be responsible for compliance with the conditions of the permit*
2. NPDES Permit Number: AL 0027863 (Not applicable if initial permit application)
3. Facility Physical Location: (Attach a map with location marked; street, route no. or other specific identifier)
Street: 6000 Richard E Hanan Drive
City: Montgomery County: Montgomery State: AL Zip: 36108
Facility Location (Front Gate): Latitude: 32° 21' 49" N Longitude: 86° 26' 34" W
4. Facility Mailing Address: PO Box 1631
City: Montgomery County: Montgomery State: AL Zip: 36102
5. Responsible Official (as described on last page of this application):
Name and Title: William R. Henderson, P.E., General Manager
Address: PO Box 1631
City: Montgomery State: AL Zip: 36102
Phone Number: 334-206-1607 Email Address: bhenders@mwwssb.com

6. Designated Facility/DMR Contact:

Name and Title: Tim Logiotatos, Water Pollution Control Superintendent
 Phone Number: 334-206-1722 Email Address: tlogio@mwwssb.com

7. Designated Emergency Contact:

Name and Title: Tim Logiotatos, Water Pollution Control Superintendent
 Phone Number: 334-206-1722 Email Address: tlogio@mwwssb.com

8. Please complete this section if the Applicant's business entity is a Proprietorship or Limited Liability Company (LLC) with a responsible official not listed in A.5.

Name and Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____ Email Address: _____

9. Permit numbers for Applicant's previously issued NPDES Permits and identification of any other State Environmental Permits presently held by the Applicant within the State of Alabama:

<u>Permit Type</u>	<u>Permit Number</u>	<u>Held By</u>
NPDES	AL0082431	Montgomery Water Works & Sanitary Sewer Board
NPDES	AL0022225	Montgomery Water Works & Sanitary Sewer Board
NPDES	AL0022241	Montgomery Water Works & Sanitary Sewer Board
NPDES	AL0059315	Montgomery Water Works & Sanitary Sewer Board
See attachment for additional permits		

10. Identify all Administrative Complaints, Notices of Violation, Directives, or Administrative Orders, Consent Decrees, or Litigation concerning water pollution or other permit violations, if any against the Applicant within the State of Alabama in 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>
Catoma WWTP	AL0027863	Complaint & Consent Agreement	2019
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SECTION B – WASTEWATER DISCHARGE INFORMATION

1. List the following historical monthly flow rates recorded for the past five years for each outfall:

Outfall No.	Highest Flow in Last 12 Months (MGD)	Highest Daily Flow (MGD)	Average Flow (MGD)
0012	54.4	63.6	15.0
_____	_____	_____	_____
_____	_____	_____	_____

2. Attach a process flow schematic of the treatment process, including the size of each unit operation and sample collection locations.

3. Do you share an outfall with another facility? Yes No (If no, continue to B.4)

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?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

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

Automated flow monitoring and sampling for NPDES permit compliance is installed to monitor influent at the headworks and effluent before it is discharged from the WPCP.

5. Are any wastewater collection or treatment modifications or expansions planned during the next three years that could alter wastewater volumes or characteristics (Note: Permit Modification may be required)? Yes No

Briefly describe these changes and any potential or anticipated effects on the wastewater quality and quantity: (Attach additional sheets if needed.)

SECTION C – WASTE STORAGE AND DISPOSAL INFORMATION

Describe the location of all sites used for the storage of solids or liquids that have any potential for accidental discharge to a water of the state, either directly or indirectly via storm sewer, municipal sewer, municipal wastewater treatment plants, or other collection or distribution systems that are located at or operated by the subject existing or proposed NPDES- permitted facility. Indicate the location of any potential release areas and provide a map or detailed narrative description of the areas of concern as an attachment to this application:

Description of Waste	Description of Storage Location
N/A	
_____	_____
_____	_____

Describe the location of any sites used for the ultimate disposal of solid or liquid waste materials or residuals (e.g. sludges) generated by any wastewater treatment system located at the facility.

Description of Waste	Quantity (lbs/day)	Disposal Method*
Biosolids	12000	land application

*Indicate any wastes disposed at an off-site treatment facility and any wastes that are disposed on-site

SECTION D – INDUSTRIAL INDIRECT DISCHARGE CONTRIBUTORS

a. List the existing and proposed industrial source wastewater contributions to the municipal wastewater treatment system (Attach other sheets if necessary)

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?	
See attached list				<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
See attached list				<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

b. Are industrial wastewater contributions regulated via a locally approved sewer use ordinance? Yes No
If yes, please attach a copy of the ordinance.

SECTION E – 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 E.1 – E.12 below:

- | | 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 F – 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 F.2 below. If no, go to Section G.

2. Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in F.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 F.2.A – F.2.F below, ADEM Form 311-Alternatives Analysis, and either ADEM Form 312 or ADEM Form 313- Calculation of Total Annualized Project Costs (Public-Sector or Private-Sector Projects, whichever is applicable). ADEM Form 312 or ADEM Form 313, whichever is applicable, must be provided for each treatment discharge alternative considered technically viable. ADEM forms can be found on the Department's website at <http://adem.alabama.gov/DeptForms/>.

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 G – EPA Application Forms

All Applicants must submit certain EPA permit application forms. More than one application form may be required from a POTW or other TWTDS depending on the number and types of discharges or outfalls. The EPA application forms are found on the Department's website at <http://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 new or existing discharges of sanitary wastewater from Publicly-Owned Treatment Works (POTW) and Other Treatment Works Treating Domestic Sewage (TWTDS) must submit Form 2A.
3. Applicants for new or existing land application of sanitary wastewater must submit Form 2A and, if the land application site is not completely bermed to prevent runoff, applicants must also submit Form 2F.
4. Applicants for new and existing discharges of process wastewater from water treatment facilities (i.e. public water supply treatment plants) must submit Form 2C.
5. Applicants that generate sewage sludge, derive a material from sewage sludge, or dispose of sewage sludge must submit Part 2 of Form 2S.

SECTION H- ENGINEERING REPORT/BMP PLAN REQUIREMENTS

Any Engineering Report or Best Management Practice (BMP) Plans required to be submitted to ADEM by the applicant must be in accordance with ADEM 335-6-6-.08(i) & (j).

SECTION I- RECEIVING WATERS

Outfall No.	Receiving Water(s)	303(d) Segment?		Included in TMDL?*	
0012	Alabama River	<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

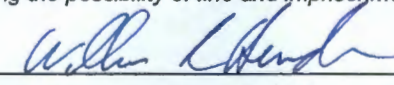
*If a TMDL Compliance Schedule is requested, the following should be attached as supporting documentation:

- (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 J - 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: 10-25-17
 Name and Title: William R. Henderson, General Manager

If the Responsible Official signing this application is not identified in Section A.5 or A.8, provide the following information:

Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____ Email Address: _____

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

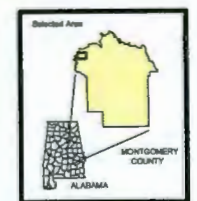
- (1) The application for an NPDES permit shall be signed by a responsible official, as indicated below:
 - (a) In the case of a corporation, by a principal executive officer of at least the level of vice president, or a manager assigned or delegated in accordance with corporate procedures, with such 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.



The Mission of the Montgomery Water and Sewer Board
 "To provide the highest quality water and sanitary sewer services in harmony with the environment"

Catoma WPCP

- Property Line
- Sewer Plants

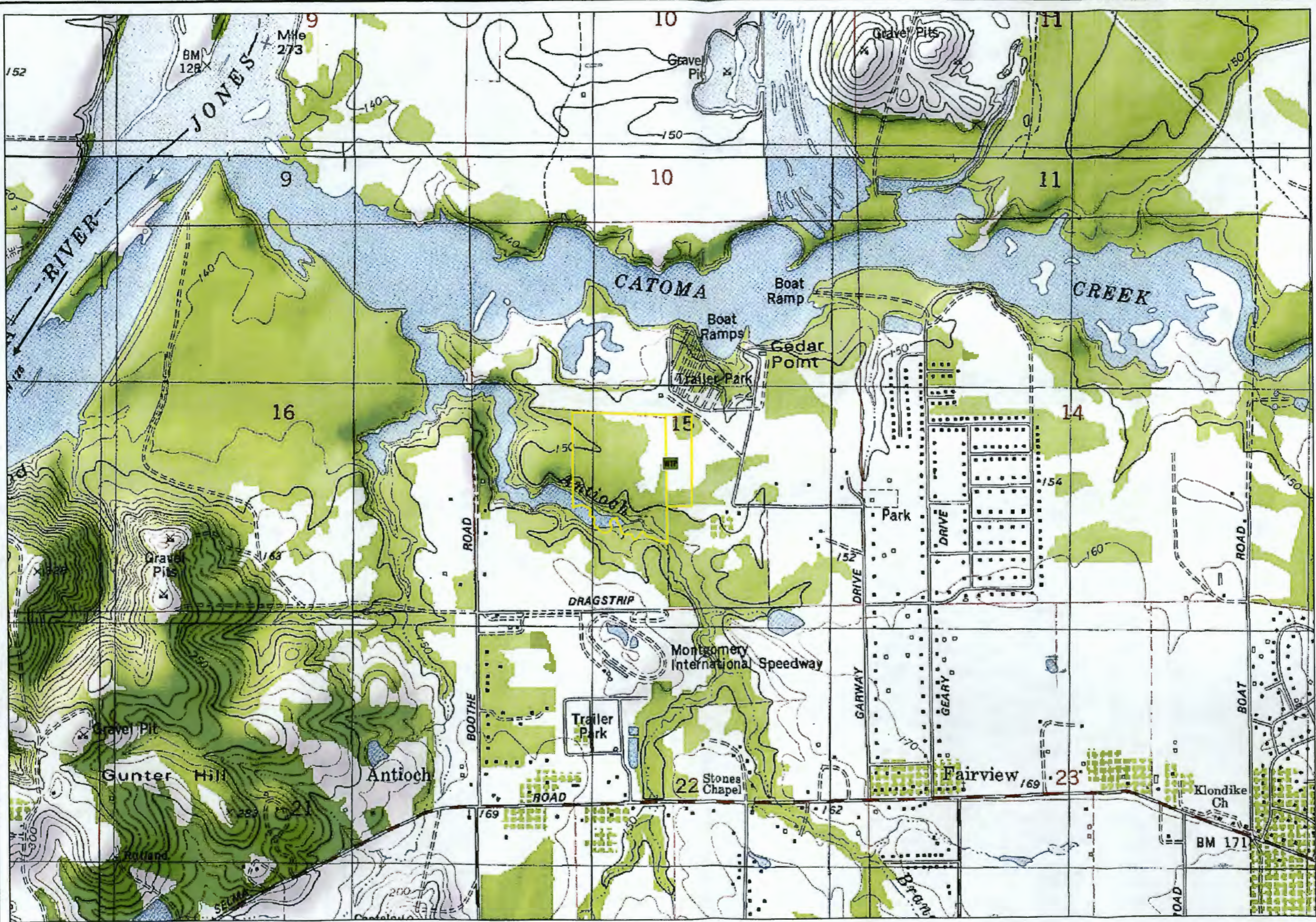


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ADEM Form 188 #A9

Supplemental Information – NPDES Permit Application Form

Permit numbers for Applicant’s previously issued NPDES permits and identification of any other State Environmental Permits presently held by the Applicant within the State of Alabama:

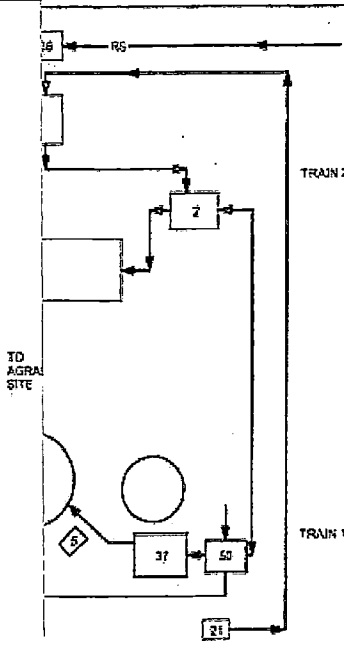
Permit Name	Permit Number	Held By
Catoma Creek WWTP	NPDES: AL0027863	Montgomery Water Works & Sanitary Sewer Board
Econchate WWTP	NPDES: AL0022225	Montgomery Water Works & Sanitary Sewer Board
Towassa WWTP	NPDES: AL0022241	Montgomery Water Works & Sanitary Sewer Board
Milley’s Creek WPCP	NPDES: AL0082431	Montgomery Water Works & Sanitary Sewer Board
Rolling Hills Wastewater Lagoon	NPDES: AL0059315	Montgomery Water Works & Sanitary Sewer Board
CT Perry Water Treatment Plant	NPDES: AL0065731	Montgomery Water Works & Sanitary Sewer Board
Water Supply Permit	PWS: AL0001070	Montgomery Water Works & Sanitary Sewer Board

STRUCTURE LEGEND/FACILITY NUMBER

1. PRELIMINARY TREATMENT FACILITY
2. PRELIMINARY SPLITTER
3. PREAERATION BASIN
4. PRIMARY CLARIFIER
5. PRIMARY SLUDGE PUMP BUILDING
6. ANOXIC-BASIN
7. SECONDARY CLARIFIER
8. TRAIN 2 RAS PUMP STATION
9. CHLORINE CONTACT BASIN
10. CHLORINE BUILDING
11. DIGESTED SLUDGE PUMP BUILDING
12. SLUDGE HEATING BUILDING
13. LAB BUILDING
14. MAINTENANCE BUILDING
15. STANDBY POWER BUILDING
16. DIVERSION BOX
17. PRIMARY DIGESTER
18. SLUDGE DEWATERING BUILDING
19. TRUCK LOADING STATION
20. CENTRIFUGE BUILDING
21. IN-PLANT PUMP STATION
22. TRAIN 1 AERATION BASIN
23. SECONDARY DIGESTER
24. GRAVITY THICKENER
25. TRAIN 1 HEADWORKS (ABANDONED)
26. NOT USED
27. STORAGE BUILDING
28. TRAIN 1 SECONDARY CLARIFIER
29. PUMP STATION
30. SOILER BUILDING
31. SLUDGE DRYING BEDS
32. TRAIN 1 RAS PUMP STATION
33. TRAIN 1 RAS WAS PUMP CONTROL BUILDING
34. TRAIN 1 SECONDARY CLARIFIER SPLITTER BOX
35. BLOWER BUILDING
36. INFLUENT FLOW METERS
37. TRAIN 1 PRE AERATION BASIN
38. TRAIN 1 PARALLEL FLUME
39. NOT USED
40. NOT USED
41. NOT USED
42. CHLORINE SCRUBBER
43. NOT USED

NOTES ON MASS BALANCE CALCULATIONS:

1. BASED ON MAXIMUM MONTH AVERAGE DAILY FLOW (ADP=31.5 MGD)
2. BASED ON AN INFLUENT TSS AND BOD CONCENTRATION
3. BASED ON A TSS OF 3,000 mg/l IN TRAIN 1 @ 200 MGD
4. BASED ON A RAS RECYCLE RATIO OF 0.5 AND 0.7 FOR TRAIN 2
5. BASED ON A RECY FLOWRATE OF 30.9 MGD (TRAIN 2)
6. BASED ON EFFLUENT SUSPENDED SOLIDS AND BOD
7. BASED ON 85% VOLATILE SOLIDS FOR PRIMARY SLUDGE
8. BASED ON 7 AND 8 DAY SRT FOR TRAINS 1 AND 2 RESPECTIVELY
9. BASED ON 30% REMOVAL OF BOD AND 60% REMOVAL OF TSS
10. BASED ON 5% SOLIDS IN PS AND 5.5% SOLIDS IN TWA REDUCTION DURING ANAEROBIC DIGESTION AND 3% IN TSS
11. BASED ON 0.25% SOLIDS IN WAS FROM SECONDARY CLARIFIER
12. BASED ON 90% CAPTURE OF WAS SOLIDS BY CENTRIFUGE
13. THIS SHEET NOT IN CONTRACT. PROVIDED FOR ENCL.



ADP	
BOD5 (lbs/day)	TSS (lbs/day)
66459	75232
42123	30492
24184	17424
18138	13298
---	---
---	---
5229	5229
3012	3012
2217	2217
5229	5229
3012	3012
2217	2217
---	45739
---	20137
---	19602
---	---
---	---
---	548061
---	35430
---	18425
---	12008
---	28954
782	1524
---	52020
---	30185
---	21802
---	TBC

677481

**URE 3-4
COMP PLAN UPDATE
DMA WPCP
FLOW DIAGRAM**



PLOT TIME: 12:26:14 PM



FACILITY LEGEND

- SYMBOL (#) FACILITY NAME
- 29** NEW:
 - (29) W3 PUMP STATION
 - (50) TRAIN 1 PRELIMINARY TREATMENT BYPASS
 - (51) ODOR CONTROL
 - (52) PTF ELECTRICAL BUILDING
 - (53) W3 ELECTRICAL BUILDING
 - 1** TO-BE-MODIFIED:
 - (1) PRELIMINARY TREATMENT FACILITY
 - (4) TRAIN 2 PRIMARY CLARIFIER NO.1 + NO.2
 - (4) TRAIN 1 PRIMARY CLARIFIER NO.1
 - (5) TRAIN 1 PRIMARY SLUDGE PUMP BUILDING
 - (5) TRAIN 2 PRIMARY SLUDGE PUMP BUILDING
 - (15) STANDBY POWER BUILDING
 - (17) PRIMARY DIGESTER NO.1 + NO.2
 - (22) TRAIN 1 AERATION BASIN
 - (23) SECONDARY DIGESTER NO.1 + NO.2
 - (28) TRAIN 1 SECONDARY CLARIFIER
 - (32) TRAIN 1 RAS PUMP STATION
 - (33) TRAIN 1 RAS/WAS PUMP CONTROL BUILDING
 - (34) TRAIN 1 SECONDARY CLARIFIER SPLITTER BOX NO.1 + NO.2
 - (47) TRAIN 1 SECONDARY SCUM PUMP STATION
 - (49) DIGESTER GAS FACILITY
 - 4** TO-BE-DEMOLISHED:
 - (4) TRAIN 1 PRIMARY CLARIFIER NO.2
 - (25) TRAIN 1 HEADWORKS 2 (ABANDONED)
 - (28) TRAIN 1 GRIT TANK (ABANDONED)
 - (29) W3 PUMP STATION
 - 3** EXISTING TO REMAIN:
 - (2) PRELIMINARY SPLITTER BOX
 - (3) TRAIN 2 PREAERATION BASIN
 - (5) TRAIN 2 PRIMARY SLUDGE PUMP BUILDING
 - (6) TRAIN 2 ANOXIC/OXIC BASIN
 - (7) TRAIN 2 SECONDARY CLARIFIER NO.1 + NO.2
 - (8) TRAIN 2 RAS PUMP STATION
 - (9) TRAIN 2 CHLORINE CONTACT BASIN/ PARSHALL FLUME
 - (9) TRAIN 1 CHLORINE CONTACT BASIN
 - (10) CHLORINE BUILDING
 - (11) DIGESTED SLUDGE PUMP BUILDING
 - (12) SLUDGE HEATING BUILDING
 - (13) LABORATORY BUILDING
 - (14) MAINTENANCE BUILDING
 - (16) DIVERSION BOX
 - (19) TRUCK LOADING STATION
 - (20) CENTRIFUGE BUILDING
 - (21) IN-PLANT PUMP STATION
 - (24) GRAVITY THICKENER
 - (27) STORAGE BUILDING
 - (30) BOILER BUILDING
 - (31) SLUDGE DRYING BEDS
 - (35) BLOWER BUILDING
 - (36) INFLUENT FLOW METERS
 - (37) TRAIN 1 PREAERATION BASIN
 - (38) TRAIN 1 PARSHALL FLUME
 - (40) DIESEL FUEL STATION
 - (41) PRIMARY SWITCHGEAR
 - (42) CHLORINE SCRUBBER
 - (43) APCO SUBSTATION
 - (44) OPERATIONS BUILDING
 - (45) PLANT GENERATORS
 - (46) SODIUM BISULFITE SYSTEM
 - (48) TRAIN 2 RAS SPLITTER BOX

**NOTE: FACILITY NUMBERS ON THIS DRAWING REFER TO EXISTING PLANT NUMBERING SYSTEM. ALL OTHER DRAWINGS CONTAIN UNIQUE-TO-THIS-PROJECT FACILITY IDs AND TAG NUMBERS.

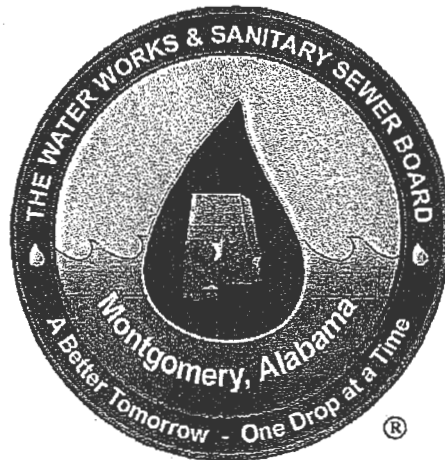
FOR ADDITIONAL FACILITY MODIFICATIONS SEE DRAWING 05-S-2001, REHAB SITE PLAN

FIGURE 3-3
MONTGOMERY COMP PLAN UPDATE
 CATOMA WPCP SITE PLAN

ADEM Form 188**Supplemental Information – NPDES Permit Application Form – Catoma WWTP (AL0027863)****Section D – Industrial Indirect Discharge Contributors**

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?
Air National Guard Armory	Aviation (jet fuel, firefighting foam)	Existing	0.015	N
Baptist Health South	Hospital (laboratory chemicals)	Existing	0.016	N
Cargill Nutrena Feed	Animal feeds (grains, black molasses, preservatives)	Existing	0.004	N
Coca-Cola Bottling Co.	Soft drink manufacturer (sugars, coloring water)	Existing	0.485	Y
Flowers Specialty Foods	Bread processor (flours, yeast, sugars)	Existing	0.034	Y
Hager Hinge Co.	Metal plating (plating metals solutions)	Existing	0.080	Y
Hyundai Motor Manufacturing Alabama	Automobile assembly (automobile components)	Existing	0.433	Y
Jackson Hospital	Hospital (laboratory chemicals)	Existing	0.187	N
Koch Foods of Alabama, LLC	Poultry processor (poultry)	Existing	1.41	Y
Mobis Alabama, LLC	Automobile components (metals and plastics)	Existing	0.119	N
Nalco Company	Polymers and emulsions (oils, polymers, chemicals)	Existing	0.002	N
West Rock Company	Cardboard containers (papers, glues)	Existing	0.013	Y

RULES AND REGULATIONS



WATER WORKS & SANITARY SEWER BOARD
of the
CITY OF MONTGOMERY, ALABAMA

Governing Service To:

WATER USERS,
SANITARY SEWER USERS,
and
INDUSTRIAL WASTE DISCHARGERS

DATE APPROVED
9/19/17



SECTION III PRETREATMENT REGULATIONS

A. GENERAL

It is the purpose and intent of these Rules and Regulations, as defined herein, to provide a complete system for permitting discharge to the Board's POTW in accordance with all Federal and State statutes and with Rules issued there under.

All dischargers of non-domestic waste are subject to pretreatment regulations and must be reviewed to evaluate applicability of pertinent requirements.

The issuance of permits and supervision of the user's pretreatment program and the revocation of permit authorizations shall in general be under the supervision of ADEM, with concurrence of the Board.

Each user required to enter into a discharge permit agrees to comply with these Rules and Regulations and promptly to pay all fees and charges provided herein or subsequently adopted by the Board. Failure to do so shall be grounds for cancellation of the permit and for discontinuance of sewer/water service. The application for a discharge permit will be provided by ADEM, unless the Board wishes to adopt forms for its own use. In these forms all reference to the City or municipality shall refer to the Board.

B. PRETREATMENT PROGRAM PROCEDURES FOR PERMITTING, COMPLIANCE TRACKING AND ENFORCEMENT

The Board's pretreatment program consists of four major elements: (1) the identification and categorization of dischargers and determination of pretreatment requirements; (2) the issuance of permits; (3) the tracking of dischargers to insure compliance with permits; and (4) the enforcement of all pretreatment rules and regulations.

The purpose of this paragraph is to describe the procedures for accomplishing requirements in each of the four major areas listed above. The intent of these procedures is to establish the administrative mechanism to allow the efficient and effective implementation of the Board's pretreatment resolution and the Board's Memorandum of Agreement with ADEM.

RULES AND REGULATIONS

(1) Identification, Categorization of Dischargers, and Determination of Pertinent Requirements.

(a) Identification of Existing Dischargers.

The primary tool for identifying existing dischargers who may be subject to the Board's pretreatment requirements is a preliminary screening questionnaire that is sent to any known or suspected discharger who has not been categorized.

The function of the questionnaire is to obtain sufficient information to make a categorization decision; that is, to determine in which of the three categories listed below the discharger should be placed. The categories are:

- 1) A non-significant discharger about whom information is to be maintained in the Board's inventory of non-domestic contributors.
- 2) A significant discharger who does not require a State Indirect Discharge (SID) permit but whose discharge is to be regulated in some facet by the Board.
- 3) A significant discharger who requires an SID permit.

If there is no response from the recipient to the questionnaire, a second questionnaire will be sent with a letter of transmittal detailing the eventual consequence of non-response (see Enforcement Section).

(b) Categorization.

Upon evaluation of the questionnaires each business will be placed into one of three categories for program management. General guidelines for identifying category placement are as follows:

- 1) Category 1 - Businesses that have no discharge other than normal sanitary wastewater, or whose non-sanitary discharge has no significant effect on the sewer, will be placed in this category. The businesses so designated will not be tracked by the Board but they will be maintained in the Board's inventory in case a change in status is required in the future. No contractual arrangement between the Board and discharger will be required for those designated in Category 1. An example of a non-significant discharger could be a small office building.
- 2) Category 2 - A business will be placed in Category 2 when, in the Board's judgment, some component(s) in its wastewater may interfere with the operation and maintenance of the sewer collection system and/or the wastewater treatment plant and it is deemed appropriate to monitor the discharge. In Category 2, the nature of the wastewater does not fall under state or federal industrial pretreatment guidelines; therefore, no SID permit is required, but these dischargers will be subject to control by the Board. A permit delineating specific requirements for the dischargers will be executed

PRETREATMENT REGULATIONS

between the Board and the discharger for all discharges designated in Category 2. Dischargers in Category 2 will be subject to the Board's compliance tracking program. An example of a significant discharger who does not require a SID permit could be an apartment complex or a Food Service Establishment (FSE)/restaurant.

- 3) Category 3 - Businesses in Category 3 are those, which are subject to state and federal industrial pretreatment rules and regulations. Those in Category 3 will require a State Indirect Discharge (SID) permit. Generally, in accordance with state requirements, a business discharging a wastewater with one or more of the following characteristics will be placed in Category 3:
 - a) The discharge of more than 25,000 gpd of process wastewater.
 - b) The discharge of significant quantities of one or more of the EPA designated categorical wastes.
 - c) The discharge in significant quantities of a prohibited or potentially prohibited waste.

Businesses in Category 3 will be permitted by the State, will be required to execute a permit with the Board for the purpose of providing the Board a means of regulating the discharge, and will be subject to the Board's compliance tracking program. In addition to State permit requirements, the Board may, through permit, control those wastes described in Category 2 for Category 3 users. An example of a significant discharger who requires an SID permit would be an automobile manufacturer.

(c) Appeal Procedures for Any Pretreatment Requirement.

Decisions of the Board concerning pretreatment requirements for users will be made by the General Manager. Should the user object to the classification assigned or to the pretreatment criteria required by the General Manager's decision, the user may appeal the decision as outlined below:

- 1) A written notice of objection supported by any pertinent documentation must be made to the General Manager within 30 calendar days of notification of the requirement. The thirty day period within which the user can appeal may be waived by the General Manager if extenuating circumstances so justify. The General Manager will reply to the objection within 20 working days. Decisions by the General Manager may be appealed to the Board. Decisions by the Board are final except in cases where ADEM must also concur.
- 2) Any written appeal submitted and received by the Board, which is not addressed within 20 working days of receipt, is considered granted to the user.

RULES AND REGULATIONS

- 3) If a user is appealing being placed in Category 3 (SID permit required), final appeal concerning issuance of the SID permit and permit requirement must be to ADEM. The Board's recommendations must accompany the user's appeal to ADEM.
- (d) Modification of Program Requirements for Users: Periodically, changes in pretreatment requirements of existing users are required. When such changes are deemed necessary, the procedures listed below are applicable.
 - 1) The user will be notified in writing of the proposed change and of the basis for the change.
 - 2) Included in the notice of change will be any draft permit or contractual requirements, if appropriate.
 - 3) The proposed change in user requirements will be effective 30 calendar days after notice. Should the user object to the change, such objection must be registered with the Board within 30 calendar days of receipt of the notice of proposed change. Appeal of changes should be as described in (c) above.

(2) Permits

The basis for regulating users of the sewer system will be through SID permits and/or permits between the user and the Board.

SID permits will be issued and enforced by ADEM in coordination with the Board but are not directly controlled by the Board.

In addition to the SID permit, the Board will enter into a separate permit with the permit holder to address pretreatment criteria. The Board will execute permits with Category 2 and Category 3 users. These permits will specifically identify all pretreatment requirements to be enforced by the Board that the user must meet and will provide the Board that authority required by federal pretreatment regulations but not granted the Board under enabling statutes. Users may be subject to other state and federal pretreatment requirements not included in the Board's permit. All SID requirements will be referenced in Category 3 permits.

If construction of pretreatment facilities is required of any user, such a requirement will be included in the user's permit. A schedule for facility completion will be an enforceable portion of the permit.

(3) Compliance Tracking

The purpose of the compliance-tracking program is to insure that all Category 2 and Category 3 users are meeting the terms of their permits. The program consists of the following major components:

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- (a) **Self-Monitoring Reports:** In accordance with the Board/ADEM Memorandum of Agreement, each Category 3 user will be required to submit a self-monitoring report once a month. This requirement will be included in the user's permit with the Board. Parameter concentration(s) to be reported and the frequency of analysis will be specified in the SID permit. Reports will be submitted concurrently to the Board and to ADEM and should be received by the Board no later than the 28th day of the subsequent month. Failure to submit such reports will be a breach of the executed permit and could result in enforcement action.
 - (b) **Compliance Evaluation Inspections:** The purpose of compliance evaluation inspections (CEI) is to insure the proper operation of any pretreatment facilities specified in permits with Category 2 and Category 3 users. These inspections are a "walk-through" type and do not involve effluent sampling. These inspections will confirm that all required facilities are in place and being properly operated. A CEI may be done concurrently with the compliance sampling inspection (CSI) described below. All Category 2 and Category 3 facilities will receive a CEI annually.
 - (c) **Compliance Sampling Inspection:** The purpose of the compliance sampling inspection (CSI) is to insure that those effluent limits specified in a user's permit are being achieved. During the CSI, a 3-day composite sample will be taken from the user's effluent and analyzed for those parameters contained in the respective permit. The Board will conduct such inspections every six months. As a minimum, annual inspections will be conducted. In lieu of a 3-day composite sample on an annual basis, the Board may choose to conduct a CSI on a 24 hour composite, monthly basis if such an approach appears appropriate for a given user.
 - (d) **Inspection Summary Reports:** Reports will be maintained of all inspection results.
- (4) **Enforcement**

The Board will enforce its permits with Category 2 and Category 3 users and the Pretreatment Resolution in a consistent and equitable manner. The compliance-tracking program will identify those users not meeting the terms of their permits. Once violators are identified, enforcement action will follow. The following enforcement actions are available to the Board's General Manager when seeking to correct problems:

- (a) Verbal notice to the violators requesting corrective action.
- (b) Written notice to the violators requesting corrective action.
- (c) Execution of penalty fees as provided for in the approved permit between the Board and dischargers.
- (d) Referral of the violator to ADEM.
- (e) Termination of water and sewer services to the violator.

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C. GENERAL DISCHARGE PROHIBITIONS

No person shall contribute or cause to be contributed, directly or indirectly, any pollutant or wastewater which will interfere with the operation or performance of the POTW. These general prohibitions apply to all users of a POTW whether or not the user is subject to National Categorical Pretreatment Standards or any other national, state or local pretreatment standards or requirements. A user may not contribute the following substances to any POTW:

- (1) Any liquids, solids or sp-gasses which by reason of their nature or quantity are, or may be, sufficient either alone or by interaction with other substances to cause fire or explosion or to be injurious in any other way to the POTW or to the operation of the POTW. At no time shall two successive readings on an explosion hazard meter at the point of discharge into the system (or at any point in the system) be more than five percent (5%) nor shall any single reading be over ten percent (10%) of the Lower Explosive Limit (LEL) of the meter. Prohibited materials include, but are not limited to, gasoline, kerosene, naphtha, benzene, toluene, xylene, ethers, alcohols, ketones, aldehydes, peroxides, chlorates, perchlorates, bromates, carbides, hydrides, sulfides and any other substance that is a fire hazard to the system.
- (2) Solid or viscous substances that may cause obstruction to the flow in a sewer or other interference with the operation of the wastewater treatment facilities, including, but not limited to, grease, garbage with particles greater than one-half inch ($\frac{1}{2}$ ") in any dimension, animal guts or tissues, paunch manure, bones, hair, hides or fleshing, entrails, whole blood, feathers, ashes, cinders, sand, spent lime, stone or marble dust, metal, glass, straw, shavings, grass clippings, rags, spent grains, spent hops, waste paper, wood, plastics, gas, tar, asphalt, residues, residues from refining or processing of fuel or lubricating oil, mud, or glass grinding or polishing wastes.
- (3) Any wastewater having a PH less than 6.0, unless the POTW is specifically designed to accommodate such wastewater, or wastewater having any other corrosive property capable of causing damage or hazard to structures, equipment, and/or personnel of the POTW.
- (4) Any wastewater containing toxic pollutants in sufficient quantity, either alone or by interaction with other pollutants, to interfere with any wastewater treatment process, to constitute a hazard to humans or animals, to create a toxic effect in the receiving waters of the POTW, or to exceed the limitation set forth in a Categorical Pretreatment Standard. A toxic pollutant shall include but not be limited to any pollutant identified pursuant to Section 307(a) of the Clean Water Act, as amended, 33 U.S.C. Section 1317 (a).
- (5) Any noxious or malodorous liquids, sp-gasses, or solids which either alone or by interaction with other wastes are sufficient to create a public nuisance or hazard to life or are sufficient to prevent entry into the sewers for maintenance and repair.

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- (6) Any substances, such as residues, sludge, or scums, that may cause the POTW's effluent or any other product of the POTW to be unsuitable for reclamation and reuse or that interferes with the reclamation process. In no case shall a substance contributed to the POTW fail to comply with sludge use or disposal criteria, guidelines or regulations developed under Section 405 of the Clean Water Act, as amended, 33 U.S.C. section 1345, or any criteria, guidelines, or regulations affecting sludge use or disposal developed pursuant to the Solid Waste Disposal Act, the Clean Air Act, the Toxic Substances Control Act, or state criteria applicable to the sludge management method being used.
- (7) Any substance that will cause the POTW to violate its NPDES and/or State Indirect Discharge Permit or the receiving water quality standards.
- (8) Any wastewater with objectionable color not removed in the treatment process, including, but not limited to, dye wastes and vegetable tanning solutions.
- (9) Any wastewater having a temperature that will inhibit biological activity in the POTW treatment plant resulting in interference, but in no case wastewater with a temperature at the introduction into the POTW which exceeds 40 degrees C (104 degrees F) unless the POTW treatment plant is designed to accommodate such temperature.
- (10) Any pollutants, including oxygen demanding pollutants (BOD, etc.) released at a flow rate and/or pollutant concentration which a user knows or has reason to know will cause interference to the POTW. In no case shall a slug load have a flow rate or contain concentration or qualities of pollutants that exceed for any time period longer than fifteen (15) minutes more than five (5) times the average twenty-four (24) hour concentration, quantities, or flow during normal operation.
- (11) Any wastewater containing any radioactive wastes or isotopes of such concentration as may exceed limits established by the Superintendent in compliance with applicable State or Federal Regulations.
- (12) Any wastewater that causes a hazard to human life or creates a public nuisance.

When the Superintendent determines that a user(s) is contributing to the POTW any of the above enumerated substances in such amounts as to interfere with the operation of the POTW, the Superintendent shall: (1) advise the user(s) of the impact of the contribution on the POTW; and (2) develop effluent limitations(s) for such user(s) to correct the interference with the POTW.

D. NATIONAL CATEGORICAL PRETREATMENT STANDARDS

Upon the promulgation of the National Categorical Pretreatment Standards for a particular industrial subcategory, the Pretreatment Standard, if more stringent than limitations imposed under these Rules for sources in that subcategory shall immediately supersede the limitations

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imposed under these Rules. The Superintendent shall notify all affected users of the applicable reporting requirements under 40 CFR, Section 403.12.

E. MODIFICATION OF NATIONAL CATEGORICAL PRETREATMENT STANDARDS

Where the Board's wastewater treatment system achieves consistent removal of pollutants limited by National Pretreatment Standards, the Board may apply to the Alabama Department of Environmental Management for modification of specific limits in the National Pretreatment Standards. "Consistent Removal" shall mean reduction in the amount of a pollutant or alteration of the nature of the pollutant in the effluent by the wastewater treatment system to a less toxic or a harmless state which is achieved by the system in 95 percent of the samples taken when measured according to the procedures set forth in Section 403.7(c) of Title 40 of the Code of Federal Regulations, Part 403 - General Pretreatment Regulations for Existing and New Sources of Pollution promulgated pursuant to the Clean Water Act. The Board may then modify pollutant discharge limits in the National Pretreatment Standards if the requirements contained in 40 CFR, Part 403, Section 403.7, are fulfilled and prior approval from the Approval Authority is obtained.

F. POLLUTANT LIMITATIONS

No person shall discharge wastewater containing any pollutant contrary to National Categorical Pretreatment Standards or any other national, state or local pretreatment standards or requirements.

G. STATE REQUIREMENTS

State requirements and limitations on discharges shall apply in any case where they are more stringent than federal requirements and limitations or those in these Rules.

H. BOARD'S RIGHT OF REVISION

The Board reserves the right to establish by Rules and Regulations more stringent limitations or requirements on discharges to the wastewater disposal system than those presently contained in this Section.

I. EXCESSIVE DISCHARGE

No user shall ever increase the use of process water or in any way attempt to dilute a discharge as a partial or complete substitute for adequate treatment to achieve compliance with the limitations contained in the National Categorical Pretreatment Standards, or in any other pollutant-specific limitation developed by the Board or State. (Comment: Dilution may be an acceptable means of complying with some of the prohibitions set forth in paragraph A of this

section, e.g. the PH prohibition, provided the method has the prior approval of the Superintendent of the Alabama Department of Environmental Management.)

J. ACCIDENTAL DISCHARGES

Each user shall provide protection from accidental discharge of substances prohibited by these Rules. Facilities to prevent accidental discharge of prohibited substances shall be provided and maintained at the user's cost and expense. Detailed plans showing facilities and operating procedure to provide this protection shall be submitted to the Board for review, and must be approved by the Board before construction of the facility. No person who commences contribution to the POTW after the effective date of these Rules shall be permitted to introduce pollutants into the system until accidental discharge procedures have been approved by the Board and the Alabama Department of Environmental Management. Review and approval of such plans and operating procedures shall not relieve the user from the responsibility to modify its facility as necessary to meet the requirements of these Rules.

In the case of an accidental discharge, it is the responsibility of the user to immediately telephone and notify the POTW and the Alabama Department of Environmental Management of the incident. The notification shall include location of discharge, type of waste, concentration and volume, and corrective actions.

Within five (5) days of an accidental discharge, the user shall submit to the Alabama Department of Environmental Management a detailed written report describing the cause of the discharge and the measures to be taken by the user to prevent similar future occurrences. Such notification shall not relieve the user from responsibility for any expense, loss, damage or other liability which may be incurred as a result of damage to the POTW, including fish kills, or any other damage to person or property; nor shall such notification relieve the user of any fines, civil penalties, or other liability which may be imposed by these Rules and Regulations.

A notice shall be permanently posted on the user's bulletin board or other prominent place advising employees whom to call in the event of a dangerous discharge. Employers shall insure that all employees who may cause such a dangerous discharge to occur are advised of the emergency notification procedure.

K. CHARGES AND FEES

The purpose of this Section is to provide for the recovery of costs from users of the Board's wastewater disposal system for the implementation of the program established herein. The applicable charges or fees shall be set forth in the Board's Schedule of Charges and Fees and shall apply to each user contributing to the POTW who is or should have a discharge permit.

The Board may adopt charges and fees including, but not limited to:

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- (1) Fees for reimbursement of costs of setting up and operating the Board's Pretreatment Program;
- (2) Fees for monitoring, inspections and surveillance procedures;
- (3) Fees for reviewing accidental discharge procedures and construction;
- (4) Fees for permit applications;
- (5) Fees for filing appeals;
- (6) Fees for consistent removal by the Board of pollutants otherwise subject to Federal Pretreatment Standards; and
- (7) Other fees as the Board may deem necessary to carry out the requirements contained herein.

These fees relate solely to the matters covered by these Rules and Regulations and are in addition to all other fees chargeable by the Board, e.g. the Board's present Industrial User Charges.

L. WASTEWATER DISCHARGERS

No person may discharge to the POTW any wastewater except as authorized by the Board in accordance with these Rules and Regulations.

M. WASTEWATER CONTRIBUTION PERMITS

- (1) General Permits: All Category 2 and Category 3 users proposing to connect to or to contribute to the POTW shall obtain a Wastewater Discharge Permit before connecting to or contributing to the POTW.
- (2) Permit Application: Users required to obtain a Wastewater Discharge Permit shall complete and file with the Board an application on a form prescribed by the Board, accompanied by the current fee, at least 90 days prior to connecting to or contributing to the POTW. If the application is approved by the Board, it shall be transmitted to the Alabama Department of Environmental Management. In support of the application, the proposed user shall submit, in units and terms appropriate for evaluation, the following information:
 - (a) Name, address and location (if different from address);
 - (b) SIC number according to the Standard Industrial Classification Manual, Bureau of the Budget, 1972, as amended;

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- (c) Wastewater constituents and characteristics as determined by a reliable analytical laboratory sampling and analysis shall be performed in accordance with procedures established by the EPA pursuant to Section 304(g) of the Clean Water Act, as amended, 33 U.S. C. Section 1314 (g) , and contained in 40 CFR, Part 136, as amended;
- (d) Time and duration of contribution;
- (e) Average daily and 3 minute peak wastewater flow rates, including daily, monthly and seasonal variations if any;
- (f) Site plans, floor plans, mechanical and plumbing plans and details to show all sewers, sewer connections, and appurtenances by the size, location and elevation;
- (g) Description of activities, facilities and plant processes on the premises including all substances which are or could be discharged;
- (h) Where known, the nature and concentration of any pollutants in the discharge which are limited by any state pretreatment standards or the National Pretreatment Standards, and a statement regarding whether or not the pretreatment standards are being met on a consistent basis and, if not, whether additional operation and maintenance (O&M) and/or additional pretreatment is required for the user to meet applicable pretreatment standards;
- (i) If additional pretreatment and/or O&M will be required to meet the Pretreatment Standards, the shortest schedule by which the user will provide such additional pretreatment. The completion date in this schedule shall not be later than the compliance date established for the applicable Pretreatment Standard. The schedule shall contain increments of progress in the form of dates for the commencement and completion of major events leading to the construction and operation of additional pretreatment facilities required for the user to meet the applicable Pretreatment Standards (e.g., hiring an engineer, completing preliminary plans, completing final plans, executing contract for major components, commencing construction, completing construction, etc.). No increment of progress contained in the schedule shall exceed 9 months. Not later than 14 days following each date in the schedule, including the final date for compliance, the user shall submit a progress report to the Superintendent and Alabama Department of Environmental Management including, as a minimum, whether or not it complied with the increment of progress, the reason for delay, and the steps being taken to return the construction to the schedule established. In no event shall more than 9 months elapse between such progress reports to the Superintendent.
- (j) Each product produced, by type, amount, process or processes and rate of production;
- (k) Type and amount of raw materials processed (average and maximum per day);

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- (l) Number and type of employees, hours of operation of plant, and proposed or actual hours of operation of pretreatment system;
- (m) Any other information as may be deemed by the Board or the Alabama Department of Environmental Management to be necessary to evaluate the permit application.

(3) Consideration of Permit Application

The Board and the Alabama Department of Environmental Management will evaluate the data furnished by the user and may require additional information. After evaluation and acceptance of the data furnished, the Board, or the Alabama Department of Environmental Management with the concurrence of the Board, may issue a Wastewater Discharge Permit subject to terms and conditions provided herein and in the Memorandum of Agreement between the Alabama Department of Environmental Management and the Board.

N. PERMIT MODIFICATIONS

Within 9 months of the promulgation of a National Categorical Pretreatment Standard, all Wastewater Discharge Permits previously issued shall be revised to require compliance with such standard within the time frames prescribed by such standard. Where a user subject to a National Categorical Pretreatment Standard has not previously submitted an application for a Wastewater Discharge Permit as required by this Section, the user shall apply for a Wastewater Discharge Permit within 180 days after the promulgation of the applicable National Categorical Pretreatment Standard. In addition, a user with an existing Wastewater Discharge Permit shall submit to the Superintendent within 180 days after the promulgation of an applicable National Categorical Pretreatment Standard the information required by paragraphs M(2)(h) and M(2)(I) of this Section.

O. PERMIT CONDITIONS

- (1) Wastewater Discharge Permits shall be expressly subject to all provisions of these Rules and all other applicable regulations, charges and fees established by the Board. Permits may contain the following:
 - (a) The unit charge or schedule of charges and fees for the wastewater to be discharged to a community sewer;
 - (b) Limits on the average and maximum wastewater constituents and characteristics;
 - (c) Limits on average and maximum rate and time of discharge or requirements for flow regulations and equalization;
 - (d) Requirements for installation and maintenance of inspection and sampling facilities;

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- (e) Specifications for monitoring programs which may include sampling actions, frequency of sampling, number, types and standards for tests and reporting schedule;
- (f) Compliance schedules;
- (g) Requirements for submission of technical reports or discharge reports (see paragraph R of this Section);
- (h) Requirements for maintaining and retaining plant records relating to wastewater discharge as specified by the Board, and for affording the Board access thereto;
- (i) Requirements for notifying the Board of any new introduction of wastewater constituents or any substantial change in the volume or character of the wastewater constituents being introduced into the wastewater treatment system;
- (j) Requirements for notifying the Board of sludge discharges; and
- (k) Other conditions as deemed appropriate by the Board to ensure compliance with these Rules and Regulations.

P. PERMIT DURATION

Permits shall be issued for a specified time period, not to exceed five (5) years. A permit may be issued for a period less than a year or may be stated to expire on a specific date. The user shall apply for permit re-issuance a minimum of 180 days prior to the expiration of the user's existing permit. The terms and conditions of the permit may be subject to modification by the Board and the Alabama Department of Environmental Management during the term of the permit. The user shall be informed of any proposed changes in his permit at least 30 days prior to the effective date of change. Any changes or new conditions in the permit shall include a reasonable time schedule for compliance.

Q. PERMIT TRANSFER

Wastewater Discharge Permits are issued to a specific user for a specific operation. A Wastewater Discharge Permit shall not be assigned, transferred or sold to a new person, a successor to the permittee, different premises, or a new or changed operation without the approval of the Board and the Alabama Department of Environmental Management.

R. REPORTING REQUIREMENTS FOR PERMITTEE

- (1) Compliance Date of Report: Within 90 days of the date for final compliance with applicable Pretreatment Standards or, in the case of a New Source, within 90 days of commencement of the introduction of wastewater into the POTW, any person subject to Pretreatment Standards shall submit to the Superintendent and the Alabama Department of Environmental Management a report indicating the nature and concentration of all

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pollutants in the discharge from the regulated process which are limited by Pretreatment Standards and the average and maximum daily flow for these process units which are limited by such Pretreatment Standards. The report shall state whether the applicable Pretreatment Standards are being met on a consistent basis and, if not, what additional O&M and/or pretreatment is necessary to bring the user into compliance with the applicable Pretreatment Standards. This statement shall be signed by the user or his authorized representative and certified to by a qualified professional.

(2) Periodic Compliance Reports

- (a) Any person subject to a Pretreatment Standard, after the compliance date of such Pretreatment Standard, or, in the case of a New Source, after commencement of the discharge into the POTW, shall submit to the Superintendent and the Alabama Department of Environmental Management a monthly report indicating the nature and concentration of pollutants in the effluent which are limited by such Pretreatment Standards. In addition, this report shall include a record of all daily flows which during the reporting period exceeded the average daily flow.
- (b) The Superintendent or the Alabama Department of Environmental Management may impose mass limitations on persons who are using dilution to meet applicable Pretreatment Standards, or in other cases where the impositions of mass limitations are appropriate. In such cases, the report required by subparagraph (2) (a) of paragraph R of this Section shall indicate the mass of pollutants regulated by Pretreatment Standards in the effluent of the user. These reports shall contain the results of sampling and analysis of the discharge, including the flow and the nature and concentration, or production and mass, where requested by the Superintendent, of pollutants contained therein which are limited by the applicable Pretreatment Standards. The frequency of monitoring shall be prescribed in the applicable Pretreatment Standard. All analysis shall be performed in accordance with procedures established by the Administrator of the EPA pursuant to Section 304(g) of the Clean Air Act, as amended, 33 U.S.C. Section 1314(g), and contained in 40 CFR, Part 136 and amendments thereto or with any other test procedures approved by the Administrator. Sampling shall be performed in accordance with the techniques approved by the Administrator.

(Comment: Where 40 CFR, Part 136 does not include a sampling or analytical technique for the pollutant in question, sampling and analysis shall be performed in accordance with the procedures set forth in the EPA publication, Sampling and Analysis Procedures for Screening of Industrial Effluents for Priority Pollutants, and analytical procedures approved by the Administrator.)

S. MONITORING FACILITIES

The Board shall require the user to provide and operate at the user's expense, monitoring facilities to allow inspection, sampling and flow measurement of the building sewer and/or internal drainage systems. The monitoring facility should normally be situated on the user's premises, but the Board may, when such a location would be impractical or would cause undue hardship on the user, allow the facility to be constructed in the public street or sidewalk area and located so that it will not be obstructed by landscaping or parked vehicles.

There shall be ample room in or near such sampling manhole or facility to allow accurate sampling and preparation of samples for analysis. The facility, sampling, and measuring equipment shall be maintained at all times in a safe and proper operating condition at the expense of the user.

Whether constructed on public or private property, the sampling and monitoring facilities shall be provided in accordance with the Board's requirements and all applicable local construction standards and specifications. Construction shall be completed within 90 days following written notification by the Board.

T. INSPECTION AND SAMPLING

The Board or the Alabama Department of Environmental Management shall inspect the facility of any user to ascertain whether the purpose of these Rules is being met and whether all requirements are being complied with. Owners or occupants of premises where wastewater is created or discharged shall allow the Board's employees ready access at all reasonable times to all parts of the premises for the purposes of inspection, sampling, records examination or the performance of any of their duties. The Board, Alabama Department of Environmental Management, and EPA shall have the right to set up on the user's property compliance monitoring and/or metering operations. Where a user has security measures in force which would require proper identification and clearance before entry onto the premises, the user shall make necessary arrangements with its security guards so that upon presentation of suitable identification, personnel from the Board, the Alabama Department of Environmental Management and EPA will be permitted to enter, without delay, for the purposes of performing their specific responsibilities.

U. PRETREATMENT

Users shall provide necessary wastewater treatment as required to comply with these Rules and Regulations and the requirements of ADEM and shall achieve compliance with all National Categorical Pretreatment Standards within the time limitations specified therein. Any facilities required to pre-treat wastewater to a level acceptable to the Board shall be provided, operated, and maintained at the user's expense. Detailed plans showing the pretreatment facilities and operating procedures shall be submitted to the Board and to ADEM for review,

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and shall be acceptable to them before construction of the facility. The review of such plans and operating procedures will in no way relieve the user from the responsibility of modifying the facility as necessary to produce an effluent acceptable to the Board and to ADEM under the provisions of these Rules. Any subsequent changes in the pretreatment facilities or method of operation shall be reported to and be acceptable to the Board and to ADEM prior to the user's initiation of the changes.

The Board shall annually publish in a newspaper of general circulation a list of the user(s) who were not in compliance with any pretreatment standards at least once during the 12 previous months. The notification shall also summarize any enforcement actions taken against the user(s) during the same 12 months.

All records relating to compliance with Pretreatment Standards shall be made available to officials of the EPA and ADEM upon request.

V. CONFIDENTIAL INFORMATION

Information and data on a user obtained from reports, questionnaires, permit applications, permits and monitoring programs and from inspections shall be available to the public or other governmental agency without restriction unless the user specifically requests confidential treatment and is able to demonstrate to the satisfaction of the Board that the release of such information would divulge information, processes or methods of production entitled to protection as trade secrets of the user.

When requested by the person furnishing a report, and approved by the Board, the portions of a report which might disclose trade secrets or secret processes shall not be made available for inspection by the public but shall be available (1) to governmental agencies for uses related to these Rules, the National Pollutant Discharge Elimination System (NPDES) Permit, ADEM Permit and/or the Pretreatment Programs, (2) for use by the State or any state agency or the EPA in judicial review or enforcement proceedings involving the person furnishing the report, and (3) and in response to subpoena or court order of production directed to the Board. Wastewater constituents and characteristics will not be recognized as confidential information.

Information accepted by the Board as confidential shall not be transmitted to any governmental agency or to the general public by the Board until and unless a ten-day notification is given to the user, except where subpoena or court order requires production within a shorter time period.

W. ENFORCEMENT

- (1) **Harmful Contributions:** The Board or ADEM may suspend the wastewater treatment service and/or a Wastewater Discharge Permit when such suspension is necessary, in the opinion of either, in order to stop an actual or threatened discharge which presents or may present an imminent or substantial endangerment to the health or welfare of persons

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or to the environment, causes interference to the POTW or causes the Board to violate any condition of its NPDES Permit.

Any person notified of a suspension of the wastewater treatment service and/or the Wastewater Discharge Permit shall immediately stop or eliminate the contribution. In the event of a failure of the person to comply voluntarily with the suspension order, the Board shall take such steps as deemed necessary, including immediate severance of the sewer connection, to prevent or minimize damage to the POTW system or endangerment to any individuals. The Board or ADEM shall reinstate the Wastewater Discharge Permit and/or the wastewater treatment service upon proof of the elimination of the non-complying discharge. A detailed written statement submitted by the user describing the causes of the harmful contribution and the measures taken to prevent any future occurrence shall be submitted to the Board within 15 days of the date of the occurrence.

- (2) Revocation of Permit: Any user, who commits one or more of the following violations of these Rules, or applicable state and federal regulations, is subject to having its permit revoked:
 - (a) failure to factually report the wastewater constituents and characteristics of his discharge;
 - (b) failure to report significant changes in operations, or wastewater constituents and characteristics;
 - (c) refusal to allow the Board's employees reasonable access to the premises for the purpose of inspection or monitoring; or,
 - (d) notification of violation.
- (3) Notification of Violation: Whenever the Board or ADEM finds that any person has violated or is violating these Rules, a Wastewater Discharge Permit, or any prohibition, limitation or requirement contained herein, the Board or ADEM may serve upon such person a written notice stating the nature of the violation. Within 30 days of the date of the notice, such person shall submit a plan for the satisfactory correction thereof to the Board or ADEM.
- (4) Show Cause Hearing: The Board or ADEM may order any person who causes or allows an unauthorized discharge to enter the POTW to show cause why the proposed enforcement action should not be taken. A notice shall be served on such person specifying the time and place of a hearing regarding the violation, the reasons the action is to be taken, and the proposed enforcement action, and directing the person to show cause why the proposed enforcement action should not be taken. The notice of the hearing shall be served personally or by registered or certified mail (return receipt requested) at least 10 days before the hearing. Service may be made on any agent or officer of a corporation.

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The Board or ADEM may conduct the hearing and take the evidence, or may designate any of its members or any officer or employee of the Board or ADEM to:

- (a) issue in the name of the Board or ADEM notices of hearings requesting the attendance and testimony of witnesses and the production of evidence relevant to any matter involved in such hearings;
- (b) take the evidence; and
- (c) transmit a report of the evidence and hearing, including transcripts and other evidence, together with recommendations to the Board and ADEM for action thereon.

At any hearing held pursuant to these Rules, testimony taken must be under oath and recorded by stenographic. The transcript, so recorded, will be made available to any member of the public or any party to the hearing upon payment of the usual charges thereof.

After the Board or ADEM has reviewed the evidence, it may issue an order to the person responsible for the discharge directing that, following a specified time period, the water or sewer service or both be discontinued unless adequate treatment facilities, devices or other related appurtenances shall have been installed on existing treatment facilities and the devices or other related appurtenances are being properly operated. Further orders and directives as are necessary and appropriate may be issued.

- (5) Legal Action: If any person discharges sewage, industrial wastes or other wastes into the Board's wastewater disposal system contrary to the provisions of these Rules, the Board may commence an action for appropriate relief in the Circuit Court for Montgomery County, Alabama, or any other court with jurisdiction over the subject matter.

X. SCHEDULE OF FEES, CHARGES AND PENALTIES RELATING TO RULES AND REGULATIONS ON PRETREATMENT OF INDUSTRIAL WASTE (AMENDED 2/15/94)

ITEM	FEE TYPE	FEE DESCRIPTION
(1)	INDUSTRIAL WASTE SURCHARGE	All Category 3 users are subject to the industrial waste surcharge as described in Section IV of these Rules and Regulations
(2)	PERMIT CHARGE	A processing fee established by the Board will be required of all Category 2 and 3 users for their original permit.
(3)	PENALTIES	<p>In case of failure to submit a required report, improper operation of waste facilities, or any breach of the permit the following procedures will apply:</p> <ul style="list-style-type: none"> a. The Board shall give written notice to the user, requiring action within thirty (30) days. b. Penalty for failure to comply with permit provisions after written notice is \$100.00 per day for Category 2 users and \$300.00 per day for Category 3 users. c. Termination of service. Charge for terminating and reinstating service shall be cost plus 20%.
(4)	APPEAL	\$100.00

TABLE III-1: SCHEDULE OF FEES

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.																					
		<table border="1"> <thead> <tr> <th>Outfall Number</th> <th>Impervious Surface Area (within a mile radius of the facility)</th> <th>Total Surface Area Drained (within a mile radius of the facility)</th> </tr> </thead> <tbody> <tr> <td>002S</td> <td>5.1 <i>specify units</i> acres</td> <td>16.1 <i>specify units</i> acres</td> </tr> <tr> <td>003S</td> <td>2.5 <i>specify units</i> acres</td> <td>16.2 <i>specify units</i> acres</td> </tr> <tr> <td></td> <td><i>specify units</i></td> <td><i>specify units</i></td> </tr> <tr> <td></td> <td><i>specify units</i></td> <td><i>specify units</i></td> </tr> <tr> <td></td> <td><i>specify units</i></td> <td><i>specify units</i></td> </tr> <tr> <td></td> <td><i>specify units</i></td> <td><i>specify units</i></td> </tr> </tbody> </table>	Outfall Number	Impervious Surface Area (within a mile radius of the facility)	Total Surface Area Drained (within a mile radius of the facility)	002S	5.1 <i>specify units</i> acres	16.1 <i>specify units</i> acres	003S	2.5 <i>specify units</i> acres	16.2 <i>specify units</i> acres		<i>specify units</i>	<i>specify units</i>		<i>specify units</i>	<i>specify units</i>		<i>specify units</i>	<i>specify units</i>		<i>specify units</i>	<i>specify units</i>
	Outfall Number	Impervious Surface Area (within a mile radius of the facility)	Total Surface Area Drained (within a mile radius of the facility)																				
	002S	5.1 <i>specify units</i> acres	16.1 <i>specify units</i> acres																				
	003S	2.5 <i>specify units</i> acres	16.2 <i>specify units</i> acres																				
		<i>specify units</i>	<i>specify units</i>																				
		<i>specify units</i>	<i>specify units</i>																				
		<i>specify units</i>	<i>specify units</i>																				
		<i>specify units</i>	<i>specify units</i>																				
	4.2	<p>Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.)</p> <p>No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls. Areas kept grassed as much as possible.</p>																					
4.3	<p>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.)</p> <table border="1"> <thead> <tr> <th colspan="3">Stormwater Treatment</th> </tr> <tr> <th>Outfall Number</th> <th>Control Measures and Treatment</th> <th>Codes from Exhibit 2F-1 (list)</th> </tr> </thead> <tbody> <tr> <td>002S</td> <td>No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls.</td> <td>N/A</td> </tr> <tr> <td>003S</td> <td>No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls.</td> <td>N/A</td> </tr> </tbody> </table>	Stormwater Treatment			Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)	002S	No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls.	N/A	003S	No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls.	N/A										
Stormwater Treatment																							
Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)																					
002S	No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls.	N/A																					
003S	No significant materials exposed to rainfall. All materials stored under roof and/or in containment walls.	N/A																					

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

Non-Stormwater Discharges	5.1	<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)	Official title		
		N/A			
		Signature	Date signed		
		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
			N/A		

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. NA
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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 <i>estimated data</i> .	<input checked="" type="checkbox"/> No → See instructions regarding submission of <i>actual data</i> .
	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

EPA Identification Number 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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	

Discharge Information Continued	Used or Manufactured Toxics		
	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?	Date Submitted
				<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 type="checkbox"/> Yes <input checked="" 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		
		Laboratory address		
		Phone number		
		Pollutant(s) analyzed		

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AL0027863

Facility Name
Catoma Creek WWTP

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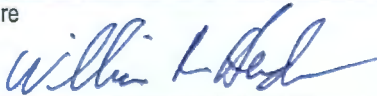
SECTION 10. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

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 checked="" 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 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 **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 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.

Name (print or type first and last name)	Official title
William R. Henderson	General Manager
Signature 	Date signed 10-25-19

EPA Identification Number 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Outfall Number 002S
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TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))¹

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	<5 mg/L				1	
2. Biochemical oxygen demand (BOD ₅)	CBOD 9 mg/L				1	
3. Chemical oxygen demand (COD)	NA					
4. Total suspended solids (TSS)	102 mg/L				1	
5. Total phosphorus	<0.5 mg/L				1	
6. Total Kjeldahl nitrogen (TKN)	1.76 mg/L				1	
7. Total nitrogen (as N)	2.86 mg/L				1	
8. pH (minimum)	6.58				1	
pH (maximum)	6.58				1	

¹ 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 110064421460	NPDES Permit Number AL0027863	Facility name Catoma Creek WWTP	Outfall Number 002S
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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)
06/06/2019	3	0.52	>72	8.84 cfs	0.129 MGD

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

computed from calculation of surface area and flow

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EPA Identification Number 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Outfall Number 003S
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TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))¹

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	5 mg/L				1	
2. Biochemical oxygen demand (BOD ₅)	CBOD 10 mg/L				1	
3. Chemical oxygen demand (COD)	NA					
4. Total suspended solids (TSS)	132 mg/L				1	
5. Total phosphorus	<0.5 mg/L				1	
6. Total Kjeldahl nitrogen (TKN)	2.51 mg/L				1	
7. Total nitrogen (as N)	3.61 mg/L				1	
8. pH (minimum)	6.6				1	
	pH (maximum)	6.6			1	

¹ 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 110064421460	NPDES Permit Number AL0027863	Facility name Catoma Creek WWTP	Outfall Number 003S
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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)
06/06/2019	3	0.52	>72	11.05 cfs	0.187 MGD

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

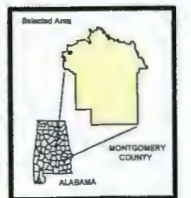
computed from calculation of surface area and flow



The Mission of the Montgomery Water and Sewer Board
"To provide the highest quality water
and sanitary sewer services in harmony
with the environment"

Catoma WPCP

- Property Line
- Sewer Plants




The following statement is applicable to all hardcopy map and digital data of all products produced by the Montgomery Water Works and Sanitary Sewer Board Geographic Information System.

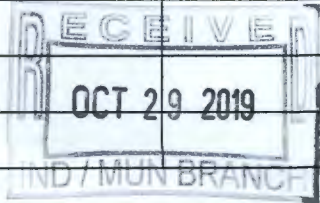
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EPA Identification Number 110064421460	NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004	
Form 2S NPDES		U.S Environmental Protection Agency Application for NPDES Permit for Sewage Sludge Management NEW AND EXISTING TREATMENT WORKS TREATING DOMESTIC SEWAGE		
PRELIMINARY INFORMATION				
Does your facility currently have an effective NPDES permit or have you been directed by your NPDES permitting authority to submit a full Form 2S permit application?				
<input checked="" type="checkbox"/> Yes → Complete Part 2 of application package (begins p. 7). <input type="checkbox"/> No → Complete Part 1 of application package (below).				
PART 1		LIMITED BACKGROUND INFORMATION (40 CFR 122.21(c)(2)(ii))		
Complete this part only if you are a "sludge-only" facility (i.e., a facility that does not currently have, and is not applying for, an NPDES permit for a direct discharge to a surface body of water).				
PART 1, SECTION 1. FACILITY INFORMATION (40 CFR 122.21(c)(2)(ii)(A))				
Facility Information	1.1	Facility name N/A		
		Mailing address (street or P.O. box)		
		City or town	State	ZIP code
		Contact name (first and last)	Title	Phone number Email address
		Location address (street, route number, or other specific identifier)		<input type="checkbox"/> Same as mailing address
		City or town	State	ZIP code
		1.2	Ownership Status	
		<input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input type="checkbox"/> Other public (specify) _____		
		<input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____		
PART 1, SECTION 2. APPLICANT INFORMATION (40 CFR 122.21(c)(2)(ii)(B))				
Applicant Information	2.1	Is applicant different from entity listed under Item 1.1 above? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 2.3 (Part 1, Section 2).		
	2.2	Applicant name		
		Applicant address (street or P.O. box)		
		City or town	State	ZIP code
		Contact name (first and last)	Title	Phone number Email address
		2.3	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Both	
	2.4	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)		
PART 1, SECTION 3. SEWAGE SLUDGE AMOUNT (40 CFR 122.21(c)(2)(ii)(D))				
Sewage Sludge Amount	3.1	Provide the total dry metric tons per the latest 365-day period of sewage sludge generated, treated, used, and disposed of:		
		Practice	Dry Metric Tons per 365-Day Period	
		Amount generated at the facility		
		Amount treated at the facility		
		Amount used (i.e., received from off site) at the facility		
		Amount disposed of at the facility		



PART 1, SECTION 7. USE AND DISPOSAL SITES (40 CFR 122.21(c)(2)(ii)(C))

Use and Disposal Sites	Provide the following information for each site on which sewage sludge from this facility is used or disposed of. <input type="checkbox"/> Check here if you have provided separate attachments with this information.				
	7.1	Site name or number			
		Mailing address (street or P.O. box)			
		City or town	State	ZIP code	
		Contact name (first and last)	Title	Phone number	Email address
		Location address (street, route number, or other specific identifier)			<input type="checkbox"/> Same as mailing address
		City or town	State	ZIP code	
		County	County code	<input type="checkbox"/> Not available	
	7.2	Site type (check all that apply)			
		<input type="checkbox"/> Agricultural	<input type="checkbox"/> Lawn or home garden	<input type="checkbox"/> Forest	
	<input type="checkbox"/> Surface disposal	<input type="checkbox"/> Public contact	<input type="checkbox"/> Incineration		
	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Municipal solid waste landfill	<input type="checkbox"/> Other (describe)		

PART 1, SECTION 8. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	8.1	In Column 1 below, mark the sections of Form 2S, Part 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 type="checkbox"/> Section 1: Facility Information	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 2: Applicant Information	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 3: Sewage Sludge Amount	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 4: Pollutant Concentrations	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 5: Treatment Provided at Your Facility	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 6: Sewage Sludge Sent to Other Facilities	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 7: Use and Disposal Sites	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 8: Checklist and Certification Statement	

EPA Identification Number 110064421460		NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Checklist and Certification Statement Continued	8.2	Certification Statement <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	Phone number
		Signature		Date signed

PART 1 APPLICANTS STOP HERE.

Submit completed application package to your NPDES permitting authority.

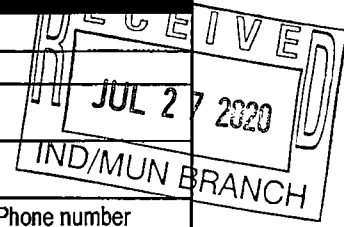
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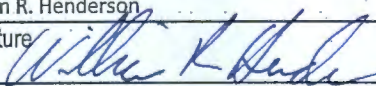
PART 2	PERMIT APPLICATION INFORMATION (40 CFR 122.21(q))
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Complete this part if you have an effective NPDES permit or have been directed by the NPDES permitting authority to submit a full permit application. In other words, complete this part if your facility has, or is applying for, an NPDES permit. Part 2 is divided into five sections. Section 1 pertains to all applicants. The applicability of Sections 2 to 5 depends on your facility's sewage sludge use or disposal practices. See the instructions to determine which sections you are required to complete.

PART 2, SECTION 1. GENERAL INFORMATION (40 CFR 122.21(q)(1-7) AND (q)(13))

General Information	All Part 2 applicants must complete this section.			
	Facility Information			
	1.1	Facility name Catoma Creek WWTP		
		Mailing address (street or P.O. box) P.O. Box 1631		
		City or town Montgomery	State AL	ZIP code 36102
		Phone number (334) 206-1722		
		Contact name (first and last) Tim Logiotatos	Title WPC Superintendent	Email address tlogio@mwwssb.com
		Location address (street, route number, or other specific identifier) 6000 Richard E. Hanan Drive		<input checked="" type="checkbox"/> Same as mailing address
		City or town Montgomery	State AL	ZIP code 36108
	1.2	Is this facility a Class I sludge management facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	1.3	Facility Design Flow Rate	35 million gallons per day (mgd)	
	1.4	Total Population Served	104,200	
	1.5	Ownership Status		
		<input type="checkbox"/> Public—federal	<input type="checkbox"/> Public—state	<input type="checkbox"/> Other public (specify) _____
		<input type="checkbox"/> Private	<input checked="" type="checkbox"/> Other (specify) <u>municipality</u>	
	Applicant Information			
	1.6	Is applicant different from entity listed under Item 1.1 above? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 1.8 (Part 2, Section 1).		
	1.7	Applicant name The Water Works and Sanitary Sewer Board of the City of Montgomery		
		Applicant mailing address (street or P.O. box) PO Box 1631		
	City or town Montgomery	State AL	ZIP code 36102	
	Contact name (first and last) William R. Henderson	Title General Manager	Phone number (334) 206-1607	
	Email address bhenders@mwwssb.com			
1.8	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Both			
1.9	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)			



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General Information Continued	1.17 cont.	Responsibilities of contractor	Contractor 1	Contractor 2	Contractor 3
	Pollutant Concentrations				
	Using the table below or a separate attachment, provide sewage sludge monitoring data for the pollutants for which limits in sewage sludge have been established in 40 CFR 503 for this facility's expected use or disposal practices. All data must be based on three or more samples taken at least one month apart and must be no more than 4.5 years old.				
	<input type="checkbox"/> Check here if you have attached additional sheets to the application package.				
	1.18	Pollutant	Average Monthly Concentration (mg/kg dry weight)	Analytical Method	Detection Level
		Arsenic	<4	EPA 6010	4 mg/kg
		Cadmium	<4	EPA 6010	4 mg/kg
		Chromium	57	EPA 6010	4 mg/kg
		Copper	427	EPA 6010	4 mg/kg
		Lead	27	EPA 6010	4 mg/kg
	Mercury	1	EPA 7471B	0.3 mg/kg	
	Molybdenum	9	EPA 6010	4 mg/kg	
	Nickel	199	EPA 6010	4 mg/kg	
	Selenium	5	EPA 6010	4 mg/kg	
	Zinc	1278	EPA 6010	4 mg/kg	
Checklist and Certification Statement					
1.19	In Column 1 below, mark the sections of Form 2S, Part 2, that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing. Note that not all applicants are required to complete all sections or provide attachments. See Exhibit 2S-2 in the Instructions.				
	Column 1	Column 2			
	<input checked="" type="checkbox"/> Section 1 (General Information)	<input checked="" type="checkbox"/> w/ attachments			
	<input checked="" type="checkbox"/> Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)	<input type="checkbox"/> w/ attachments			
	<input checked="" type="checkbox"/> Section 3 (Land Application of Bulk Sewage Sludge)	<input checked="" type="checkbox"/> w/ attachments			
	<input type="checkbox"/> Section 4 (Surface Disposal)	<input type="checkbox"/> w/ attachments			
	<input type="checkbox"/> Section 5 (Incineration)	<input type="checkbox"/> w/ attachments			
1.20	Certification Statement				
	<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) William R. Henderson	Official title General Manager			
	Signature 	Date signed 10-25-19			
	Telephone number (334) 206-1607				
Upon the request of the NPDES permitting authority, you must submit any other information the authority deems necessary to assess sewage sludge use or disposal practices at your facility and identify appropriate permitting requirements.					

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PART 2, SECTION 2. GENERATION OF SEWAGE SLUDGE OR PREPARATION OF A MATERIAL DERIVED FROM SEWAGE SLUDGE (40 CFR 122.21(q)(8) THROUGH (12))

Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge

2.1	Does your facility generate sewage sludge or derive a material from sewage sludge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 2, Section 3.		
Amount Generated Onsite			
2.2	Total dry metric tons per 365-day period generated at your facility:		1970
Amount Received from Off Site Facility			
2.3	Does your facility receive sewage sludge from another facility for treatment use or disposal? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.7 (Part 2, Section 2) below.		
2.4	Indicate the total number of facilities from which you receive sewage sludge for treatment, use, or disposal:		
Provide the following information for each of the facilities from which you receive sewage sludge. <input type="checkbox"/> Check here if you have attached additional sheets to the application package.			
2.5	Name of facility		
	Mailing address (street or P.O. box)		
	City or town	State	ZIP code
	Contact name (first and last)	Title	Phone number Email address
	Location address (street, route number, or other specific identifier)		<input type="checkbox"/> Same as mailing address
	City or town	State	ZIP code
	County	County code	<input type="checkbox"/> Not available
2.6	Indicate the amount of sewage sludge received, the applicable pathogen class and reduction alternative, and the applicable vector reduction option provided at the offsite facility.		
	Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
		<input type="checkbox"/> Not applicable <input type="checkbox"/> Class A, Alternative 1 <input type="checkbox"/> Class A, Alternative 2 <input type="checkbox"/> Class A, Alternative 3 <input type="checkbox"/> Class A, Alternative 4 <input type="checkbox"/> Class A, Alternative 5 <input type="checkbox"/> Class A, Alternative 6 <input type="checkbox"/> Class B, Alternative 1 <input type="checkbox"/> Class B, Alternative 2 <input type="checkbox"/> Class B, Alternative 3 <input type="checkbox"/> Class B, Alternative 4 <input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Not applicable <input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2 <input type="checkbox"/> Option 3 <input type="checkbox"/> Option 4 <input type="checkbox"/> Option 5 <input type="checkbox"/> Option 6 <input type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <input type="checkbox"/> Option 11
2.7	Identify the treatment process(es) that are known to occur at the offsite facility, including blending activities and treatment to reduce pathogens or vector attraction properties. (Check all that apply.)		
	<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering) <input type="checkbox"/> Stabilization <input type="checkbox"/> Composting <input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization) <input type="checkbox"/> Heat drying <input type="checkbox"/> Methane or biogas capture and recovery	<input type="checkbox"/> Thickening (concentration) <input type="checkbox"/> Anaerobic digestion <input type="checkbox"/> Conditioning <input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction <input type="checkbox"/> Other (specify) _____	

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued

Treatment Provided at Your Facility

2.8 For each sewage sludge use or disposal practice, indicate the applicable pathogen class and reduction alternative and the applicable vector attraction reduction option provided at your facility. Attach additional pages, as necessary.

Use or Disposal Practice (check one)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
<input type="checkbox"/> Land application of bulk sewage	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable
<input checked="" type="checkbox"/> Land application of biosolids (bulk)	<input type="checkbox"/> Class A, Alternative 1	<input checked="" type="checkbox"/> Option 1
<input type="checkbox"/> Land application of biosolids (bags)	<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2
<input type="checkbox"/> Surface disposal in a landfill	<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3
<input type="checkbox"/> Other surface disposal	<input type="checkbox"/> Class A, Alternative 4	<input type="checkbox"/> Option 4
<input type="checkbox"/> Incineration	<input type="checkbox"/> Class A, Alternative 5	<input type="checkbox"/> Option 5
	<input type="checkbox"/> Class A, Alternative 6	<input type="checkbox"/> Option 6
	<input checked="" type="checkbox"/> Class B, Alternative 1	<input type="checkbox"/> Option 7
	<input type="checkbox"/> Class B, Alternative 2	<input type="checkbox"/> Option 8
	<input type="checkbox"/> Class B, Alternative 3	<input type="checkbox"/> Option 9
	<input type="checkbox"/> Class B, Alternative 4	<input type="checkbox"/> Option 10
	<input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Option 11

2.9 Identify the treatment process(es) used at your facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge? (Check all that apply.)

- | | |
|---|---|
| <input checked="" type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering) | <input checked="" type="checkbox"/> Thickening (concentration) |
| <input type="checkbox"/> Stabilization | <input checked="" type="checkbox"/> Anaerobic digestion |
| <input type="checkbox"/> Composting | <input type="checkbox"/> Conditioning |
| <input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization) | <input checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) |
| <input type="checkbox"/> Heat drying | <input type="checkbox"/> Thermal reduction |
| <input checked="" type="checkbox"/> Methane or biogas capture and recovery | |

2.10 Describe any other sewage sludge treatment or blending activities not identified in Items 2.8 and 2.9 (Part 2, Section 2) above.

- Check here if you have attached the description to the application package.

Preparation of Sewage Sludge Meeting Ceiling and Pollutant Concentrations, Class A Pathogen Requirements, and One of Vector Attraction Reduction Options 1 to 8

2.11 Does the sewage sludge from your facility meet the ceiling concentrations in Table 1 of 40 CFR 503.13, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), and one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8) and is it land applied?

- Yes No → SKIP to Item 2.14 (Part 2, Section 2) below.

2.12 Total dry metric tons per 365-day period of sewage sludge subject to this subsection that is applied to the land:

2.13 Is sewage sludge subject to this subsection placed in bags or other containers for sale or give-away for application to the land?

- Yes No

Check here once you have completed Items 2.11 to 2.13, then → SKIP to Item 2.32 (Part 2, Section 2) below.

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Sale or Give-Away in a Bag or Other Container for Application to the Land

2.14 Do you place sewage sludge in a bag or other container for sale or give-away for land application?
 Yes No → SKIP to Item 2.17 (Part 2, Section 2) below.

2.15 Total dry metric tons per 365-day period of sewage sludge placed in a bag or other container at your facility for sale or give-away for application to the land:

2.16 Attach a copy of all labels or notices that accompany the sewage sludge being sold or given away in a bag or other container for application to the land.
 Check here to indicate that you have attached all labels or notices to this application package.

Check here once you have completed Items 2.14 to 2.16, then → SKIP to Part 2, Section 2, Item 2.32.

Shipment Off Site for Treatment or Blending

2.17 Does another facility provide treatment or blending of your facility's sewage sludge? (This question does not pertain to dewatered sludge sent directly to a land application or surface disposal site.)
 Yes No → SKIP to Item 2.32 (Part 2, Section 2) below.

2.18 Indicate the total number of facilities that provide treatment or blending of your facility's sewage sludge. Provide the information in Items 2.19 to 2.26 (Part 2, Section 2) below for each facility.
 Check here if you have attached additional sheets to the application package.

2.19 Name of receiving facility

Mailing address (street or P.O. box)

City or town

State

ZIP code

Contact name (first and last)

Title

Phone number

Email address

Location address (street, route number, or other specific identifier)

Same as mailing address

City or town

State

ZIP code

2.20 Total dry metric tons per 365-day period of sewage sludge provided to receiving facility:

2.21 Does the receiving facility provide additional treatment to reduce pathogens in sewage sludge from your facility or reduce the vector attraction properties of sewage sludge from your facility?
 Yes No → SKIP to Item 2.24 (Part 2, Section 2) below.

2.22 Indicate the pathogen class and reduction alternative and the vector attraction reduction option met for the sewage sludge at the receiving facility.

Pathogen Class and Reduction Alternative

Vector Attraction Reduction Option

- Not applicable
- Class A, Alternative 1
- Class A, Alternative 2
- Class A, Alternative 3
- Class A, Alternative 4
- Class A, Alternative 5
- Class A, Alternative 6
- Class B, Alternative 1
- Class B, Alternative 2
- Class B, Alternative 3
- Class B, Alternative 4
- Domestic septage, pH adjustment

- Not applicable
- Option 1
- Option 2
- Option 3
- Option 4
- Option 5
- Option 6
- Option 7
- Option 8
- Option 9
- Option 10
- Option 11

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.23	Which treatment process(es) are used at the receiving facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge from your facility? (Check all that apply.)	
	<input type="checkbox"/>	Preliminary operations (e.g., sludge grinding and dewatering)	<input type="checkbox"/> Thickening (concentration)
	<input type="checkbox"/>	Stabilization	<input type="checkbox"/> Anaerobic digestion
	<input type="checkbox"/>	Composting	<input type="checkbox"/> Conditioning
	<input type="checkbox"/>	Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	<input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
	<input type="checkbox"/>	Heat drying	<input type="checkbox"/> Thermal reduction
	<input type="checkbox"/>	Methane or biogas capture and recovery	<input type="checkbox"/> Other (specify) _____
	2.24	Attach a copy of any information you provide the receiving facility to comply with the "notice and necessary information" requirement of 40 CFR 503.12(g).	
	<input type="checkbox"/>	Check here to indicate that you have attached material.	
	2.25	Does the receiving facility place sewage sludge from your facility in a bag or other container for sale or give-away for application to the land?	
<input type="checkbox"/>	Yes	<input type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.	
2.26	Attach a copy of all labels or notices that accompany the product being sold or given away.		
<input type="checkbox"/>	Check here to indicate that you have attached material.		
<input type="checkbox"/>	Check here once you have completed Items 2.17 to 2.26 (Part 2, Section 2), then → SKIP to Item 2.32 (Part 2, Section 2) below.		
Land Application of Bulk Sewage Sludge			
2.27	Is sewage sludge from your facility applied to the land?		
<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.	
2.28	Total dry metric tons per 365-day period of sewage sludge applied to all land application sites:		
2.29	Did you identify all land application sites in Part 2, Section 3 of this application?		
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No → Submit a copy of the land application plan with your application.
2.30	Are any land application sites located in states other than the state where you generate sewage sludge or derive a material from sewage sludge?		
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No → SKIP to Item 2.32 (Part 2, Section 2) below.
2.31	Describe how you notify the NPDES permitting authority for the states where the land application sites are located. Attach a copy of the notification.		
<input type="checkbox"/>	Check here if you have attached the explanation to the application package.		
<input type="checkbox"/>	Check here if you have attached the notification to the application package.		
Surface Disposal			
2.32	Is sewage sludge from your facility placed on a surface disposal site?		
<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No → SKIP to Item 2.39 (Part 2, Section 2) below.
2.33	Total dry metric tons of sewage sludge from your facility placed on all surface disposal sites per 365-day period:		
2.34	Do you own or operate all surface disposal sites to which you send sewage sludge for disposal?		
<input type="checkbox"/>	Yes → SKIP to Item 2.39 (Part 2, Section 2) below.	<input type="checkbox"/>	No
2.35	Indicate the total number of surface disposal sites to which you send your sewage sludge. (Provide the information in Items 2.36 to 2.38 of Part 2, Section 2, for each facility.)		
<input type="checkbox"/>	Check here if you have attached additional sheets to the application package.		

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.36	Site name or number of surface disposal site you do not own or operate						
		Mailing address (street or P.O. box)						
		City or Town			State		ZIP Code	
		Contact Name (first and last)		Title		Phone Number		Email Address
	2.37	Site Contact (Check all that apply.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator						
	2.38	Total dry metric tons of sewage sludge from your facility placed on this surface disposal site per 365-day period:						
	Incineration							
	2.39	Is sewage sludge from your facility fired in a sewage sludge incinerator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.46 (Part 2, Section 2) below.						
	2.40	Total dry metric tons of sewage sludge from your facility fired in all sewage sludge incinerators per 365-day period:						
	2.41	Do you own or operate all sewage sludge incinerators in which sewage sludge from your facility is fired? <input type="checkbox"/> Yes → SKIP to Item 2.46 (Part 2, Section 2) below. <input type="checkbox"/> No						
	2.42	Indicate the total number of sewage sludge incinerators used that you do not own or operate. (Provide the information in Items 2.43 to 2.45 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.						
	2.43	Incinerator name or number						
		Mailing address (street or P.O. box)						
		City or town			State		ZIP code	
		Contact name (first and last)		Title		Phone number		Email address
		Location address (street, route number, or other specific identifier)					<input type="checkbox"/> Same as mailing address	
		City or town			State		ZIP code	
	2.44	Contact (check all that apply) <input type="checkbox"/> Incinerator owner <input type="checkbox"/> Incinerator operator						
2.45	Total dry metric tons of sewage sludge from your facility fired in this sewage sludge incinerator per 365-day period:							
Disposal in a Municipal Solid Waste Landfill								
2.46	Is sewage sludge from your facility placed on a municipal solid waste landfill? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 3.							
2.47	Indicate the total number of municipal solid waste landfills used. (Provide the information in Items 2.48 to 2.52 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.							

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.48	Name of landfill			
		Mailing address (street or P.O. box)			
		City or town	State	ZIP code	
		Contact name (first and last)	Title	Phone number	Email address
		Location address (street, route number, or other specific identifier)			<input type="checkbox"/> Same as mailing address
		County	County code		<input type="checkbox"/> Not available
		City or town	State	ZIP code	
	2.49	Total dry metric tons of sewage sludge from your facility placed in this municipal solid waste landfill per 365-day period:			
	2.50	List the numbers of all other federal, state, and local permits that regulate the operation of this municipal solid waste landfill.			
		Permit Number	Type of Permit		
2.51	Attach to the application information to determine whether the sewage sludge meets applicable requirements for disposal of sewage sludge in a municipal solid waste landfill (e.g., results of paint filter liquids test and TCLP test). <input type="checkbox"/> Check here to indicate you have attached the requested information.				
2.52	Does the municipal solid waste landfill comply with applicable criteria set forth in 40 CFR 258? <input type="checkbox"/> Yes <input type="checkbox"/> No				

PART 2, SECTION 3 LAND APPLICATION OF BULK SEWAGE SLUDGE (40 CFR 122.21(q)(9))

Land Application of Bulk Sewage Sludge	3.1	Does your facility apply sewage sludge to land? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 2, Section 4.		
	3.2	Do any of the following conditions apply? <ul style="list-style-type: none"> • The sewage sludge meets the ceiling concentrations in Table 1 of 40 CFR 503.12, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), and one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)-(8); • The sewage sludge is sold or given away in a bag or other container for application to the land; or • You provide the sewage sludge to another facility for treatment or blending. <input type="checkbox"/> Yes → SKIP to Part 2, Section 4. <input checked="" type="checkbox"/> No		
	3.3	Complete Section 3 for every site on which the sewage sludge is applied. <input type="checkbox"/> Check here if you have attached sheets to the application package for one or more land application sites.		
	Identification of Land Application Site			
	3.4	Site name or number Montgomery Water Works and Sanitary Sewer Board Agrarian Center		
		Location address (street, route number, or other specific identifier) 1455 Hunter Loop Road		<input type="checkbox"/> Same as mailing address
		County Montgomery	County code <input checked="" type="checkbox"/> Not available	
		City or town Montgomery	State AL	ZIP code 36108
		Latitude/Longitude of Land Application Site (see instructions)		
		Latitude		Longitude
		32° 22' 23" N		86° 24' 10" W
		Method of Determination		
		<input checked="" type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____		
	3.5	Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location. <input checked="" type="checkbox"/> Check here to indicate you have attached a topographic map for this site.		
	Owner Information			
3.6	Are you the owner of this land application site? <input checked="" type="checkbox"/> Yes → SKIP to Item 3.8 (Part 2, Section 3) below. <input type="checkbox"/> No			
3.7	Owner name			
	Mailing address (street or P.O. box)			
	City or town	State	ZIP code	
	Contact name (first and last)	Title	Phone number Email address	
Applier Information				
3.8	Are you the person who applies, or who is responsible for application of, sewage sludge to this land application site? <input checked="" type="checkbox"/> Yes → SKIP to Item 3.10 (Part 2, Section 3) below. <input type="checkbox"/> No			
3.9	Applier's name			
	Mailing address (street or P.O. box)			
	City or town	State	ZIP code	
	Contact name (first and last)	Title	Phone number Email address	

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Land Application of Bulk Sewage Sludge Continued	Site Type						
	3.10	Type of land application:					
		<input checked="" type="checkbox"/>	Agricultural land	<input type="checkbox"/>	Forest		
		<input type="checkbox"/>	Reclamation site	<input type="checkbox"/>	Public contact site		
		<input type="checkbox"/>	Other (describe)				
	Crop or Other Vegetation Grown on Site						
	3.11	What type of crop or other vegetation is grown on this site? Bermuda/Johnson/Ryegrass					
	3.12	What is the nitrogen requirement for this crop or vegetation? 567 lbs/acre					
	Vector Attraction Reduction						
	3.13	Are the vector attraction reduction requirements at 40 CFR 503.33(b)(9) and (b)(10) met when sewage sludge is applied to the land application site?					
		<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No → SKIP to Item 3.16 (Part 2, Section 3) below.		
	3.14	Indicate which vector attraction reduction option is met. (Check only one response.)					
		<input type="checkbox"/>	Option 9 (injection below land surface)	<input checked="" type="checkbox"/>	Option 10 (incorporation into soil within 6 hours)		
	3.15	Describe any treatment processes used at the land application site to reduce vector attraction properties of sewage sludge.					
		<input type="checkbox"/>	Check here if you have attached your description to the application package.				
Cumulative Loadings and Remaining Allotments							
3.16	Is the sewage sludge applied to this site since July 20, 1993, subject to the cumulative pollutant loading rates (CPLRs) in 40 CFR 503.13(b)(2)?						
	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No → SKIP to Part 2, Section 4.			
3.17	Have you contacted the NPDES permitting authority in the state where the bulk sewage sludge subject to CPLRs will be applied to ascertain whether bulk sewage sludge subject to CPLRs has been applied to this site on or since July 20, 1993?						
	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No → Sewage sludge subject to CPLRs may not be applied to this site. SKIP to Part 2, Section 4.			
3.18	Provide the following information about your NPDES permitting authority:						
	NPDES permitting authority name	State of Alabama					
	Contact person	Shanda Torbert					
	Telephone number	(334) 271-7800					
	Email address	storbert@adem.alabama.gov					
3.19	Based on your inquiry, has bulk sewage sludge subject to CPLRs been applied to this site since July 20, 1993?						
	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No → SKIP to Part 2, Section 4.			
3.20	Provide the following information for every facility other than yours that is sending, or has sent, bulk sewage sludge subject to CPLRs to this site since July 20, 1993. If more than one such facility sends sewage sludge to this site, attach additional pages as necessary.						
	<input type="checkbox"/>	Check here to indicate that additional pages are attached.					
	Facility name Towassa WWTP						
	Mailing address (street or P.O. box) PO Box 1631						
	City or town Montgomery			State AL	ZIP code 36102		
	Contact name (first and last) Tim Logiotatos	Title Superintendent	Phone number (334) 206-1722	Email address tlogio@mwwssb.com			

PART 2, SECTION 4 SURFACE DISPOSAL (40 CFR 122.21(q)(10))

Surface Disposal	4.1	Do you own or operate a surface disposal site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 5.		
	4.2	Complete all items in Section 4 for each active sewage sludge unit that you own or operate. <input type="checkbox"/> Check here to indicate that you have attached material to the application package for one or more active sewage sludge units.		
	Information on Active Sewage Sludge Units			
	4.3	Unit name or number		
		Mailing address (street or P.O. box)		
		City or town	State	ZIP code
		Contact name (first and last)	Title	Phone number Email address
		Location address (street, route number, or other specific identifier)		<input type="checkbox"/> Same as mailing address
		County	County code	<input type="checkbox"/> Not available
		City or town	State	ZIP code
		Latitude/Longitude of Active Sewage Sludge Unit (see instructions)		
		Latitude	Longitude	
		. ' "	. ' "	
		Method of Determination		
	<input type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____			
4.4	Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location. <input type="checkbox"/> Check here to indicate that you have completed and attached a topographic map.			
4.5	Total dry metric tons of sewage sludge placed on the active sewage sludge unit per 365-day period:			
4.6	Total dry metric tons of sewage sludge placed on the active sewage sludge unit over the life of the unit:			
4.7	Does the active sewage sludge unit have a liner with a maximum permeability of 1×10^{-7} centimeters per second (cm/sec)? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.9 (Part 2, Section 4) below.			
4.8	Describe the liner. <input type="checkbox"/> Check here to indicate that you have attached a description to the application package.			
4.9	Does the active sewage sludge unit have a leachate collection system? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.11 (Part 2, Section 4) below.			
4.10	Describe the leachate collection system and the method used for leachate disposal and provide the numbers of any federal, state, or local permit(s) for leachate disposal. <input type="checkbox"/> Check here to indicate that you have attached the description to the application package.			

Surface Disposal Continued	4.11	Is the boundary of the active sewage sludge unit less than 150 meters from the property line of the surface disposal site?		
	<input type="checkbox"/> Yes		<input type="checkbox"/> No → SKIP to Item 4.13 (Part 2, Section 4) below.	
	4.12	Provide the actual distance in meters:		_____ meters
	4.13	Remaining capacity of active sewage sludge unit in dry metric tons:		_____ dry metric tons
	4.14	Anticipated closure date for active sewage sludge unit, if known (MM/DD/YYYY): _____		
	4.15	Attach a copy of any closure plan that has been developed for this active sewage sludge unit. <input type="checkbox"/> Check here to indicate that you have attached a copy of the closure plan to the application package.		
	Sewage Sludge from Other Facilities			
	4.16	Is sewage sludge sent to this active sewage sludge unit from any facilities other than your facility?		
	<input type="checkbox"/> Yes		<input type="checkbox"/> No → SKIP to Item 4.21 (Part 2, Section 4) below.	
	4.17	Indicate the total number of facilities (other than your facility) that send sewage sludge to this active sewage sludge unit. (Complete Items 4.18 to 4.20 directly below for each such facility.) <input type="checkbox"/> Check here to indicate that you have attached responses for each facility to the application package.		
	4.18	Facility name _____		
		Mailing address (street or P.O. box) _____		
		City or town	State	ZIP code
		Contact name (first and last)	Title	Phone number Email address
	4.19	Indicate the pathogen class and reduction alternative and the vector attraction reduction option met for the sewage sludge before leaving the other facility.		
Pathogen Class and Reduction Alternative		Vector Attraction Reduction Option		
<input type="checkbox"/> Not applicable <input type="checkbox"/> Class A, Alternative 1 <input type="checkbox"/> Class A, Alternative 2 <input type="checkbox"/> Class A, Alternative 3 <input type="checkbox"/> Class A, Alternative 4 <input type="checkbox"/> Class A, Alternative 5 <input type="checkbox"/> Class A, Alternative 6 <input type="checkbox"/> Class B, Alternative 1 <input type="checkbox"/> Class B, Alternative 2 <input type="checkbox"/> Class B, Alternative 3 <input type="checkbox"/> Class B, Alternative 4 <input type="checkbox"/> Domestic septage, pH adjustment		<input type="checkbox"/> Not applicable <input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2 <input type="checkbox"/> Option 3 <input type="checkbox"/> Option 4 <input type="checkbox"/> Option 5 <input type="checkbox"/> Option 6 <input type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <input type="checkbox"/> Option 11		
4.20	Which treatment process(es) are used at the other facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge before leaving the other facility? (Check all that apply.)			
<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering) <input type="checkbox"/> Stabilization <input type="checkbox"/> Composting <input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization) <input type="checkbox"/> Heat drying <input type="checkbox"/> Methane or biogas capture and recovery		<input type="checkbox"/> Thickening (concentration) <input type="checkbox"/> Anaerobic digestion <input type="checkbox"/> Conditioning <input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction <input type="checkbox"/> Other (specify) _____		

EPA Identification Number 110064421460		NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Surface Disposal Continued	Vector Attraction Reduction			
	4.21	Which vector attraction reduction option, if any, is met when sewage sludge is placed on this active sewage sludge unit?		
		<input type="checkbox"/> Option 9 (Injection below and surface)	<input type="checkbox"/> Option 11 (Covering active sewage sludge unit daily)	
		<input type="checkbox"/> Option 10 (Incorporation into soil within 6 hours)	<input type="checkbox"/> None	
	4.22	Describe any treatment processes used at the active sewage sludge unit to reduce vector attraction properties of sewage sludge.		
		<input type="checkbox"/> Check here if you have attached your description to the application package.		
	Groundwater Monitoring			
	4.23	Is groundwater monitoring currently conducted at this active sewage sludge unit, or are groundwater monitoring data otherwise available for this active sewage sludge unit?		
		<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.26 (Part 2, Section 4) below.	
	4.24	Provide a copy of available groundwater monitoring data.		
		<input type="checkbox"/> Check here to indicate you have attached the monitoring data.		
	4.25	Describe the well locations, the approximate depth to groundwater, and the groundwater monitoring procedures used to obtain these data.		
		<input type="checkbox"/> Check here if you have attached your description to the application package.		
	4.26	Has a groundwater monitoring program been prepared for this active sewage sludge unit?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.28 (Part 2, Section 4) below.		
4.27	Submit a copy of the groundwater monitoring program with this permit application.			
	<input type="checkbox"/> Check here to indicate you have attached the monitoring program.			
4.28	Have you obtained a certification from a qualified groundwater scientist that the aquifer below the active sewage sludge unit has not been contaminated?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.30 (Part 2, Section 4) below.		
4.29	Submit a copy of the certification with this permit application.			
	<input type="checkbox"/> Check here to indicate you have attached the certification to the application package.			
Site-Specific Limits				
4.30	Are you seeking site-specific pollutant limits for the sewage sludge placed on the active sewage sludge unit?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Part 2, Section 5.		
4.31	Submit information to support the request for site-specific pollutant limits with this application.			
	<input type="checkbox"/> Check here to indicate you have attached the requested information.			

EPA Identification Number
110064421460

NPDES Permit Number
AL0027863

Facility Name
Catoma Creek WWTP

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

PART 2, SECTION 5 INCINERATION (40 CFR 122.21(q)(11))

Incineration

Incinerator Information

5.1 Do you fire sewage sludge in a sewage sludge incinerator?
 Yes No → SKIP to END.

5.2 Indicate the total number of incinerators used at your facility. (Complete the remainder of Section 5 for each such incinerator.)
 Check here to indicate that you have attached information for one or more incinerators.

5.3 Incinerator name or number

Location address (street, route number, or other specific identifier)

County County code Not available

City or town State ZIP code

Latitude/Longitude of Incinerator (see instructions)

Latitude	Longitude
• ' "	• ' "

Method of Determination

USGS map Field survey Other (specify) _____

Amount Fired

5.4 Dry metric tons per 365-day period of sewage sludge fired in the sewage sludge incinerator:

Beryllium NESHAP

5.5 Submit information, test data, and a description of measures taken that demonstrate whether the sewage sludge incinerated is beryllium-containing waste and will continue to remain as such.
 Check here to indicate that you have attached this material to the application package.

5.6 Is the sewage sludge fired in this incinerator "beryllium-containing waste" as defined at 40 CFR 61.31?
 Yes No → SKIP to Item 5.8 (Part 2, Section 5) below.

5.7 Submit with this application a complete report of the latest beryllium emission rate testing and documentation of ongoing incinerator operating parameters indicating that the NESHAP emission rate limit for beryllium has been and will continue to be met.
 Check here to indicate that you have attached this information.

Mercury NESHAP

5.8 Is compliance with the mercury NESHAP being demonstrated via stack testing?
 Yes No → SKIP to Item 5.11 (Part 2, Section 5) below.

5.9 Submit a complete report of stack testing and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit.
 Check here to indicate that you have attached this information.

5.10 Provide copies of mercury emission rate tests for the two most recent years in which testing was conducted.
 Check here to indicate that you have attached this information.

5.11 Do you demonstrate compliance with the mercury NESHAP by sewage sludge sampling?
 Yes No → SKIP to Item 5.13 (Part 2, Section 5) below.

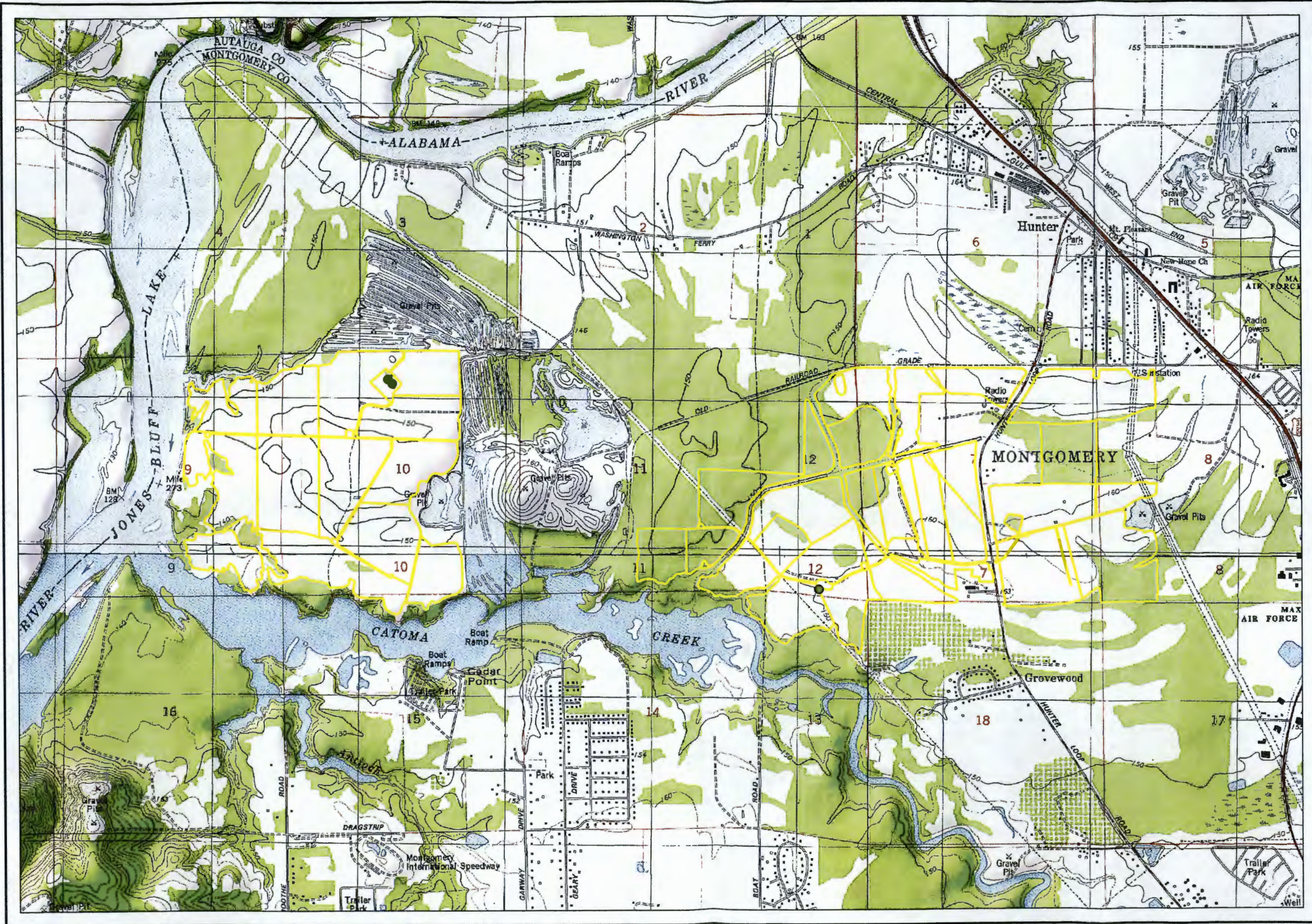
5.12 Submit a complete report of sewage sludge sampling and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit.
 Check here to indicate that you have attached this information.

EPA Identification Number 110064421460		NPDES Permit Number AL0027863		Facility Name Catoma Creek WWTP		Form Approved 03/05/19 OMB No. 2040-0004		
Incineration Continued	Dispersion Factor							
	5.13	Dispersion factor in micrograms/cubic meter per gram/second:						
	5.14	Name and type of dispersion model:						
	5.15	Submit a copy of the modeling results and supporting documentation. <input type="checkbox"/> Check here to indicate that you have attached this information.						
	Control Efficiency							
	5.16	Provide the control efficiency, in hundredths, for each of the pollutants listed below.						
		Pollutant			Control Efficiency, in Hundredths			
		Arsenic						
		Cadmium						
		Chromium						
		Lead						
		Nickel						
	5.17	Attach a copy of the results or performance testing and supporting documentation (including testing dates). <input type="checkbox"/> Check here to indicate that you have attached this information.						
	Risk-Specific Concentration for Chromium							
	5.18	Provide the risk-specific concentration (RSC) used for chromium in micrograms per cubic meter:						
	5.19	Was the RSC determined via Table 2 in 40 CFR 503.43? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.21 (Part 2, Section 5) below.						
	5.20	Identify the type of incinerator used as the basis. <input type="checkbox"/> Fluidized bed with wet scrubber <input type="checkbox"/> Other types with wet scrubber <input type="checkbox"/> Fluidized bed with wet scrubber and wet electrostatic precipitator <input type="checkbox"/> Other types with wet scrubber and wet electrostatic precipitator						
	5.21	Was the RSC determined via Table 6 in 40 CFR 503.43 (site-specific determination)? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.23 (Part 2, Section 5) below.						
	5.22	Provide the decimal fraction of hexavalent chromium concentration to total chromium concentration in stack exit gas:						
	5.23	Attach the results of incinerator stack tests for hexavalent and total chromium concentrations, including the date(s) of any test(s), with this application. <input type="checkbox"/> Check here to indicate that you have attached this information. <input type="checkbox"/> Not applicable						
Incinerator Parameters								
5.24	Do you monitor total hydrocarbons (THC) in the exit gas of the sewage sludge incinerator? <input type="checkbox"/> Yes <input type="checkbox"/> No							
5.25	Do you monitor carbon monoxide (CO) in the exit gas of the sewage sludge incinerator? <input type="checkbox"/> Yes <input type="checkbox"/> No							
5.26	Indicate the type of sewage sludge incinerator.							
5.27	Incinerator stack height in meters:							
5.28	Indicate whether the value submitted in Item 5.27 is (check only one response): <input type="checkbox"/> Actual stack height <input type="checkbox"/> Creditable stack height							

EPA Identification Number 110064421460		NPDES Permit Number AL0027863	Facility Name Catoma Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Incineration Continued	Performance Test Operating Parameters			
	5.29	Maximum performance test combustion temperature:		
	5.30	Performance test sewage sludge feed rate, in dry metric tons/day		
	5.31	Indicate whether value submitted in Item 5.30 is (check only one response):		
		<input type="checkbox"/> Average use	<input type="checkbox"/> Maximum design	
	5.32	Attach supporting documents describing how the feed rate was calculated.		
		<input type="checkbox"/> Check here to indicate that you have attached this information.		
	5.33	Submit information documenting the performance test operating parameters for the air pollution control device(s) used for this sewage sludge incinerator.		
		<input type="checkbox"/> Check here to indicate that you have attached this information.		
	Monitoring Equipment			
	5.34	List the equipment in place to monitor the listed parameters.		
		Parameter	Equipment in Place for Monitoring	
	Total hydrocarbons or carbon monoxide			
	Percent oxygen			
	Percent moisture			
	Combustion temperature			
	Other (describe)			
Air Pollution Control Equipment				
5.35	List all air pollution control equipment used with this sewage sludge incinerator.			
	<input type="checkbox"/> Check here if you have attached the list to the application package for the noted incinerator.			

END of PART 2

Submit completed application package to your NPDES permitting authority.



MONTGOMERY WATER WORKS AND SANITARY SEWER BOARD
MONTGOMERY, ALABAMA

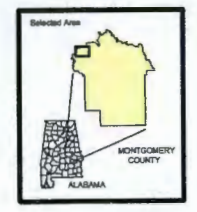
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The Mission of the Montgomery Water and Sewer Board
"To provide the highest quality water and sanitary sewer services in harmony with the environment"

Montgomery Water Works & Sanitary Sewer Board
Agrarian Center
32° 22' 23" N
86° 24' 10" W

- Fields 1
- Fields 2
- Storage Tanks



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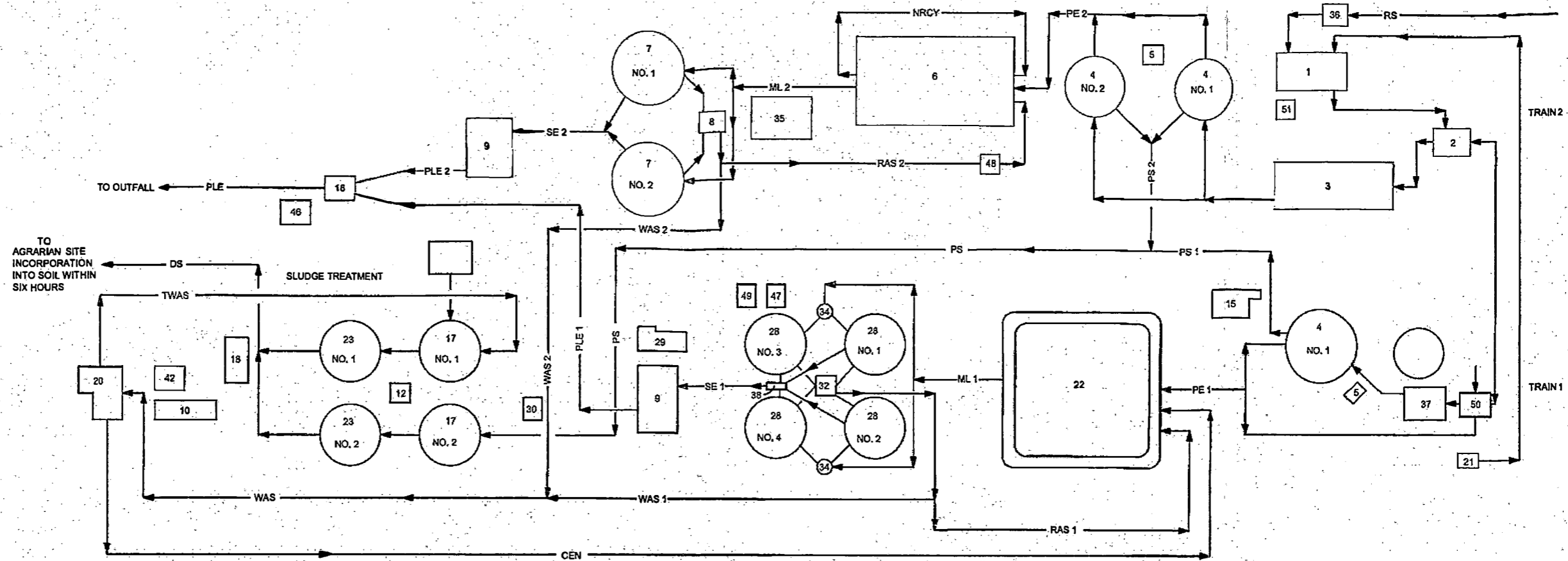
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STRUCTURE LEGEND/FACILITY NUMBER

- 1. PRELIMINARY TREATMENT FACILITY
- 2. PRELIMINARY SPLITTER
- 3. PREAERATION BASIN
- 4. PRIMARY CLARIFIER
- 5. PRIMARY SLUDGE PUMP BUILDING
- 6. ANOXIC/OXIC BASIN
- 7. SECONDARY CLARIFIER
- 8. TRAIN 2 RAS PUMP STATION
- 9. CHLORINE CONTACT BASIN
- 10. CHLORINE BUILDING
- 11. DIGESTED SLUDGE PUMP BUILDING
- 12. SLUDGE HEATING BUILDING
- 13. LAB BUILDING
- 14. MAINTENANCE BUILDING
- 15. STANDBY POWER BUILDING
- 16. DIVERSION BOX
- 17. PRIMARY DIGESTER
- 18. SLUDGE DEWATERING BUILDING
- 19. TRUCK LOADING STATION
- 20. CENTRIFUGE BUILDING
- 21. IN-PLANT PUMP STATION
- 22. TRAIN 1 AERATION BASIN
- 23. SECONDARY DIGESTER
- 24. GRAVITY THICKENER
- 25. TRAIN 1 HEADWORKS (ABANDONED)
- 26. NOT USED
- 27. STORAGE BUILDING
- 28. TRAIN 1 SECONDARY CLARIFIER
- 29. PUMP STATION
- 30. BOILER BUILDING
- 31. SLUDGE DRYING-BEDS
- 32. TRAIN 1 RAS PUMP STATION
- 33. TRAIN 1 RAS/WAS PUMP CONTROL BUILDING
- 34. TRAIN 1 SECONDARY CLARIFIER SPLITTER BOX
- 35. BLOWER BUILDING
- 36. INFLUENT FLOW METERS
- 37. TRAIN 1 PRE AERATION BASIN
- 38. TRAIN 1 PARSHALL FLUME
- 39. NOT USED
- 40. NOT USED
- 41. NOT USED
- 42. CHLORINE SCRUBBER
- 43. NOT USED
- 44. OPERATIONS BUILDING
- 45. NOT USED
- 46. SODIUM BISULFITE SYSTEM
- 47. TRAIN 1 SECONDARY SCUM PUMP STATION
- 48. TRAIN 2 RAS SPLITTER BOX
- 49. DIGESTER GAS FACILITY
- 50. TRAIN 1 PRELIMINARY BYPASS
- 51. PTF ODOR CONTROL FACILITY



NOTES ON MASS BALANCE CALCULATIONS:

- 1. BASED ON MAXIMUM MONTH AVERAGE DAILY FLOW (MMADF=35MGD) AND AVERAGE DAILY FLOW (ADF=31.5 MGD).
- 2. BASED ON AN INFLUENT TSS AND BOD CONCENTRATION OF 290mg/l AND 230 mg/l, RESPECTIVELY.
- 3. BASED ON A MLSS OF 3,000 mg/l IN TRAIN 1 @ 20.0 MGD AND A MLSS OF 3,500 mg/l IN TRAIN 2 @ 15.0 MGD.
- 4. BASED ON A RAS RECYCLE RATIO OF 0.8 AND 0.7 FOR TRAINS 1 AND 2, RESPECTIVELY.
- 5. BASED ON A NRCY FLOWRATE OF 30.0 MGD (TRAIN 2 ONLY)
- 6. BASED ON EFFLUENT SUSPENDED SOLIDS AND BOD OF 20.0 mg/l EACH.
- 7. BASED ON 85% VOLATILE SOLIDS FOR PRIMARY SLUDGE AND 80% VOLATILE SOLIDS FOR WAS.
- 8. BASED ON 7 AND 8 DAY SRT FOR TRAINS 1 AND 2, RESPECTIVELY.
- 9. BASED ON 30% REMOVAL OF BOD AND 60% REMOVAL OF TSS IN PRIMARY CLARIFIERS.
- 10. BASED ON 5% SOLIDS IN PS AND 5.5% SOLIDS IN TWAS ENTERING THE SLUDGE DIGESTERS WITH 40% VSS REDUCTION DURING ANAEROBIC DIGESTION AND 3% SOLIDS IN DIGESTED SLUDGE.
- 11. BASED ON 0.85% SOLIDS IN WAS FROM SECONDARY CLARIFIERS.
- 12. BASED ON 95% CAPTURE OF WAS SOLIDS BY CENTRIFUGE.
- 13. THIS SHEET NOT IN CONTRACT. PROVIDED FOR ENGINEER AND OWNER INFORMATION AND COORDINATION ONLY.

STREAM IDENTIFICATION	STREAM ABBREVIATIONS	MMADF			ADF		
		FLOW (MGD)	BOD5 (lbs/day)	TSS (lbs/day)	FLOW (MGD)	BOD5 (lbs/day)	TSS (lbs/day)
1. RAW SEWAGE	RS	35.00	67177	84702	31.50	60459	76232
2. PRIMARY EFFLUENT	PE	34.88	47024	33880	31.39	42323	30492
2.1 TRAIN 1	PE 1	19.93	26871	19360	17.94	24184	17424
2.2 TRAIN 2	PE 2	14.95	20153	14520	13.45	18138	13068
3. MIXED LIQUOR	ML	57.79	---	---	52.01	---	---
3.1 TRAIN 1	ML 1	32.34	---	---	29.11	---	---
3.2 TRAIN 2	ML 2	25.45	---	---	22.90	---	---
4. SECONDARY EFFLUENT	SE	34.81	5809	5809	31.33	5229	5229
4.1 TRAIN 1	SE 1	20.05	3346	3346	18.05	3012	3012
4.2 TRAIN 2	SE 2	14.78	2463	2463	13.28	2217	2217
5. PLANT EFFLUENT	PLE	34.81	5809	5809	31.33	5229	5229
5.1 TRAIN 1	PLE 1	20.05	3346	3346	18.05	3012	3012
5.2 TRAIN 2	PLE 2	14.76	2463	2463	13.28	2217	2217
6. PRIMARY SLUDGE	PS	0.122	---	50821	0.110	---	45739
6.1 TRAIN 1	PS 1	0.070	---	29441	0.063	---	26137
6.2 TRAIN 2	PS 2	0.052	---	21780	0.047	---	19602
7. RETURN ACTIVATED SLUDGE	RAS	22.50	---	---	20.25	---	---
7.1 TRAIN 1	RAS 1	12.00	---	---	10.80	---	---
7.2 TRAIN 2	RAS 2	10.50	---	---	9.45	---	---
8. NITRATE RICH RECYCLE (TRAIN 2 ONLY)	NRCY	30.00	---	875700	30.00	---	548061
9. WASTE ACTIVATED SLUDGE	WAS	0.48	---	33814	0.43	---	30433
9.1 TRAIN 1	WAS 1	0.29	---	20472	0.26	---	18425
9.2 TRAIN 2	WAS 2	0.19	---	13342	0.17	---	12008
10. THICKENED WASTE ACTIVATED SLUDGE	TWAS	0.074	---	32172	0.063	---	28954
11. CENTRIFUGE RETURN	CEN	0.409	847	1693	0.368	762	1524
12. DIGESTED SLUDGE	DS	0.220	---	57800	0.198	---	52020
12.1 DIGESTED PS	DPS	0.128	---	33542	0.115	---	30188
12.2 DIGESTED TWAS	DTWAS	0.092	---	24257	0.083	---	21832
12.3 DIGESTED FOG	FOG	TBD	---	TBD	TBD	---	TBD

FIGURE 3-4
MONTGOMERY COMP PLAN UPDATE
 CATOMA WPCP
 PROCESS FLOW DIAGRAM