



Alabama Department of Environmental Management  
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MAY 7, 2024

John Bonanno, Vice President  
Enviro Services, LLC  
1000 Urban Center Dr, Suite 235  
Vestavia Hills, AL 35242

RE: Draft Permit  
NPDES Permit No. AL0067814  
Liberty Park WRRF  
Jefferson County, Alabama

Dear Mr. Bonanno:

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 Parts I.C.1.c and I.C.2.e of your permit require participation in the Department's Alabama Environmental Permitting and Compliance System (AEPACS) for submittal of DMRs and SSOs upon issuance of this permit 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. AEPACS allows ADEM to electronically validate and acknowledge receipt of the data. This improves the accuracy of reported compliance data and reduces costs to both the regulated community and ADEM. Please note that all AEPACS users can create the electronic DMRs and SSOs; however, only AEPACS users with certifier permissions will be able to submit the electronic DMRs and SSOs to ADEM.

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

**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)

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

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

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.

If you have questions regarding this permit or monitoring requirements, please contact Dustin Stokes at [dastokes@adem.alabama.gov](mailto:dastokes@adem.alabama.gov) or (334) 271-7808.

Sincerely,



Dustin Stokes  
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



# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

**PERMITTEE:** ENVIRO SERVICES, LLC  
1000 URBAN CENTER DR, SUITE 235  
VESTAVIA HILLS, AL 35242

**FACILITY LOCATION:** LIBERTY PARK WRRF (1.15 & 1.6 MGD)  
13059 LIBERTY PARKWAY  
VESTAVIA HILLS, ALABAMA  
JEFFERSON COUNTY

**PERMIT NUMBER:** AL0067814

**RECEIVING WATERS:** UT TO GUMSUCK BRANCH (OUTFALLS 020, 006-STORM WATER)  
GUMSUCK BRANCH (OUTFALL 030)

*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**

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## PART I: DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS

### A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS

#### 1. DSN 0201: Treated Domestic Wastewater - 1.15 MGD to UT to Gumsuck Branch

During the period beginning on the effective date of this permit and lasting through the completion of the facility expansion to 1.6 MGD and initiation of Outfall 0202 or initiation of the new outfall location to Gumsuck Branch, designated as Outfalls 0301 & 0302, the Permittee is authorized to discharge from Outfall 0201, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	****	****	****	7.0 Minimum Daily	****	****	mg/l	2X Weekly	Grab	Not Seasonal
pH (00400) Effluent Gross Value	****	****	****	6.0 Minimum Daily	****	8.5 Maximum Daily	S.U.	2X Weekly	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	287 Monthly Average	431 Weekly Average	lbs/day	****	30.0 Monthly Average	45.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	19.1 Monthly Average	28.7 Weekly Average	lbs/day	****	2.0 Monthly Average	3.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	NTW
Phosphorus, Total (As P) (00665) See notes (5, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	0.20 Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	NTS
Phosphorus, Total (As P) (00665) See notes (6, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	0.043 Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	NTS

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency – See also Part I.B.2
- (2) NTS = Nutrient Summer (April – October)  
NTW = Nutrient Winter (November - March)  
ECS = E. coli Summer (May - October)  
ECW = E. coli Winter (November - April)
- (3) 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.
- (4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.
- (5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.20 mg/l during the summer season (NTS)
- (6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS
- (7) For complete schedule, see Part I.E.2.

**DSN 0201 (Continued): Treated Domestic Wastewater - 1.15 MGD to UT to Gumsuck Branch**

During the period beginning on the effective date of this permit and lasting through the completion of the facility expansion to 1.6 MGD and initiation of Outfall 0202 or initiation of the new outfall location to Gumsuck Branch, designated as Outfalls 0301 & 0302, the Permittee is authorized to discharge from Outfall 0201, which is described more fully in the Permittee’s application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	****	****	****	****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	****	****	****	****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	2X Weekly	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	****	****	****	****	548 Monthly Average	2507 Maximum Daily	col/100mL	2X Weekly	Grab	ECW
E. Coli (51040) Effluent Gross Value	****	****	****	****	126 Monthly Average	298 Maximum Daily	col/100mL	2X Weekly	Grab	ECS
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	95.9 Monthly Average	143 Weekly Average	lbs/day	****	10.0 Monthly Average	15.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency - See also Part I.B.2
- (2) NTS = Nutrient Summer (April – October)  
 NTW = Nutrient Winter (November - March)  
 ECS = E. coli Summer (May - October)  
 ECW = E. coli Winter (November - April)
- (3) 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.
- (4) A measurement of TRC below 0.05 mg/l shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.
- (5) From the permit effective date through March 31, 2032 Monthly average limit = 0.20 mg/l during the summer season (NTS)
- (6) From April 1, 2032 forward - Monthly average limit = 0.043 mg/l during the NTS
- (7) For complete schedule, see Part I.E.2.

## 2. DSN 0202: Treated Domestic Wastewater - 1.6 MGD to UT to Gumsuck Branch

During the period beginning on the date of the facility expansion to 1.6 MGD and termination of Outfall 0201 and lasting through the expiration date of this permit or initiation of the new outfall location to Gumsuck Branch, designated as Outfalls 0301 & 0302, the Permittee is authorized to discharge from Outfall 0202, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	****	****	****	7.0 Minimum Daily	****	****	mg/l	2X Weekly	Grab	Not Seasonal
pH (00400) Effluent Gross Value	****	****	****	6.0 Minimum Daily	****	8.5 Maximum Daily	S.U.	2X Weekly	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	400 Monthly Average	600 Weekly Average	lbs/day	****	30.0 Monthly Average	45.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	26.6 Monthly Average	40.0 Weekly Average	lbs/day	****	2.0 Monthly Average	3.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	NTW
Phosphorus, Total (As P) (00665) See notes (5, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	0.14 Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	NTS
Phosphorus, Total (As P) (00665) See notes (6, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	0.043 Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	NTS

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency – See also Part I.B.2
- (2) NTS = Nutrient Summer (April – October)  
NTW = Nutrient Winter (November - March)  
ECS = E. coli Summer (May - October)  
ECW = E. coli Winter (November - April)
- (3) 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.
- (4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.
- (5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.14 mg/l during the summer season (NTS)
- (6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS
- (7) For complete schedule, see Part I.E.2.

**DSN 0202 (Continued): Treated Domestic Wastewater - 1.6 MGD to UT to Gumsuck Branch**

During the period beginning on the date of the facility expansion to 1.6 MGD and termination of Outfall 0201 and lasting through the expiration date of this permit or initiation of the new outfall location to Gumsuck Branch, designated as Outfalls 0301 & 0302, the Permittee is authorized to discharge from Outfall 0202, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
	(Report) Monthly Average	(Report) Maximum Daily		****	****	****				
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	****	****	****	****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	****	****	****	****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	2X Weekly	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	****	****	****	****	548 Monthly Average	2507 Maximum Daily	col/100mL	2X Weekly	Grab	ECW
E. Coli (51040) Effluent Gross Value	****	****	****	****	126 Monthly Average	298 Maximum Daily	col/100mL	2X Weekly	Grab	ECS
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	133 Monthly Average	200 Weekly Average	lbs/day	****	10.0 Monthly Average	15.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carb-5-Day, 20 Deg C, Percent Remvl (80091) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

(1) Sample Frequency – See also Part I.B.2

(2) NTS = Nutrient Summer (April – October)

NTW = Nutrient Winter (November - March)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

(3) 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.

(4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.

(5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.14 mg/l during the summer season (NTS)

(6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS

(7) For complete schedule, see Part I.E.2.

**3. DSN 020T: Toxicity - UT to Gumsuck Branch**

This is an administrative outfall designation. Outfall 020T is the same physical outfall as Outfall 020. The period beginning on the effective date of this permit and lasting through initiation of the new outfall location to Gumsuck Branch, designated as Outfalls 0301 & 0302, discharge from this outfall shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal
Toxicity, Ceriodaphnia Chronic (61426) Effluent Gross Value	****	0 Single Sample	pass=0;fail=1	****	****	****	****	See Permit Requirements	24-Hr Composite	Nov
Toxicity, Pimephales Chronic (61428) Effluent Gross Value	****	0 Single Sample	pass=0;fail=1	****	****	****	****	See Permit Requirements	24-Hr Composite	Nov

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

(1) Sample Frequency – See also Part I.B.2

See Permit Requirements for Effluent Toxicity Testing in Part IV.B.

**4. DSN 0301: Treated Domestic Wastewater - 1.15 MGD to Gumsuck Branch**

During the period beginning on the date of the initiation of the new outfall location designated as Outfall 0301 and termination of Outfalls 0201 & 0202 and lasting through the completion of the facility expansion to 1.6 MGD and initiation of Outfall 0302, the Permittee is authorized to discharge from Outfall 0301, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	7.0 Minimum Daily	*****	*****	mg/l	3X Weekly test	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	8.5 Maximum Daily	S.U.	3X Weekly test	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	287 Monthly Average	431 Weekly Average	lbs/day	*****	30.0 Monthly Average	45.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	19.1 Monthly Average	28.7 Weekly Average	lbs/day	*****	2.0 Monthly Average	3.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	NTW
Phosphorus, Total (As P) (00665) See notes (5, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	0.20 Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	NTS
Phosphorus, Total (As P) (00665) See notes (6, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	0.043 Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	NTS

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency – See also Part I.B.2
- (2) NTS = Nutrient Summer (April – October)  
NTW = Nutrient Winter (November - March)  
ECS = E. coli Summer (May - October)  
ECW = E. coli Winter (November - April)
- (3) 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.
- (4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.
- (5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.20 mg/l during the summer season (NTS)
- (6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS
- (7) For complete schedule, see Part I.E.2.

**DSN 0301 (Continued): Treated Domestic Wastewater - 1.15 MGD to Gumsuck Branch**

During the period beginning on the date of the initiation of the new outfall location designated as Outfall 0301 and termination of Outfalls 0201 & 0202 and lasting through the completion of the facility expansion to 1.6 MGD and initiation of Outfall 0302, the Permittee is authorized to discharge from Outfall 0301, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
	(Report) Monthly Average	(Report) Maximum Daily		****	****	****				
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	****	****	****	****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	****	****	****	****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	****	****	****	****	548 Monthly Average	2507 Maximum Daily	col/100mL	3X Weekly test	Grab	ECW
E. Coli (51040) Effluent Gross Value	****	****	****	****	126 Monthly Average	298 Maximum Daily	col/100mL	3X Weekly test	Grab	ECS
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	67.1 Monthly Average	100 Weekly Average	lbs/day	****	7.0 Monthly Average	10.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

(1) Sample Frequency – See also Part I.B.2

(2) NTS = Summer (April – October)

NTW = Winter (November - March)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

(3) 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.

(4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.

(5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.20 mg/l during the nutrient summer season (NTS)

(6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS

(7) For complete schedule, see Part I.E.2.



**5. DSN 0302: Treated Domestic Wastewater - 1.6 MGD to Gumsuck Branch**

During the period beginning on the date of the initiation of the new outfall location designated as Outfall 0302 and termination of Outfalls 0201 & 0202 and on the date of the facility expansion to 1.6 MGD and termination of Outfall 0301 and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 0302, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	7.0 Minimum Daily	*****	*****	mg/l	3X Weekly test	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	8.5 Maximum Daily	S.U.	3X Weekly test	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	400 Monthly Average	600 Weekly Average	lbs/day	*****	30.0 Monthly Average	45.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	26.6 Monthly Average	40.0 Weekly Average	lbs/day	*****	2.0 Monthly Average	3.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	NTW
Phosphorus, Total (As P) (00665) See notes (5, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	0.14 Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	NTS
Phosphorus, Total (As P) (00665) See notes (6, 7) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	0.043 Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	NTS

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency – See also Part I.B.2
- (2) NTS = Summer (April – October)  
NTW = Winter (November - March)  
ECS = E. coli Summer (May - October)  
ECW = E. coli Winter (November - April)
- (3) 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.
- (4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.
- (5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.14 mg/l during the nutrient summer season (NTS)
- (6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS
- (7) For complete schedule, see Part I.E.2.

**DSN 0302 (Continued): Treated Domestic Wastewater - 1.6 MGD to Gumsuck Branch**

During the period beginning on the date of the initiation of the new outfall location designated as Outfall 0302 and termination of Outfalls 0201 & 0202 and on the date of the facility expansion to 1.6 MGD and termination of Outfall 0301 and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 0302, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
	(Report) Monthly Average	(Report) Maximum Daily		*****	*****	*****				
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	*****	*****	*****	*****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	548 Monthly Average	2507 Maximum Daily	col/100mL	3X Weekly test	Grab	ECW
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	298 Maximum Daily	col/100mL	3X Weekly test	Grab	ECS
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	93.4 Monthly Average	140 Weekly Average	lbs/day	*****	7.0 Monthly Average	10.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

(1) Sample Frequency – See also Part I.B.2

(2) NTS = Summer (April – October)

NTW = Winter (November - March)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

(3) 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.

(4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “\*B” on the monthly DMR.

(5) From the permit effective date through March 31, 2032 – Monthly average limit = 0.14 mg/l during the nutrient summer season (NTS)

(6) From April 1, 2032 forward – Monthly average limit = 0.043 mg/l during the NTS

(7) For complete schedule, see Part I.E.2.

**6. DSN 030T: Toxicity - Gumsuck Branch**

This is an administrative outfall designation. Outfall 030T is the same physical outfall as Outfall 003. The period beginning on the initiation of the new outfall location designated as Outfalls 0301 and 0302 and termination of Outfalls 0201 & 0202 and lasting through the expiration date of this permit, discharge from this outfall shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Toxicity, Ceriodaphnia Chronic (61426) Effluent Gross Value	****	0 Single Sample	pass=0;fail=1	****	****	****	****	See Permit Requirements	24-Hr Composite	Nov
Toxicity, Pimephales Chronic (61428) Effluent Gross Value	****	0 Single Sample	pass=0;fail=1	****	****	****	****	See Permit Requirements	24-Hr Composite	Nov

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency – See also Part I.B.2
- (2) See Permit Requirements for Effluent Toxicity Testing in Part IV.B.

**7. DSN 006S: Storm water**

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 006S, which is described more fully in the Permittee's application storm water outfalls located at the wastewater treatment plant. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
				(Report) Minimum Daily		(Report) Maximum Daily				
pH (00400) Storm Water	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Quarterly	Grab	Not Seasonal
Solids, Total Suspended (00530) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Quarterly	Grab	Not Seasonal
Oil & Grease (00556) Storm Water	*****	*****	*****	*****	*****	15.0 Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Quarterly	Grab	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Quarterly	Grab	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Quarterly	Grab	Not Seasonal
Phosphorus, Total (As P) (00665) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Quarterly	Grab	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Storm Water	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Quarterly	Calculated	Not Seasonal
E. Coli (51040) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Quarterly	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Quarterly	Grab	Not Seasonal

See Part II.C.1. for Bypass and Part II.C.2. for Upset conditions.

- (1) Sample Frequency – See also Part I.B.2
- (2) See Permit Requirements for Stormwater in Part IV.G

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

If the Department's electronic 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 Department's electronic system resuming operation, the permittee shall enter the data into the Department's electronic system, unless an alternate timeframe is approved by the Department. A comment should be included on the electronic DMR submittal verifying the original submittal date (date of the fax, copy of dated e-mail, or hand-delivery stamped date), if applicable.
  - (2) The permittee may submit a request to the Department for a temporary electronic reporting waiver for DMR submittals. The waiver request should include the permit number; permittee name; facility/site name; facility address; name, address, and contact information for the responsible official or duly authorized representative; a detailed statement regarding the basis for requesting such a waiver; and the duration for which the waiver is requested. Approved electronic reporting waivers are not transferrable.
  - (3) 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.

- (4) 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.
- (5) 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.
- (6) 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  
Office of Water Services, Water 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  
Office of Water Services, Water 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 an electronic system for notification and submittal of SSO reports. Except as noted below, the Permittee must submit all SSO reports electronically in the Department's electronic system. If requested, waivers from utilization of the electronic system shall be submitted in accordance with ADEM Admin. Code 335-6-1-.04(6). The Department's electronic reporting system shall be utilized unless a written waiver has been granted. A waiver is not effective until receipt of written approval from the Department. Utilization of verbal notifications and hard copy SSO report submittals is allowed only if approved in writing by the Department. 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 electronic system for SSO reports, an account may be created at <https://aepacs.adem.alabama.gov/nviro/ncore/external/home>. If the electronic 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 electronic system resuming operation, the Permittee shall enter the data into the electronic 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.

#### 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. Compliance with Total Phosphorus limits (Note: Summer Nutrient Season is April – October)

The Permittee shall achieve compliance with the discharge limitations for Total Phosphorus (TP) specified in Provision I.A according to the following schedule:

July 1, 2024 July 1, 2025 July 1, 2026 July 1, 2027 July 1, 2028 July 1, 2029 July 1, 2030 July 1, 2031	Submit report describing the Permittee's progress towards achieving compliance with TP limit of 0.043 mg/L. The report should include a discussion of the projects completed to date and a schedule for any projects that remain to be completed. The following should be included in the report, where applicable: pollution abatement program and preliminary plans; final plans, specifications, and drawings; date(s) of initiation of construction; and date(s) of attainment of operational status.
April 1, 2032	Achieve compliance with TP limit of 0.043 mg/L (growing season monthly average)

##### 3. 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**

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

#### **3. 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**

- a. 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, 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, 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; or

#### 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.
- 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;
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) That did not commence the discharge of pollutants 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:
  - a) Reaches a surface water of the State; or
  - b) 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 (POTW)** – 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:
- a) 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;
  - b) 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;
  - c) 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 Outfalls 020 & 030.
- b. The samples shall be diluted using appropriate control water to the Instream Waste Concentration (IWC) which is 100 percent effluent for all outfalls. 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 **NOVEMBER**. Should results from the Annual Toxicity test indicate that Outfall 020 and/or 030 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 FEBRUARY, MAY, AUGUST, and NOVEMBER.

### 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. 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)
    - (i) Name of firm
    - (ii) Telephone number
    - (iii) 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
  - (2) Sampling point
  - (3) Sample collection dates and times (to include composite sample start and finish times)
  - (4) Sample collection method
  - (5) Physical and chemical data of undiluted effluent samples (water temperature, pH, alkalinity, hardness, specific conductance, total residual chlorine (if applicable), etc.)
  - (6) Lapsed time from sample collection to delivery
  - (7) Lapsed time from sample collection to test initiation
  - (8) Sample temperature when received at the laboratory
  - (9) Dilution Water
  - (10) Source
  - (11) Collection/preparation date(s) and time(s)
  - (12) Pretreatment (if applicable)
  - (13) 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

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" 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 the analytical result is less than the detection level or a value otherwise indicated in this permit, the Permittee shall report on the DMR form "\*B" 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. 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 the following: <http://adem.alabama.gov/air/virof/egLews/files/Division6Vol1.pdf> and <http://adem.alabama.gov/wqmap>.
- (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)
    - (i) 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.

## **F. 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.

## **G. MAJOR SOURCE STORMWATER 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.G.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.

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

**Date Prepared:** February 14, 2024

**By:** Dustin Stokes

**NPDES Permit No.** AL0067814

**1. Name and Address of Applicant:**

Enviro Services, LLC  
1000 Urban Center Dr, Suite 235  
Vestavia Hills, AL 35242

**2. Name and Address of Facility:**

Liberty Park WRRF  
13059 Liberty Parkway  
Vestavia Hills, AL 35242

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

Discharge Type(s): Surface Water  
Treatment Method(s): Mechanical (WWTP)

**4. Applicant's Receiving Waters**

<b>Feature ID</b>	<b>Receiving Water</b>	<b>Classification</b>
020	UT to Gumsuck Branch	Fish and Wildlife (F&W)
030	Gumsuck Branch	Fish and Wildlife (F&W)
006	UT to Gumsuck Branch	Fish and Wildlife (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:

**Daphne Y. Lutz, Chief  
ADEM-Water Division  
1400 Coliseum Blvd  
[Mailing Address: Post Office Box 301463; Zip 36130-1463]  
Montgomery, Alabama 36110-2400  
(334) 271-7823  
[water-permits@adem.alabama.gov](mailto: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:

**Daphne Y. Lutz, Chief  
ADEM-Water Division  
1400 Coliseum Blvd  
[Mailing Address: Post Office Box 301463; Zip 36130-1463]  
Montgomery, Alabama 36110-2400  
(334) 271-7823  
[water-permits@adem.alabama.gov](mailto: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 36110-2400**

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

## ANTIDegradation Rationale

**Permit Number:** AL0067814  
**Facility Name:** Liberty Park WRRF  
**Receiving Water:** Gumsuck Branch  
**Stream Category:** Tier 2 as defined by ADEM Admin. Code 335-6-10-.12  
**Discharge Description:** Treated Domestic Wastewater

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

The Department has reviewed the information submitted by the applicant in accordance with ADEM Admin. Code 335-6-10-.12 (9). The applicant has demonstrated that there are no technically viable treatment options in its alternatives analysis that would completely eliminate a direct discharge.

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

1. This facility will provide centralized treatment of wastewater for an existing residential development and other potential developments and eliminate the need for individual septic tanks and disposal fields, which are prone to failure in the area.
2. This facility will need additional support personnel and operator attention. The facility will also allow for continued growth in the development, which includes additional businesses and retail shops, which require more employees.
3. The increased growth of the service area, which includes a hotel and restaurants, will generate additional sales tax.
4. This facility will support additional growth in the development, which will attract new businesses and improve the quality of life of the local residents.
5. This facility produces water which is used for irrigation of the golf course.

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

**Prepared by:** Dustin Stokes  
**Date:** February 14, 2024

**NPDES PERMIT RATIONALE**

NPDES Permit No: **AL0067814**

Date: February 14, 2024  
 Revised Date: May 22, 2024

Permit Applicant: Enviro Services, LLC  
 1000 Urban Center Dr, Suite 235  
 Vestavia Hills, AL 35242

Location: **Liberty Park WRRF**  
 13059 Liberty Parkway  
 Vestavia Hills, AL 35242

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

Basis for Limitations: Water Quality Model: DO, NH<sub>3</sub>-N, CBOD  
 Reissuance with no modification: Outfalls 0201 & 0202 – DO, pH, TSS, NH<sub>3</sub>-N, TRC, E. coli, CBOD, CBOD % Removal, TSS % Removal  
 Outfalls 0301 & 0302 – N/A  
 Instream calculation at 7Q10: All outfalls – 100%  
 Toxicity based: All outfalls – TRC  
 Secondary Treatment Levels: All outfalls – TSS, TSS % Removal, CBOD % Removal  
 Other (described below): All outfalls – pH, E. coli, TP

Design Flow in Million Gallons per Day: 1.15 MGD (Outfall Numbers 0201 & 0301)  
 1.6 MGD (Outfall Numbers 0202 & 0302)

Major: Yes

Description of Discharge:

Feature ID	Description	Receiving Water	Waterbody Use Classification	303(d)	TMDL
020	Treated Domestic Wastewater to UT to Gumsuck Branch	UT to Gumsuck Branch	Fish and Wildlife (F&W)	No	Yes
030	Treated Domestic Wastewater to Gumsuck Branch	Gumsuck Branch	Fish and Wildlife (F&W)	No	Yes
006	Storm water	UT to Gumsuck Branch	Fish and Wildlife (F&W)	No	Yes

## Discussion:

This is a revocation and reissuance. The Permittee has indicated that the land application at Old Overton Golf Course (Outfalls 0053 & 0054) will no longer be used in the future; therefore, Outfalls 0053 & 0054 have been removed from the permit. Storm water Outfalls 007S, 008S, 009S, 010S, 011S, 012S, 014S, 015S, 0016S, 017S, 018S, and 019S have also been removed from this Permit as a result of the facility no longer operating a previously Permitted sprayfield and the removal of the land application to Old Overton Golf Course.

This Permit revocation and reissuance includes an expansion to the existing treatment plant. The expansion involves an increase in design capacity from 1.15 MGD to 1.6 MGD. This reissuance also includes two new outfalls (Outfall 0301 & 0302) that discharge directly to Gumsuck Branch, which will replace Outfalls 0201 & 0202. The timing of the facility expansion and relocation of the discharge point will determine which outfall is applicable. Once the expansion is complete, the outfall designations 0202 or 0302 will be used, and the limits associated with those designations will apply. The applicable outfall is dependent upon if the facility is discharging to a UT to Gumsuck Branch (Outfall 0202) or to Gumsuck Branch (Outfall 0302). Once the facility begins using Outfalls 0301 or 0302, Outfalls 0201 and 0202 will no longer be applicable.

This discharge is included as a point source in the Cahaba River Watershed Nutrient Total Maximum Daily Load (TMDL), which was approved by EPA in October 2006. The TMDL states that major dischargers must attain a growing season (April – October) Total Phosphorus (TP) limit of 0.043 mg/L. The Permittee was required to achieve compliance with this TP limit in accordance with the compliance schedule previously provided to the Department. The schedule required compliance with the final growing season monthly average TP limit of 0.043 mg/L, effective April 1, 2022 for Outfall 0202 and April 1, 2027 for Outfall 0201. The Permittee has since requested that the final effective date of the 0.043 mg/L limit be extended to April 1, 2032 for all outfalls.

The permit has a current growing season monthly average limitation of 0.20 mg/L for Outfall 0201, which is in effect until the final effective date of the 0.043 mg/L limit. This Permit is also implementing a growing season monthly average limitation of 0.20 mg/L for Outfall 0301, effective until the final effective date of the 0.043 mg/L limit. For Outfalls 0202 and 0302, this Permit is implementing a growing season monthly average limitation of 0.14 mg/L. The 0.14 mg/L should hold the TP loading allowed to be discharged into the Cahaba River Basin when the facility expansion is complete to the current TP load. The 0.14 mg/L limit was determined by calculating a loading limit under the design flow of 1.15 MGD and then calculating the concentration limit based on the proposed 1.6 MGD design flow. The 0.14 mg/L limit is effective until the final effective date of the 0.043 mg/L limit.

The Permittee's June 12, 2023 TP Progress Report indicates that "The disk filters at this WRRF are the best available technology currently offered by the equipment manufacturer."

The Permittee's January 19, 2024 Request for Delay of Phase III Target Limit implementation for TP letter indicates that they have performed extensive testing using the best available technology and that achievement of the 0.043 mg/L target limit has been inconsistent. The request also indicates that when splitting samples, low level TP tests can yield inconsistent results. Additionally, the request indicates that a "Once threatened and declared extinct species of a particular snail native to the Cahaba River has been found since the implementation of the 2007 nutrient TMDL."

Section 6.3 (Adaptive Management) of the Cahaba River Nutrient TMDL states the following:

It is possible during the implementation of this TMDL that further evaluation of instream conditions in the Cahaba River, including biological and chemical monitoring, will reveal trends of improvement in water quality and biological conditions. If so, any required implementation in the future may be revised according to the best available science at that time.



The Department has a program to systematically collect additional nutrient data at the ecoregional reference sites used to develop the Cahaba TMDL nutrient target, in addition to other reference sites and candidate reference sites throughout Alabama. Adaptive management, in conjunction with the implementation schedule as determined by ADEM's NPDES permitting program, will allow the TMDL target to be validated or adjusted as necessary based on additional data that becomes available in the future.

The TMDL establishes a final instream TP target of 0.035 mg/L. The Department's WQB collects instream TP samples within the Cahaba River. From 2018 through 2023, the WQB collected 141 samples, of which 25 of those results showed a TP greater than 0.035 mg/L. Nine of those greater than 0.035 mg/L were collected in 2020. Since then, the number of results greater than 0.035 mg/L has declined, with only one result showing greater than 0.035 mg/L in 2022 and six in 2023.

Additionally, the TMDL endpoint to address the nutrient impairment is a growing season (April – October) TP median of 0.035 mg/L. Per the samples taken by the WQB from 2018 through 2023, all six growing season medians were less than 0.035 mg/L.

The Department's 2016 WQ monitoring plan for the Cahaba River included the following: sampling fish in May; performing a periphyton study in September; macroinvertebrate sampling in October; diurnal studies in both June and September. The summary of this study is as follows:

Water quality sampling in 2005 and 2016 show a distinct decrease in water column total phosphorus concentrations in the Cahaba River. Annual sampling at seven locations show total phosphorus concentrations to be meeting the instream target established by the Cahaba River Watershed Nutrient TMDL, with median total phosphorus concentrations at Cahaba River stations ranging from 14 µg/L to 24 µg/L in 2016.

During the 2002-2016 surveys of the Cahaba River, diatoms have consistently proved to be the most effective tool to document nutrient impacts to aquatic communities, and to link community conditions to nutrient concentrations. In the 2002-2005 surveys, the diatom community was dominated by species tolerant of nutrient enrichment. Results of the 2016 diatom community suggest that the community is responding to decreased total phosphorus concentrations with a shift to taxa intolerant of nutrient enrichment.

The decreased nutrient concentrations were not generally reflected in macroinvertebrate or fish community metric results. Both communities are less sensitive to nutrient enrichment issues. Conditions within these communities may reflect other impairments to the Cahaba River, such as siltation/habitat alteration.

As indicated in ADEM Admin. Code r. 335-6-6-.16(a)(2), the Department has the authority to establish a compliance schedule within the timeframe determined by the Director for implementation of an applicable TMDL. Based upon the facts presented to the Department as discussed above, the final compliance deadline for the TMDL limit of 0.043 mg/l has been modified and implemented in the permit for April 1, 2032.

Storm water runoff monitoring is being imposed by this permit based on 40 CFR Part 122. The designated outfall for storm water runoff monitoring is 006S. Storm water runoff is to be monitored annually.

#### Outfalls 0201 & 0202

Limits for Five Day Carbonaceous Biochemical Oxygen Demand (CBOD), Total Ammonia-Nitrogen (NH<sub>3</sub>-N), and Dissolved Oxygen (DO) were developed based on a Waste Load Allocation (WLA) model that was completed by ADEM's Water Quality Branch (WQB) on February 1, 2016. The monthly average limits for CBOD and NH<sub>3</sub>-N are 10.0 mg/L and 2.0 mg/L, respectively. The daily minimum DO limit is 7.0 mg/L.



### Outfalls 0301 & 0302

Limits for Five Day Carbonaceous Biochemical Oxygen Demand (CBOD), Total Ammonia-Nitrogen (NH<sub>3</sub>-N), and Dissolved Oxygen (DO) were developed based on Waste Load Allocation (WLA) models that were completed by ADEM's Water Quality Branch (WQB) on November 3, 2020. The monthly average limits for CBOD and NH<sub>3</sub>-N are 7.0 mg/l, and 2.0 mg/l, respectively. The daily minimum DO limit is 7.0 mg/L.

### Outfalls 0201, 0202, 0301, & 0302

The pH limits were developed in accordance with the water-use classification of the receiving streams. The daily minimum and daily maximum pH limits are 6.0 S.U. and 8.5 S.U., respectively. Monthly average and daily maximum Total Residual Chlorine (TRC) limits of 0.011 mg/l and 0.019 mg/l, respectively, are allowable based on the United States Environmental Protection Agency's (EPA's) recommended water quality values and on the current Toxicity Rationale, which considers available dilution in the receiving streams. In accordance with a letter dated August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/l shall be considered below detection for compliance purposes.

The imposed *E. coli* limits were determined based on the water-use classification of the receiving streams. Since both the UT to Gumsuck Branch and Gumsuck Branch are classified as Fish & Wildlife, the limits for May - October are 126 col/100ml (monthly average) and 298 col/100ml (daily maximum), while the limits for November - April are 548 col/100ml (monthly average) and 2507 col/100ml (daily maximum).

The monthly average TSS, TSS % removal, and CBOD % removal limits of 30.0 mg/l, 85.0% and 85.0%, respectively, are based on 40 CFR part 133.102 regarding Secondary Treatment.

This permit imposes monitoring for TKN and Nitrite plus Nitrate-Nitrogen (NO<sub>2</sub>+NO<sub>3</sub>-N) and winter monitoring (November - March) for TP. 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 additional nutrient limits on this discharge.

The Department completed a reasonable potential analysis (RPA) of the discharge based on laboratory data provided in the Permittee's application. The RPA indicates whether pollutants in treated effluent have the potential to contribute to excursions of Alabama's in-stream water quality standards. The facility's permit application indicates that the facility does not have any industry discharging to the WRRF. The Department also considers background data upstream of the point of discharge in the RPA; however, there is no available background data for this discharge. Based on the analytical data submitted by the Permittee, it does not appear that there is reasonable potential to cause in-stream water quality criteria exceedances at this time.

Because this is a major facility (design capacity greater than 1 MGD, chronic toxicity testing with two species (*Ceriodaphnia* and *Pimephales*) is being imposed on this permit. Toxicity testing is imposed for both survival and life-cycle impairment (i.e., growth and reproduction). Chronic toxicity at the IWC of 100 percent is required once per year during the month of November. If the toxicity tests of the effluent from Outfall 020 and/or 030 indicate chronic toxicity, then toxicity tests may be required to be conducted during the months of February, May, August and November.

The monitoring frequency for DO, pH, TSS, NH<sub>3</sub>-N, TP, TRC, *E. coli* and CBOD is twice per week for Outfalls 0201 and 0202 and thrice per week for Outfalls 0301 and 0302. The monitoring frequency for TKN and NO<sub>2</sub>-N/NO<sub>3</sub>-N is once per month. TSS % removal and CBOD % removal are to be calculated once per month. Flow is to be continuously monitored daily.



The UT to Gumsuck Branch is a Tier I stream and is not on the most recent EPA approved 303(d) list. The limits imposed in this permit are consistent with the Cahaba River Watershed Nutrient TMDL. This facility is also included in the Cahaba River Watershed Pathogens (E. coli) and the Cahaba River Siltation and Habitat Alteration Total Maximum Daily Loads (TMDLs), which were approved in August 2013. The pathogens limits imposed in the permit are consistent with Alabama's water quality standards and this discharge should not contribute to the pathogen impairment in the Cahaba River. The Siltation and Habitat Alteration TMDL indicates that TSS associated with WWTPs is typically comprised primarily of organic matter and is not considered to be significantly impacting the Cahaba River with respect to sediment impairment and was not included in the WLA of the TMDL. The facility's storm water discharge is consistent with the assumptions in the TMDLs and are not expected to contribute to the impairments. Additionally, the facility is required to develop and implement a Storm Water Pollution Prevention Plan, which should help minimize pollutants in the storm water.

Gumsuck Branch is a Tier II stream and is not on the most recent EPA approved 303(d) list. The limits imposed in this permit are consistent with the Cahaba River Watershed Nutrient TMDL. This facility is also included in the Cahaba River Watershed Pathogens (E. coli) and the Cahaba River Siltation and Habitat Alteration Total Maximum Daily Loads (TMDLs), which were approved in August 2013. The pathogens limits imposed in the permit are consistent with Alabama's water quality standards and this discharge should not contribute to the pathogen impairment in the Cahaba River. The Siltation and Habitat Alteration TMDL indicates that TSS associated with WWTPs is typically comprised primarily of organic matter and is not considered to be significantly impacting the Cahaba River with respect to sediment impairment and was not included in the WLA of the TMDL.

#### Outfalls 0201 & 0202

ADEM Administrative Rule 335-6-10-.12 requires applicants for 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 or expanded discharge to a Tier II water body, so the applicant is not required to demonstrate that the discharge is necessary for economic and social development.

#### Outfalls 0301 & 0302

Since the permit would allow a new discharge to a Tier II stream, the economic alternative analysis requirements of the anti-degradation policy (ADEM Administrative Code R.335-6-10-.04) apply. The permittee has submitted supporting documentation demonstrating that the proposed discharge to Gumsuck Branch provides certain social and economic benefits to the local community in the area.

Prepared by: Dustin Stokes

#### 5/22/2024 Revision:

The Permit Applicant and Location have been corrected on the rationale.

Prepared by: Dustin Stokes

# Waste Load Allocation Summary

## REQUEST INFORMATION

Request Number: 3241

From: Nic Caraway In Branch/Section Municipal  
Date Submitted: 7/21/2015 Date Required: 8/20/2015 FUND Code: 605

Date Permit application received by NPDES program

Receiving Waterbody: Gumsuck Branch UT

Previous Stream Name: Gumsuck Branch

Facility Name: Liberty Park WWTP (Name of Discharger-WQ will use to file)

Previous Discharger Name

River Basin: Cahaba Outfall Latitude: 33.473629 (decimal degrees)

\*County: Jefferson Outfall Longitude: -86.685753 (decimal degrees)

Permit Number: AL0067814 Permit Type: CONVERSION

Permit Status: Active

Type of Discharger: SEMIPUBLIC/PRIVATE

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

If yes, impacting dischargers names.

Impacting dischargers permit numbers.

Existing Discharge Design Flow: MGD  
Proposed Discharge Design Flow: 1.8 MGD  
Note: The flow rates given should be those requested for modeling.

Comments included

Information Verified By: JMD

Year File Was Created: 2015

Response ID Number: 1489

Lat/Long Method: GPS

12 Digit HUC Code: 031502020104

Use Classification: F&W

Site Visit Completed?  Yes  No

Date of Site Visit: 7/24/2015

Waterbody Impaired?

Date of WLA Response: 2/26/2016

Antidegradation  Yes  No

Approved TMDL?

Waterbody Tier Level: Tier I

Use Support Category: 3

Approval Date of TMDL

## Waste Load Allocation Information

Modeled Reach: 105.34 Miles Date of Allocation: 2/1/2016

Name of Model Used: SWQM/EPDR1V1 Allocation Type: Annual

Model Completed: Jessica Delgado Type of Model Used: Calibrated / Verified

Allocation Developed by: Water Quality Branch



# Waste Load Allocation Summary

	Conventional Parameters				Other Parameters			
	Qw		MGD		Qw		MGD	
	Qw	1.6	MGD	MGD	Qw	1.6	MGD	MGD
<b>Annual Effluent Limits</b>	Season		Season		Season		Season	
	From		From		From		From	
	Through		Through		Through		Through	
CBOD5	10				TP	0.043		
NH3-N	2	mg/L			TN			
TKN					TSS			
D.O.	7							

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

## Water Quality Characteristics Immediately Upstream of Discharge

Parameter	Summer		Winter	
CBODu	2	mg/l		mg/l
NH3-N	0.11	mg/l		mg/l
Temperature	28	°C		°C
pH	7	su		su

### Hydrology at Discharge Location

Drainage Area Qualifier	Drainage Area	sq mi	Method Used to Calculate
Estimated	0.039	sq mi	<5.0 sq mi - zero flow
	Stream 7Q10	0 cfs	75% of 7Q10
	Stream 1Q10	0 cfs	ADEM Estimate w/USGS Gage Data
	Stream 7Q2	0 cfs	ADEM Estimate w/USGS Gage Data
	Annual Average	0.07 cfs	

**Comments and/or Notations** Liberty Park currently has an HCR discharge. This WLA request and response is for a continuous discharge. Outfall location verified during site visit. The Cahaba River was included in the model reach; therefore, the Cahaba DO-EPDRIV1 was used to calculate limits. TP limit of 0.043 mg/L established by Cahaba Nutrient TMDL (2006).

# Waste Load Allocation Summary

## REQUEST INFORMATION

Request Number: 3721

From:  In Branch/Section:

Date Submitted:  Date Required:  FUND Code:

Date Permit application received by NPDES program:

Receiving Waterbody:

Previous Stream Name:

Facility Name:  (Name of Discharger-WQ will use to file)

Previous Discharger Name:

River Basin:  Outfall Latitude:  (decimal degrees)

\*County:  Outfall Longitude:  (decimal degrees)

Permit Number:  Permit Type:

Permit Status:

Type of Discharger:

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

If yes, impacting dischargers names.

Impacting dischargers permit numbers.

Existing Discharge Design Flow:  MGD  
Proposed Discharge Design Flow:  MGD

Note: The flow rates given should be those requested for modeling.

Comments included

Information Verified By:

Year File Was Created:

Response ID Number:

Lat/Long Method:

12 Digit HUC Code:

Use Classification:

Site Visit Completed?  Yes  No

Date of Site Visit:

Waterbody Impaired?

Date of WLA Response:

Antidegradation:  Yes  No

Approved TMDL?

Waterbody Tier Level:

Use Support Category:

Approval Date of TMDL:

## Waste Load Allocation Information

Modeled Reach Length:  Miles

Date of Allocation:

Name of Model Used:

Allocation Type:

Model Completed by:

Type of Model Used:

Allocation Developed by:

# Waste Load Allocation Summary

	Conventional Parameters				Other Parameters			
	Qw	MGD	Qw	MGD	Qw 1.15	MGD	Qw	MGD
<b>Annual Effluent Limits</b>	Season		Season		Season Summer		Season	
	From		From		From Apr		From	
	Through		Through		Through Oct		Through	
CBOD5	7	mg/L	CBOD5		TP	0.043	mg/L	TP
NH3-N	2	mg/L	NH3-N		TN			TN
TKN			TKN		TSS			TSS
D.O.	7	mg/L	D.O.					

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

Water Quality Characteristics Immediately Upstream of Discharge					
Parameter	Summer		Winter		
CBODu	2	mg/l			mg/l
NH3-N	0.11	mg/l			mg/l
Temperature	28	°C			°C
pH	7	su			su

### Hydrology at Discharge Location

Drainage Area Qualifier	Drainage Area		Method Used to Calculate	
	Value	Unit	Value	Method
Exact	0.48	sq mi	<5.0 sq mi	Bingham Equation
	0	cfs	<5.0 sq mi	Bingham Equation
	0	cfs	<5.0 sq mi	Bingham Equation
	0	cfs	<5.0 sq mi	Bingham Equation
	0.768	cfs		USACE Map

**Comments and/or Notations** | The facility currently discharges to an Unnamed Tributary to Gumsuck Branch and is proposing to move the discharge to Gumsuck Branch.

# Waste Load Allocation Summary

## REQUEST INFORMATION

Request Number: 3721

**From:** Dustin Stokes **In Branch/Section:** Municipal

**Date Submitted:** 7/21/2020 **Date Required:** 8/20/2020 **FUND Code:** 605

Date Permit application received by NPDES program

**Receiving Waterbody:** Gumsuck Branch

**Previous Stream Name:** Gumsuck Branch

**Facility Name:** Liberty Park WWTP (Name of Discharger-WQ will use to file)

**Previous Discharger Name:**

**River Basin:** Cahaba **Outfall Latitude:** 33.483894 (decimal degrees)

**\*County:** Jefferson **Outfall Longitude:** -86.676139 (decimal degrees)

**Permit Number:** AL0067814 **Permit Type:** Expansion and Permit Modification

**Permit Status:** Active

**Type of Discharger:** SEMIPUBLIC/PRIVATE

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

**If yes, impacting dischargers names.**

**Impacting dischargers permit numbers.**

<b>Existing Discharge Design Flow</b>	1.15	MGD	<b>Note: The flow rates given should be those requested for modeling.</b>
<b>Proposed Discharge Design Flow</b>	1.6	MGD	

**Comments included:**

**Information Verified By:** NC **Year File Was Created:** 2020

**Response ID Number:** 1780

**Lat/Long Method:** GPS

**12 Digit HUC Code:** 031502020104

**Use Classification:** F&W

**Site Visit Completed?**

**Date of Site Visit:** 10/7/2020

**Waterbody Impaired?**

**Date of WLA Response:** 11/13/2020

**Antidegradation:**  Yes  No

**Approved TMDL?**

**Waterbody Tier Level:** Tier II

**Use Support Category:** 3

**Approval Date of TMDL:** 10/26/2006

## Waste Load Allocation Information

**Modeled Reach Length:** 1.37 **Miles** **Date of Allocation:** 11/3/2020

**Name of Model Used:** SWQM **Allocation Type:** Annual

**Model Completed by:** Nicholas Caraway **Type of Model Used:** Desk-top

**Allocation Developed by:** Water Quality Branch



# Waste Load Allocation Summary

	Conventional Parameters				Other Parameters				
	Qw	MGD	Qw	MGD	Qw	1.6	MGD	Qw	MGD
<b>Annual Effluent Limits</b>	Season		Season		Season		Season		
	From		From		From		From		
	Through		Through		Through		Through		
CBOD5	7	mg/L	CBOD5		TP	0.043	mg/L	TP	
NH3-N	2	mg/L	NH3-N		TN			TN	
TKN			TKN		TSS			TSS	
D.O.	7	mg/L	D.O.						

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

Water Quality Characteristics Immediately Upstream of Discharge					
Parameter	Summer		Winter		
CBODu	2	mg/l			mg/l
NH3-N	0.11	mg/l			mg/l
Temperature	28	°C			°C
pH	7	su			su

### Hydrology at Discharge Location

Drainage Area Qualifier	Drainage Area	Value	Unit	Method Used to Calculate
Exact	Drainage Area	0.48	sq mi	<5.0 sq mi - Bingham Equation
	Stream 7Q10	0	cfs	<5.0 sq mi - Bingham Equation
	Stream 1Q10	0	cfs	<5.0 sq mi - Bingham Equation
	Stream 7Q2	0	cfs	<5.0 sq mi - Bingham Equation
	Annual Average	0.768	cfs	USACE Map

**Comments and/or Notations** | The facility currently discharges to an Unnamed Tributary to Gumsuck Branch and is proposing to move the discharge to Gumsuck Branch.

## TOXICITY AND DISINFECTION RATIONALE

Facility Name:	<b>Liberty Park WRRF</b>	
NPDES Permit Number:	<b>AL0067814</b>	
Receiving Stream:	<b>UT to Gumsuck Branch</b>	
Facility Design Flow (Q <sub>w</sub> ):	<b>1.150 MGD</b>	Outfall 0201
Receiving Stream 7Q <sub>10</sub> :	<b>0.000 cfs</b>	
Receiving Stream 1Q <sub>10</sub> :	<b>0.000 cfs</b>	
Winter Headwater Flow (WHF):	<b>0.00 cfs</b>	
Summer Temperature for CCC:	<b>28 deg. Celsius</b>	
Winter Temperature for CCC:	<b>28 deg. Celsius</b>	
Headwater Background NH <sub>3</sub> -N Level:	<b>0.11 mg/l</b>	
Receiving Stream pH:	<b>7.0 s.u.</b>	
Headwater Background FC Level (summer):	<b>N/A.</b>	<b>(Only applicable for facilities with diffusers.)</b>
(winter)	<b>N/A.</b>	

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

$$\text{Stream Dilution Ratio (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\%$$

### 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.

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 100.00\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

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 NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>
Allowable Winter Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 2.5 \text{ mg/l NH}_3\text{-N at 7Q10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= \text{N/A.} \end{aligned}$$

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 NH<sub>3</sub>-N limit</u>	<u>Toxicity-based NH<sub>3</sub>-N limit</u>
Summer	<b>2.00 mg/l NH<sub>3</sub>-N</b>	<b>2.50 mg/l NH<sub>3</sub>-N</b>
Winter	<b>N/A.</b>	<b>N/A.</b>

**Summer: The DO based limit of 2.00 mg/l NH<sub>3</sub>-N applies.**

**Winter limits are not applicable.**

**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**

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\% \quad \text{Note: This number will be rounded up for toxicity testing purposes.}$$

**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 based on meeting stream standards at the point of discharge.**

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

**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:	0.011 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.019 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: Dustin Stokes Date: 1/31/2024

## TOXICITY AND DISINFECTION RATIONALE

Facility Name:	<b>Liberty Park WRRF</b>	
NPDES Permit Number:	<b>AL0067814</b>	
Receiving Stream:	<b>UT to Gumsuck Branch</b>	
Facility Design Flow (Q <sub>w</sub> ):	<b>1.600 MGD</b>	Outfall 0202
Receiving Stream 7Q <sub>10</sub> :	<b>0.000 cfs</b>	
Receiving Stream 1Q <sub>10</sub> :	<b>0.000 cfs</b>	
Winter Headwater Flow (WHF):	<b>0.00 cfs</b>	
Summer Temperature for CCC:	<b>28 deg. Celsius</b>	
Winter Temperature for CCC:	<b>28 deg. Celsius</b>	
Headwater Background NH <sub>3</sub> -N Level:	<b>0.11 mg/l</b>	
Receiving Stream pH:	<b>7.0 s.u.</b>	
Headwater Background FC Level (summer):	<b>N/A.</b>	<b>(Only applicable for facilities with diffusers.)</b>
(winter)	<b>N/A.</b>	

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

$$\text{Stream Dilution Ratio (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\%$$

### AMMONIA TOXICITY LIMITATIONS

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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.

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 100.00\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

$$\begin{aligned} \text{Criterion Maximum Concentration (CMC):} & \quad \text{CMC} = 0.411 / (1 + 10^{(7.204 - \text{pH})}) + 58.4 / (1 + 10^{(\text{pH} - 7.204)}) \\ \text{Criterion Continuous Concentration (CCC):} & \quad \text{CCC} = [0.0577 / (1 + 10^{(7.688 - \text{pH})}) + 2.487 / (1 + 10^{(\text{pH} - 7.688)})] * \text{Min}[2.85, 1.45 * 10^{(0.028 * (25 - T))}] \end{aligned}$$

	<u>CMC</u>	<u>CCC</u>
Allowable Summer Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>
Allowable Winter Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 2.5 \text{ mg/l NH}_3\text{-N at 7Q}_{10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= \text{N/A.} \end{aligned}$$

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 NH<sub>3</sub>-N limit</u>	<u>Toxicity-based NH<sub>3</sub>-N limit</u>
Summer	<b>2.00 mg/l NH<sub>3</sub>-N</b>	<b>2.50 mg/l NH<sub>3</sub>-N</b>
Winter	<b>N/A.</b>	<b>N/A.</b>

**Summer: The DO based limit of 2.00 mg/l NH<sub>3</sub>-N applies.**

**Winter limits are not applicable.**



**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**

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\% \quad \text{Note: This number will be rounded up for toxicity testing purposes.}$$

**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 based on meeting stream standards at the point of discharge.**

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
<b><u>E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)</u></b>		
Monthly limit as monthly average (November through April):	548	<b>548</b>
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Monthly limit as geometric mean (November through April):	Not applicable	<b>Not applicable</b>
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**MAXIMUM ALLOWABLE CHLORINATION LIMITS**

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Maximum allowable TRC in effluent:	0.011 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.019 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: Dustin Stokes Date: 1/31/2024

## TOXICITY AND DISINFECTION RATIONALE

Facility Name:	<b>Liberty Park WRRF</b>	
NPDES Permit Number:	<b>AL0067814</b>	
Receiving Stream:	<b>Gumsuck Branch</b>	
Facility Design Flow (Q <sub>w</sub> ):	<b>1.150 MGD</b>	Outfall 0301
Receiving Stream 7Q <sub>10</sub> :	<b>0.000 cfs</b>	
Receiving Stream 1Q <sub>10</sub> :	<b>0.000 cfs</b>	
Winter Headwater Flow (WHF):	<b>0.00 cfs</b>	
Summer Temperature for CCC:	<b>28 deg. Celsius</b>	
Winter Temperature for CCC:	<b>28 deg. Celsius</b>	
Headwater Background NH <sub>3</sub> -N Level:	<b>0.11 mg/l</b>	
Receiving Stream pH:	<b>7.0 s.u.</b>	
Headwater Background FC Level (summer):	<b>N./A.</b>	<b>(Only applicable for facilities with diffusers.)</b>
(winter)	<b>N./A.</b>	

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

$$\text{Stream Dilution Ratio (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\%$$

### 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*.

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

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 100.00\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

$$\begin{aligned} \text{Criterion Maximum Concentration (CMC):} & \quad \text{CMC} = 0.411 / (1 + 10^{(7.204 - \text{pH})}) + 58.4 / (1 + 10^{(\text{pH} - 7.204)}) \\ \text{Criterion Continuous Concentration (CCC):} & \quad \text{CCC} = [0.0577 / (1 + 10^{(7.688 - \text{pH})}) + 2.487 / (1 + 10^{(\text{pH} - 7.688)})] * \text{Min}[2.85, 1.45 * 10^{(0.028 * (25 - T))}] \end{aligned}$$

	<u>CMC</u>	<u>CCC</u>
Allowable Summer Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>
Allowable Winter Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 2.5 \text{ mg/l NH}_3\text{-N at 7Q}_{10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= \text{N./A.} \end{aligned}$$

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 NH<sub>3</sub>-N limit</u>	<u>Toxicity-based NH<sub>3</sub>-N limit</u>
Summer	<b>2.00 mg/l NH<sub>3</sub>-N</b>	<b>2.50 mg/l NH<sub>3</sub>-N</b>
Winter	<b>N./A.</b>	<b>N./A.</b>

**Summer: The DO based limit of 2.00 mg/l NH<sub>3</sub>-N applies.**

**Winter limits are not applicable.**

**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**

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\% \quad \text{Note: This number will be rounded up for toxicity testing purposes.}$$

**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 based on meeting stream standards at the point of discharge.**

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

**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:	0.011 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.019 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: Dustin Stokes Date: 1/31/2024

## TOXICITY AND DISINFECTION RATIONALE

Facility Name:	<b>Liberty Park WRRF</b>	
NPDES Permit Number:	<b>AL0067814</b>	
Receiving Stream:	<b>Gumsuck Branch</b>	
Facility Design Flow (Q <sub>w</sub> ):	<b>1.600 MGD</b>	Outfall 0302
Receiving Stream 7Q <sub>10</sub> :	<b>0.000 cfs</b>	
Receiving Stream 1Q <sub>10</sub> :	<b>0.000 cfs</b>	
Winter Headwater Flow (WHF):	<b>0.00 cfs</b>	
Summer Temperature for CCC:	<b>28 deg. Celsius</b>	
Winter Temperature for CCC:	<b>28 deg. Celsius</b>	
Headwater Background NH <sub>3</sub> -N Level:	<b>0.11 mg/l</b>	
Receiving Stream pH:	<b>7.0 s.u.</b>	
Headwater Background FC Level (summer):	<b>N./A.</b>	<b>(Only applicable for facilities with diffusers.)</b>
(winter)	<b>N./A.</b>	

The Stream Dilution Ratio (SDR) is calculated using the 7Q<sub>10</sub> for all stream classifications.

$$\text{Stream Dilution Ratio (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\%$$

### 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*.

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

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 100.00\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

$$\begin{aligned} \text{Criterion Maximum Concentration (CMC):} & \quad \text{CMC} = 0.411 / (1 + 10^{(7.204 - \text{pH})}) + 58.4 / (1 + 10^{(\text{pH} - 7.204)}) \\ \text{Criterion Continuous Concentration (CCC):} & \quad \text{CCC} = [0.0577 / (1 + 10^{(7.688 - \text{pH})}) + 2.487 / (1 + 10^{(\text{pH} - 7.688)})] * \text{Min}[2.85, 1.45 * 10^{(0.028 * (25 - T))}] \end{aligned}$$

	<u>CMC</u>	<u>CCC</u>
Allowable Summer Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>
Allowable Winter Instream NH <sub>3</sub> -N:	<b>36.09 mg/l</b>	<b>2.48 mg/l</b>

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 2.5 \text{ mg/l NH}_3\text{-N at 7Q}_{10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= \text{N./A.} \end{aligned}$$

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 NH<sub>3</sub>-N limit</u>	<u>Toxicity-based NH<sub>3</sub>-N limit</u>
Summer	<b>2.00 mg/l NH<sub>3</sub>-N</b>	<b>2.50 mg/l NH<sub>3</sub>-N</b>
Winter	<b>N./A.</b>	<b>N./A.</b>

**Summer: The DO based limit of 2.00 mg/l NH<sub>3</sub>-N applies.**

**Winter limits are not applicable.**

**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).
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$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\% \quad \text{Note: This number will be rounded up for toxicity testing purposes.}$$

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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.

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**(Non-coastal limits apply)**  
 Applicable Stream Classification: **Fish & Wildlife**  
 Disinfection Type: **Chlorination**  
 Limit calculation method: **Limits based on meeting stream standards at the point of discharge.**

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

**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:	0.011 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.019 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: Dustin Stokes Date: 1/31/2024

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$						Enter Max	Enter Avg	Partition
ID	Pollutant	Carcinogen Yes*	Type	Background	Background	Discharge as	Discharge as	
				from upstream source (C <sub>U1</sub> )	from upstream source (C <sub>U2</sub> )			reported by Applicant (C <sub>d</sub> ) Max
				µg/l Daily Max	µg/l Monthly Ave	µg/l	µg/l	(Stream / Lake)
1	Arsimony		Metals	0	0	0	0	0
2	Arsenic***	YES	Metals	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	
4	Cadmium**		Metals	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	
7	Copper**		Metals	0	0	0	0	0.388
8	Lead**		Metals	0	0	0	0	0.206
9	Mercury**		Metals	0	0	0.00143	0.00094	0.302
10	Nickel**		Metals	0	0	0	1.5	0.505
11	Selenium		Metals	0	0	0	0	
12	Silver		Metals	0	0	0	0	
13	Thallium		Metals	0	0	0	0	
14	Zinc**		Metals	0	0	0	17.8	0.330
15	Cyanide		Metals	0	0	0	0	
16	Total Phenolic Compounds		Metals	0	0	0	91	
17	Hardness (As CaCO3)		Metals	0	0	0	147000	
18	Acrolein		VOC	0	0	0	0	
19	Acrylonitrile*	YES	VOC	0	0	0	0	
20	Aldrin	YES	VOC	0	0	0	0	
21	Benzene*	YES	VOC	0	0	0	0	
22	Bromoform*	YES	VOC	0	0	0	0	
23	Carbon Tetrachloride*	YES	VOC	0	0	0	0	
24	Chlordane	YES	VOC	0	0	0	0	
25	Chlorobenzene		VOC	0	0	0	0	
26	Chlorodibromo-Methane*	YES	VOC	0	0	0	0	
27	Chloroethane		VOC	0	0	0	0	
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	
29	Chloroform*	YES	VOC	0	0	0	0	
30	4,4'-DDO	YES	VOC	0	0	0	0	
31	4,4'-DDE	YES	VOC	0	0	0	0	
32	4,4'-DDT	YES	VOC	0	0	0	0	
33	Dichlorobromo-Methane*	YES	VOC	0	0	0	0	
34	1,1-Dichloroethane		VOC	0	0	0	0	
35	1,2-Dichloroethane*	YES	VOC	0	0	0	0	
36	Trans-1,2-Dichloro-Ethylene		VOC	0	0	0	0	
37	1,1-Dichloroethylene*	YES	VOC	0	0	0	0	
38	1,2-Dichloropropane		VOC	0	0	0	0	
39	1,3-Dichloro-Propylene		VOC	0	0	0	0	
40	Dieldrin	YES	VOC	0	0	0	0	
41	Ethylbenzene		VOC	0	0	0	0	
42	Methyl Bromide		VOC	0	0	0	0	
43	Methyl Chloride		VOC	0	0	0	0	
44	Methylene Chloride*	YES	VOC	0	0	0	0	
45	1,1,1,2-Tetrachloro-Ethane*	YES	VOC	0	0	0	0	
46	Tetrachloro-Ethylene*	YES	VOC	0	0	0	0	
47	Toluene		VOC	0	0	0	0	
48	Toxaphene	YES	VOC	0	0	0	0	
49	Tributyltine (TBT)	YES	VOC	0	0	0	0	
50	1,1,1-Trichloroethane		VOC	0	0	0	0	
51	1,1,1,2-Trichloroethane*	YES	VOC	0	0	0	0	
52	Trichloroethylene*	YES	VOC	0	0	0	0	
53	Vinyl Chloride*	YES	VOC	0	0	0	0	
54	2-Chloro-N-Cresol		Acids	0	0	0	0	
55	2-Chlorophenol		Acids	0	0	0	0	
56	2,4-Dichlorophenol		Acids	0	0	0	0	
57	2,4-Dimethylphenol		Acids	0	0	0	0	
58	4,6-Dinitro-O-Cresol		Acids	0	0	0	0	
59	2,4-Dinitrophenol		Acids	0	0	0	0	
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	
62	2-Nitrophenol		Acids	0	0	0	0	
63	4-Nitrophenol		Acids	0	0	0	0	
64	Pentachlorophenol*	YES	Acids	0	0	0	0	
65	Phenol		Acids	0	0	0	41	14
66	2,4,6-Trichlorophenol*	YES	Acids	0	0	0	0	
67	Acenaphthene		Bases	0	0	0	0	
68	Acenaphthylene		Bases	0	0	0	0	
69	Anthracene		Bases	0	0	0	0	
70	Benidine		Bases	0	0	0	0	
71	Benzo(A)Anthracene*	YES	Bases	0	0	0	0	
72	Benzo(A)Pyrene	YES	Bases	0	0	0	0	
73	3,4-Benzo-Fluoranthene		Bases	0	0	0	0	
74	Benzo(GH)Perylene		Bases	0	0	0	0	
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	
77	Bis (2-Chloroethyl)-Ether*	YES	Bases	0	0	0	0	
78	Bis (2-Chloro-Propyl) Ether		Bases	0	0	0	0	
79	Bis (2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	
82	2-Chloronaphthalene		Bases	0	0	0	0	
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	
84	Chrysene*	YES	Bases	0	0	0	0	
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	
87	Dibenzo(A,H)Anthracene*	YES	Bases	0	0	0	0	
88	1,2-Dichlorobenzene		Bases	0	0	0	0	
89	1,3-Dichlorobenzene		Bases	0	0	0	0	
90	1,4-Dichlorobenzene		Bases	0	0	0	0	
91	3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	
92	Diethyl Phthalate		Bases	0	0	0	0	
93	Dimethyl Phthalate		Bases	0	0	0	0	
94	2,4-Dinitrotoluene*	YES	Bases	0	0	0	0	
95	2,6-Dinitrotoluene		Bases	0	0	0	0	
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	
97	Endosulfan (alpha)	YES	Bases	0	0	0	0	
98	Endosulfan (beta)	YES	Bases	0	0	0	0	
99	Endosulfan sulfate	YES	Bases	0	0	0	0	
100	Endrin	YES	Bases	0	0	0	0	
101	Endrin Aldehyde	YES	Bases	0	0	0	0	
102	Fluoranthene		Bases	0	0	0	0	
103	Fluorene		Bases	0	0	0	0	
104	Heptachlor	YES	Bases	0	0	0	0	
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	
106	Hexachlorobenzene*	YES	Bases	0	0	0	0	
107	Hexachlorobutadiene*	YES	Bases	0	0	0	0	
108	Hexachlorocyclohexan (alpha)	YES	Bases	0	0	0	0	
109	Hexachlorocyclohexan (beta)	YES	Bases	0	0	0	0	
110	Hexachlorocyclohexan (gamma)	YES	Bases	0	0	0	0	
111	Hexachlorocyclopentadiene		Bases	0	0	0	0	
112	Hexachloroethane		Bases	0	0	0	0	
113	Indeno(1,2,3-CK)Pyrene*	YES	Bases	0	0	0	0	
114	Isophorone		Bases	0	0	0	0	
115	Isophthalene		Bases	0	0	0	0	
116	Nitrobenzene		Bases	0	0	0	0	
117	N-Nitrosodi-N-Propylamine*	YES	Bases	0	0	0	0	
118	N-Nitrosodi-N-Methylamine*	YES	Bases	0	0	0	0	
119	N-Nitrosodi-N-Phenylamine*	YES	Bases	0	0	0	0	
120	PCB-1016	YES	Bases	0	0	0	0	
121	PCB-1221	YES	Bases	0	0	0	0	
122	PCB-1232	YES	Bases	0	0	0	0	
123	PCB-1242	YES	Bases	0	0	0	0	
124	PCB-1248	YES	Bases	0	0	0	0	
125	PCB-1254	YES	Bases	0	0	0	0	
126	PCB-1260	YES	Bases	0	0	0	0	
127	Phenanthrene		Bases	0	0	0	0	
128	Pyrene		Bases	0	0	0	0	
129	1,2,4-Trichlorobenzene		Bases	0	0	0	0	

1.15	Enter Q <sub>d</sub> = wastewater discharge flow from facility (MGD)
1.7791335	Q <sub>d</sub> = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q <sub>d2</sub> = background stream flow in MGD above point of discharge
0	Q <sub>d2</sub> = background stream flow from upstream source (cfs)
0	Enter 7Q10, Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter or estimated, 1Q10, Q <sub>s</sub> = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
0.07	Enter Mean Annual Flow, Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter 7Q2, Q <sub>s</sub> = background stream flow in cfs above point of discharge (For LWP class streams)
Enter to Left	Enter C <sub>s</sub> = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q <sub>d</sub> + Q <sub>d2</sub> - Q <sub>s</sub>	Q <sub>s</sub> = resultant in-stream flow, after discharge
Calculated on other	C <sub>s</sub> = 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 su	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

February 16, 2024

Freshwater F&W classification		Freshwater Acute (µg/l) C <sub>a</sub> = 1Q10										Freshwater Chronic (µg/l) C <sub>c</sub> = 7Q10					Human Health Consumption Fish only (µg/l) Carcinogen C <sub>a</sub> = Annual Average Non-Carcinogen C <sub>c</sub> = 7Q10				
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C <sub>d2</sub> ) Daily Max	Max Daily Discharge as reported by Applicant (C <sub>app</sub> )	Water Quality Criteria (C <sub>w</sub> )	Draft Permit Limit (C <sub>pl</sub> )	20% of Draft Permit Limit	RP?	Background from upstream source (C <sub>d2</sub> ) Monthly Ave	Avg Daily Discharge as reported by Applicant (C <sub>app</sub> )	Water Quality Criteria (C <sub>w</sub> )	Draft Permit Limit (C <sub>pl</sub> )	20% of Draft Permit Limit	RP?	Water Quality Criteria (C <sub>w</sub> )	Draft Permit Limit (C <sub>pl</sub> )	20% of Draft Permit Limit	RP?		
																				Freshwater Acute (µg/l) C <sub>a</sub> = 1Q10	
1	Antimony			0	0	0	0	No	0	0	0	0	0	No	0.72E+02	3.73E+02	7.47E+01	No			
2	Arsenic		YES	0	0	592.334	592.334	118.467	No	0	0	261.324	261.324	52.265	No	3.03E-01	3.15E-01	6.30E-02	No		
3	Beryllium			0	0	0	0	0		0	0	0	0	0							
4	Cadmium			0	0	4.347	4.347	0.869	No	0	0	0.644	0.644	0.129	No						
5	Chromium Chromium III			0	0	1537.913	1537.913	307.583	No	0	0	200.051	200.051	40.010	No						
6	Chromium Chromium VI			0	0	16.000	16.000	3.200	No	0	0	11.000	11.000	2.200	No						
7	Copper			0	0	18.026	18.026	3.605	No	0	0	12.766	12.766	2.553	No						
8	Lead			0	0	146.291	146.291	29.258	No	0	0	5.701	5.701	1.140	No						
9	Mercury			0	0.00143	2.400	2.400	0.480	No	0	0.00094	57.292	57.292	11.458	No	4.24E-02	4.24E-02	8.48E-03	No		
10	Nickel			0	1.5	515.824	515.824	103.165	No	0	0	5.000	5.000	1.000	No	2.43E+03	2.43E+03	4.86E+02	No		
11	Selenium			0	0	20.000	20.000	4.000	No	0	0	0	0	0							
12	Silver			0	0	0.976	0.976	0.195	No	0	0	0	0	0							
13	Thallium			0	0	0	0	0		0	0	0	0	0							
14	Zinc			0	17.8	197.369	197.369	39.474	No	16.7	198.683	199.983	39.797	No	1.49E+04	1.49E+04	2.98E+03	No			
15	Cyanide			0	0	22.000	22.000	4.400	No	0	0	5.200	5.200	1.040	No	6.03E+03	6.03E+03	1.20E+03	No		
16	Tejal Phenolic Compounds			0	41					14											
17	Hardness (As CaCO3)			0	147000					134000											
18	Acrolein			0	0																
19	Acrylonitrile		YES	0	0																
20	Aldrin		YES	0	0	3.000	3.000	0.600	No	0	0										
21	Benzene		YES	0	0					0											
22	Bromoforn		YES	0	0					0											
23	Carbon Tetrachloride		YES	0	0					0											
24	Chloroac		YES	0	0	2.400	2.400	0.480	No	0	0.0043	0.004	0.001	No	4.73E+04	4.73E+04	9.46E+03	No			
25	Chlorobenzene			0	0					0											
26	Chlorobenzene-Methane		YES	0	0					0											
27	Chloroethane			0	0					0											
28	2-Chloro-Ethylvinyl Ether			0	0					0											
29	Chloroform		YES	0	0					0											
30	4,4'- DDD		YES	0	0					0											
31	4,4'- DDE		YES	0	0					0											
32	4,4'- DDT		YES	0	0	1.100	1.100	0.220	No	0	0.001	0.001	0.000	No	1.28E+04	1.28E+04	2.56E+03	No			
33	Dichlorobromo-Methane		YES	0	0					0											
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	0.240	0.240	0.048	No	0	0.096	0.096	0.011	No	3.12E+05	3.12E+05	6.24E+04	No			
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	0.730	0.730	0.146	No	0	0.0002	0.000	0.000	No	6.72E+03	6.72E+03	1.34E+03	No			
49	Tributyltin (TBT)		YES	0	0	0.460	0.460	0.092	No	0	0.072	0.072	0.014	No	1.62E+04	1.62E+04	3.24E+03	No			
50	1,1,1-Trichloroethane		YES	0	0					0											
51	1,1,2-Trichloroethane		YES	0	0					0											
52	Trichloroethylene		YES	0	0					0											
53	Vinyl Chloride		YES	0	0					0											
54	P-Chloro-N-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	6.723	6.723	1.345	No	0	6.663	6.663	1.339	No	1.77E+00	1.84E+00	3.67E-01	No			
65	Phenol			0	41					14											
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	Benzo(a)anthracene		YES	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(g)herylene			0	0					0											
75	Benzo(k)fluoranthene			0	0					0											
76	Bis (2-Chloroethoxy) Methane			0	0					0											
77	Bis (2-Chloroethoxy) Ether		YES	0	0					0											
78	Bis (2-Chloroisopropyl) Ether			0	0					0											
79	Bis (2-Ethoxy) Phthalate		YES	0	0					0											
80	4-Bromophenyl Phenyl Ether			0	0					0											
81	Butyl Benzyl Phthalate			0	0					0											
82	2-Chloronaphthalene			0	0					0											
83	2-Chlorophenyl Phenyl Ether			0	0					0											
84	Chrysene		YES	0	0					0											
85	Di-N-Buryl 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	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					0											
95	2,6-Dinitrotoluene			0	0					0											
96	1,2-Diphenyldiazine			0	0					0											
97	Endosulfan (alpha)		YES	0	0	0.22	0.220	0.044	No	0	0.056	0.056	0.011	No	6.19E+01	5.39E+01	1.08E+01	No			
98	Endosulfan (beta)		YES	0	0	0.22	0.220	0.044	No	0	0.056	0.056	0.011	No	6.19E+01	5.39E+01	1.08E+01	No			
99	Endosulfan sulfate		YES	0	0					0											
100	Endrin		YES	0	0	0.066	0.066	0.017	No	0	0.069	0.036	0.007	No	6.19E+01	5.39E+01	1.08E+01	No			
101	Endrin Aldehyde		YES	0	0					0											
102	Fluoranthene			0	0					0											
103	Fluorene			0</																	

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$

ID	Pollutant	Carcinogen Yes*	Type	Background		Background Instream (C <sub>s</sub> ) Daily Monthly Ave	Background Instream (C <sub>d</sub> ) Monthly Ave	Enter Max Daily Discharge as reported by Applicant (C <sub>d</sub> ) Max	Enter Avg Daily Discharge as reported by Applicant (C <sub>d</sub> ) Ave	Partition Coefficient (Stream / Lake)
				from upstream source (C <sub>d2</sub> ) Daily Mix	from upstream source (C <sub>d2</sub> ) Monthly Ave					
1	Antimony		Metals	0	0	0	0	0	-	
2	Arsenic**	YES	Metals	0	0	0	0	0	0.574	
3	Beryllium		Metals	0	0	0	0	0	-	
4	Caesium**		Metals	0	0	0	0	0	0.236	
5	Chromium / Chromium III**		Metals	0	0	0	0	0	0.210	
6	Chromium / Chromium VI**		Metals	0	0	0	0	0	-	
7	Copper**		Metals	0	0	0	0	0	0.368	
8	Lead**		Metals	0	0	0	0	0	0.205	
9	Mercury**		Metals	0	0	0	0	0.00143	0.00094	
10	Nickel**		Metals	0	0	0	0	1.5	1.4	
11	Selenium		Metals	0	0	0	0	0	-	
12	Silver		Metals	0	0	0	0	0	-	
13	Thallium		Metals	0	0	0	0	0	-	
14	Zinc**		Metals	0	0	0	0	17.8	16.7	
15	Cyanide		Metals	0	0	0	0	0	0.330	
16	Total Phenolic Compounds		Metals	0	0	0	0	41	14	
17	Hardness (As CaCO3)		Metals	0	0	0	0	147000	134000	
18	Acrolein		VOC	0	0	0	0	0	-	
19	Acrylonitrile*	YES	VOC	0	0	0	0	0	-	
20	Aldrin	YES	VOC	0	0	0	0	0	-	
21	Benzene*	YES	VOC	0	0	0	0	0	-	
22	Bromofom*	YES	VOC	0	0	0	0	0	-	
23	Carbon Tetrachloride*	YES	VOC	0	0	0	0	0	-	
24	Chlordane	YES	VOC	0	0	0	0	0	-	
25	Chlorobenzene		VOC	0	0	0	0	0	-	
26	Chlorodibromo-Methane*	YES	VOC	0	0	0	0	0	-	
27	Chloroethane		VOC	0	0	0	0	0	-	
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	0	-	
29	Chloroform*	YES	VOC	0	0	0	0	0	-	
30	4,4'-DDD	YES	VOC	0	0	0	0	0	-	
31	4,4'-DDE	YES	VOC	0	0	0	0	0	-	
32	4,4'-DDT	YES	VOC	0	0	0	0	0	-	
33	Dichlorobromo-Methane*	YES	VOC	0	0	0	0	0	-	
34	1,1-Dichloroethane		VOC	0	0	0	0	0	-	
35	1,2-Dichloroethane*	YES	VOC	0	0	0	0	0	-	
36	Trans-1,2-Dichloro-Ethylene		VOC	0	0	0	0	0	-	
37	1,1-Dichloroethylene*	YES	VOC	0	0	0	0	0	-	
38	1,2-Dichloropropane		VOC	0	0	0	0	0	-	
39	1,3-Dichloro-Propylene		VOC	0	0	0	0	0	-	
40	Dieldrin	YES	VOC	0	0	0	0	0	-	
41	Ethylbenzene		VOC	0	0	0	0	0	-	
42	Methyl Bromide		VOC	0	0	0	0	0	-	
43	Methyl Chloride		VOC	0	0	0	0	0	-	
44	Methylene Chloride*	YES	VOC	0	0	0	0	0	-	
45	1,1,2,2-Tetrachloro-Ethane*	YES	VOC	0	0	0	0	0	-	
46	Tetrachloro-Ethylene*	YES	VOC	0	0	0	0	0	-	
47	Toluene		VOC	0	0	0	0	0	-	
48	Toxaphene	YES	VOC	0	0	0	0	0	-	
49	Trisbutyltine (TBT)	YES	VOC	0	0	0	0	0	-	
50	1,1,1-Trichloroethane		VOC	0	0	0	0	0	-	
51	1,1,2-Trichloroethane*	YES	VOC	0	0	0	0	0	-	
52	Trichloroethylene*	YES	VOC	0	0	0	0	0	-	
53	Vinyl Chloride*	YES	VOC	0	0	0	0	0	-	
54	p-Chloro-N-Cresol		Acids	0	0	0	0	0	-	
55	2-Chlorophenol		Acids	0	0	0	0	0	-	
56	2,4-Dichlorophenol		Acids	0	0	0	0	0	-	
57	2,4-Dimethylphenol		Acids	0	0	0	0	0	-	
58	4,6-Dinitro-O-Cresol		Acids	0	0	0	0	0	-	
59	2,4-Dinitrophenol		Acids	0	0	0	0	0	-	
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0	-	
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0	-	
62	2-Nitrophenol		Acids	0	0	0	0	0	-	
63	4-Nitrophenol		Acids	0	0	0	0	0	-	
64	Pentachlorophenol*	YES	Acids	0	0	0	0	0	-	
65	Phenol		Acids	0	0	0	0	41	14	
66	2,4,6-Trichlorophenol*	YES	Acids	0	0	0	0	0	-	
67	Acenaphthene		Bases	0	0	0	0	0	-	
68	Acenaphthylene		Bases	0	0	0	0	0	-	
69	Anthracene		Bases	0	0	0	0	0	-	
70	Benzidine		Bases	0	0	0	0	0	-	
71	Benzo(A)Anthracene*	YES	Bases	0	0	0	0	0	-	
72	Benzo(A)Pyrene*	YES	Bases	0	0	0	0	0	-	
73	2,4-Benzo-Fluoranthene		Bases	0	0	0	0	0	-	
74	Benzo(GH)Perylene		Bases	0	0	0	0	0	-	
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	-	
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	-	
77	Bis (2-Chloroethyl)-Ether*	YES	Bases	0	0	0	0	0	-	
78	Bis (2-Chloroiso-Propyl) Ether		Bases	0	0	0	0	0	-	
79	Bis (2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	0	-	
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	-	
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	-	
82	2-Chloronaphthalene		Bases	0	0	0	0	0	-	
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	-	
84	Chrysene*	YES	Bases	0	0	0	0	0	-	
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	-	
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	-	
87	Dibenzo(A,H)Anthracene*	YES	Bases	0	0	0	0	0	-	
88	1,2-Dichlorobenzene		Bases	0	0	0	0	0	-	
89	1,3-Dichlorobenzene		Bases	0	0	0	0	0	-	
90	1,4-Dichlorobenzene		Bases	0	0	0	0	0	-	
91	3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	0	-	
92	Diethyl Phthalate		Bases	0	0	0	0	0	-	
93	Dimethyl Phthalate		Bases	0	0	0	0	0	-	
94	2,4-Dinitrotoluene*	YES	Bases	0	0	0	0	0	-	
95	2,6-Dinitrotoluene		Bases	0	0	0	0	0	-	
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	-	
97	Endosulfan (alpha)	YES	Bases	0	0	0	0	0	-	
98	Endosulfan (beta)	YES	Bases	0	0	0	0	0	-	
99	Endosulfan sulfate	YES	Bases	0	0	0	0	0	-	
100	Endrin	YES	Bases	0	0	0	0	0	-	
101	Endrin Aldehyde	YES	Bases	0	0	0	0	0	-	
102	Fluoranthene		Bases	0	0	0	0	0	-	
103	Fluorene		Bases	0	0	0	0	0	-	
104	Heptachlor	YES	Bases	0	0	0	0	0	-	
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	-	
106	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	-	
107	Hexachlorobutadiene*	YES	Bases	0	0	0	0	0	-	
108	Hexachlorocyclohexan (alpha)	YES	Bases	0	0	0	0	0	-	
109	Hexachlorocyclohexan (beta)	YES	Bases	0	0	0	0	0	-	
110	Hexachlorocyclohexan (gamma)	YES	Bases	0	0	0	0	0	-	
111	Hexachlorocyclopentadiene		Bases	0	0	0	0	0	-	
112	Hexachloroethane		Bases	0	0	0	0	0	-	
113	Indeno(1,2,3-CK)Pyrene*	YES	Bases	0	0	0	0	0	-	
114	Isochlorone		Bases	0	0	0	0	0	-	
115	Naphthalene		Bases	0	0	0	0	0	-	
116	Nitrobenzene		Bases	0	0	0	0	0	-	
117	N-Nitrosodi-N-Propylamine*	YES	Bases	0	0	0	0	0	-	
118	N-Nitrosodi-N-Methylamine*	YES	Bases	0	0	0	0	0	-	
119	N-Nitrosodi-N-Phenylamine*	YES	Bases	0	0	0	0	0	-	
120	PCB-1016	YES	Bases	0	0	0	0	0	-	
121	PCB-1221	YES	Bases	0	0	0	0	0	-	
122	PCB-1232	YES	Bases	0	0	0	0	0	-	
123	PCB-1242	YES	Bases	0	0	0	0	0	-	
124	PCB-1248	YES	Bases	0	0	0	0	0	-	
125	PCB-1254	YES	Bases	0	0	0	0	0	-	
126	PCB-1260	YES	Bases	0	0	0	0	0	-	
127	Phenanthrene		Bases	0	0	0	0	0	-	
128	Pyrene		Bases	0	0	0	0	0	-	
129	1,2,4-Trichlorobenzene		Bases	0	0	0	0	0	-	

1.6	Enter Q <sub>d</sub> = wastewater discharge flow from facility (MGD)
2.4755664	Q <sub>d</sub> = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Qd2 = background stream flow in MGD above point of discharge
0	Qd2 = background stream flow from upstream source (cfs)
0	Enter 7Q10. Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter or estimated. 1Q10. Q <sub>s</sub> = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
0.07	Enter Mean Annual Flow. Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter 7Q2. Q <sub>s</sub> = background stream flow in cfs above point of discharge (For LWFV class streams)
Enter to Left	Enter C <sub>s</sub> = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q <sub>d</sub> + Qd2 + Q <sub>s</sub>	Q <sub>s</sub> = resultant in-stream flow, after discharge
Calculated on other	C <sub>r</sub> = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
30	Enter Background Hardness above point of discharge (assumed 50 South of Birmingham and 100 North of Birmingham)
7.00 s.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

February 16, 2024



Freshwater F&W classification		Freshwater Acute (µg/l) C <sub>a</sub> = 1Q10				Freshwater Chronic (µg/l) C <sub>a</sub> = 7Q10				Human Health Consumption Fish only (µg/l)									
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C <sub>2</sub> ) Daily Max	Max Daily Discharge as reported by Applicant (C <sub>1</sub> )	Water Quality Criteria (C <sub>1</sub> )	Draft Permit Limit (C <sub>2</sub> )	20% of Draft Permit Limit	RP?	Background from upstream source (C <sub>2</sub> ) Monthly Ave	Avg Daily Discharge as reported by Applicant (C <sub>1</sub> )	Water Quality Criteria (C <sub>1</sub> )	Draft Permit Limit (C <sub>2</sub> )	20% of Draft Permit Limit	RP?	Water Quality Criteria (C <sub>1</sub> )	Draft Permit Limit (C <sub>2</sub> )	20% of Draft Permit Limit	RP?
1	Antimony			0	0					0						3.73E+02	3.73E+02	7.47E+01	No
2	Arsenic		YES	0	0	592.334	592.334	118.467	No	0	0	261.324	261.324	52.265	No	3.03E-01	3.12E-01	6.23E-02	No
3	Beryllium			0	0					0	0								No
4	Cadmium			0	0	4.347	4.347	0.869	No	0	0	0.844	0.844	0.129	No				No
5	Chromium/ Chromium III			0	0	1637.913	1637.913	307.583	No	0	0	200.051	200.051	40.010	No				No
6	Chromium/ Chromium VI			0	0	16.000	16.000	3.200	No	0	0	11.000	11.000	2.200	No				No
7	Copper			0	0	18.026	18.026	3.605	No	0	0	5.270	5.270	1.140	No				No
8	Lead			0	0	148.291	148.291	29.258	No	0	0	0.012	0.012	0.002	No				No
9	Mercury			0	0.00143	2.400	2.400	0.480	No	0	0.00094	0.012	0.012	0.002	No	4.24E-02	4.24E-02	8.48E-03	No
10	Nickel			0	1.5	515.824	515.824	103.165	No	0	1.4	57.292	57.292	11.458	No	9.93E+02	9.93E+02	1.99E+02	No
11	Selenium			0	0	20.000	20.000	4.000	No	0	0	5.000	5.000	1.000	No	2.43E+03	2.43E+03	4.86E+02	No
12	Silver			0	0	0.976	0.976	0.195	No	0	0								No
13	Thallium			0	0					0	0					2.74E-01	2.74E-01	5.47E-02	No
14	Zinc			0	17.8	197.369	197.369	39.474	No	0	16.7	199.983	199.983	39.997	No	1.49E+04	1.49E+04	2.98E+03	No
15	Cyanide			0	0	22.000	22.000	4.400	No	0	0	5.200	5.200	1.040	No	9.33E+03	9.33E+03	1.87E+03	No
16	Total Phenolic Compounds			0	41					0	0								No
17	Hardness (As CaCO3)			0	147000					0	14								No
18	Acrolein			0	0					0	134000					5.43E+00	5.43E+00	1.09E+00	No
19	Acrylonitrile		YES	0	0					0						1.44E-01	1.48E-01	2.96E-02	No
20	Aldrin		YES	0	0	3.000	3.000	0.600	No	0	0					2.84E-05	3.02E-05	6.04E-06	No
21	Benzene		YES	0	0					0	0					1.95E+01	1.99E+01	3.98E+00	No
22	Bromoform		YES	0	0					0	0					7.88E+04	8.10E+04	1.62E+01	No
23	Carbon Tetrachloride		YES	0	0					0	0					9.97E+01	9.84E+01	1.97E+01	No
24	Chlordane		YES	0	0	2.400	2.400	0.480	No	0	0	0.004	0.004	0.001	No	4.73E-04	4.86E-04	9.72E-05	No
25	Chlorobenzene			0	0					0	0					8.08E+02	9.06E+02	1.81E+02	No
26	Chlorobromo-Methane			0	0					0	0					7.41E+00	7.62E+00	1.52E+00	No
27	Chloroethane			0	0					0	0								No
28	2-Chloro-Ethyl Vinyl Ether			0	0					0	0								No
29	Chloroform		YES	0	0					0	0					1.02E+02	1.05E+02	2.10E+01	No
30	4,4'- DDD		YES	0	0					0	0					1.81E-04	1.87E-04	3.73E-05	No
31	4,4'- DDE		YES	0	0					0	0					1.28E-04	1.32E-04	2.63E-05	No
32	4,4'- DDT		YES	0	0	1.100	1.100	0.220	No	0	0	0.001	0.001	0.000	No	1.28E-04	1.32E-04	2.63E-05	No
33	Dichlorobromo-Methane			0	0					0	0					1.00E+01	1.03E+01	2.06E+00	No
34	1,1-Dichloroethane			0	0					0	0					2.14E+01	2.20E+01	4.39E+00	No
35	1,2-Dichloroethane		YES	0	0					0	0					5.81E+03	5.91E+03	1.18E+03	No
36	Trans-1,2-Dichloro-Ethylene			0	0					0	0					4.47E+03	4.28E+03	8.57E+02	No
37	1,1-Dichloroethylene		YES	0	0					0	0					8.49E+00	8.49E+00	1.70E+00	No
38	1,2-Dichloropropane			0	0					0	0					1.23E+01	1.23E+01	2.46E+00	No
39	1,3-Dichloro-Propylene			0	0					0	0					3.12E+03	3.21E+03	6.42E+02	No
40	Dieldrin		YES	0	0	0.240	0.240	0.048	No	0	0	0.059	0.059	0.011	No	3.24E+03	1.24E+03	2.48E+02	No
41	Ethylbenzene			0	0					0	0					8.71E+02	8.71E+02	1.74E+02	No
42	Methyl Bromide			0	0					0	0					3.46E+02	3.55E+02	7.11E+01	No
43	Methyl Chloride			0	0					0	0					2.33E+00	2.40E+00	4.80E-01	No
44	Methylene Chloride		YES	0	0					0	0					1.62E+00	1.87E+00	3.94E-01	No
45	1,1,1,2,2-Tetrachloro-Ethane		YES	0	0					0	0					6.72E+03	6.72E+03	1.34E+03	No
46	Tetrachloro-Ethylene		YES	0	0					0	0					1.62E+04	1.67E+04	3.33E+05	No
47	Toluene			0	0					0	0					0.0002	0.000	0.000	No
48	Toxaphene		YES	0	0	0.730	0.730	0.146	No	0	0	0.072	0.072	0.014	No				No
49	Tributyltin (TBT)		YES	0	0	0.460	0.460	0.092	No	0	0								No
50	1,1,1,1-Tetrachloroethane			0	0					0	0								No
51	1,1,1,2-Trichloroethane		YES	0	0					0	0					6.10E+00	6.35E+00	1.27E+00	No
52	Trichlorethylene		YES	0	0					0	0					1.79E+01	1.80E+01	3.59E+00	No
53	Vinyl Chloride		YES	0	0					0	0					1.42E+00	1.46E+00	2.93E-01	No
54	p-Chloro-M-Cresol			0	0					0	0								No
55	2-Chlorophenol			0	0					0	0					8.71E+01	8.71E+01	1.74E+01	No
56	2,4-Dichlorophenol			0	0					0	0					1.72E-02	1.72E-02	3.44E-01	No
57	2,4-Dimethylphenol			0	0					0	0					4.98E+02	4.98E+02	9.96E+01	No
58	4,6-Dinitro-O-Cresol			0	0					0	0								No
59	4,6-Dinitrophenol			0	0					0	0					3.11E+03	3.11E+03	6.22E+02	No
60	4,6-Dinitro-2-methylphenol		YES	0	0					0	0					1.65E+02	1.70E+02	3.40E+01	No
61	Dioxin (2,3,7,8-TCDD)		YES	0	0					0	0					2.67E-08	2.74E-08	5.48E-09	No
62	2-Nitrophenol			0	0					0	0								No
63	4-Nitrophenol			0	0					0	0								No
64	Pentachlorophenol		YES	0	0	8.723	8.723	1.745	No	0	0	6.693	6.693	1.339	No	1.77E+00	1.82E+00	3.64E-01	No
65	Phenol			0	41					14						5.00E+05	5.00E+05	1.00E+05	No
66	2,4,6-Trichlorophenol		YES	0	0					0	0					5.41E+00	1.45E+00	2.91E-01	No
67	Acenaphthene			0	0					0	0					5.79E+02	5.79E+02	1.16E+02	No
68	Acenaphthylene			0	0					0	0								No
69	Anthracene			0	0					0	0					2.33E+04	2.33E+04	4.67E+03	No
70	Benzidine			0	0					0	0					1.16E-04	1.16E-04	2.32E-05	No
71	Benzo(A)Anthracene		YES	0	0					0	0					1.07E-02	1.10E-02	2.19E-03	No
72	Benzo(A)Pyrene		YES	0	0					0	0					1.07E-02	1.10E-02	2.19E-03	No
73	Benzo(B)Fluoranthene			0	0					0	0					1.07E-02	1.07E-02	2.13E-03	No
74	Benzo(C)Fluoranthene			0	0					0	0								No
75	Benzo(K)Fluoranthene			0	0					0	0					1.07E-02	1.07E-02	2.13E-03	No
76	Bis (2-Chloroethoxy) Methane			0	0					0	0								No
77	Bis (2-Chloroethoxy)-Ether		YES	0	0					0	0					3.07E+01	3.16E+01	6.32E+02	No
78	Bis (2-Chloroisopropyl) Ether			0	0					0	0					3.78E+04	3.78E+04	7.59E+03	No
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0					0	0					1.28E+00	1.32E+00	2.64E-01	No
80	4-Bromophenyl Phenyl Ether			0	0					0	0								No
81	Butyl Benzyl Phthalate			0	0					0	0					1.13E+03	1.13E+03	2.25E+02	No
82	2-Chlorophthalate			0	0					0	0					9.24E+02	9.24E+02	1.85E+02	No
83	4-Chlorophenyl Phenyl Ether			0	0					0	0								No
84	Chrysene		YES	0	0					0	0					1.07E-02	1.10E-02	2.19E-03	No
85	Di-N-Butyl Phthalate			0	0					0	0					2.62E+03	2.62E+03	5.24E+02	No
86	Di-N-Octyl Phthalate			0	0					0	0								No
87	Dibenz(A,H)Anthracene		YES	0	0					0	0					1.07E-02	1.10E-02	2.19E-03	No
88	1,2-Dichlorobenzene			0	0					0	0					7.65E+02	7.55E+02	1.51E+02	No
89	1,3-Dichlorobenzene			0	0					0	0		</						

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$										
ID	Pollutant	Carcinogen Yes	Type	Background	Background	Background	Background	Enter Max	Enter Avg	Partition Coefficient (Stream/ Lake)
				from upstream source (C <sub>d2</sub> ) Daily Max	from upstream source (C <sub>d2</sub> ) Monthly Ave	Instream (C <sub>s</sub> ) Daily	Instream (C <sub>s</sub> ) Monthly Ave	Discharge as reported by Applicant (C <sub>d</sub> ) Max	Discharge as reported by Applicant (C <sub>d</sub> ) Ave	
				µg/l	µg/l	µg/l	µg/l	µg/l	µg/l	
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	0.205
9	Mercury**		Metals	0	0	0	0	0.00143	0.00094	0.302
10	Nickel**		Metals	0	0	0	0	1.5	1.4	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	17.8	16.7	0.330
15	Cyanide		Metals	0	0	0	0	0	0	
16	Total Phenolic Compounds		Metals	0	0	0	0	41	14	
17	Hardness (As CaCO3)		Metals	0	0	0	0	14700	13400	
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	0	0	
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	0	0	
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	0	0	
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	1,1,2,2-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-M-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	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	11	14	
67	Acenaphthene		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(GH)Perylene		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-Chloro-Propyl) 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	Hexachlorocyclopentadiene		Bases	0	0	0	0	0	0	
112	Hexachloroethane		Bases	0	0	0	0	0	0	
113	Indeno(1,2,3-CK)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	

1.15	Enter Q <sub>w</sub> = wastewater discharge flow from facility (MGD)
1.77931335	Q <sub>w</sub> = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q <sub>s2</sub> = background stream flow in MGD above point of discharge
0	Q <sub>d2</sub> = background stream flow from upstream source (cfs)
0	Enter 7Q10, Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter or estimated, 1Q10, Q <sub>s</sub> = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
0.768	Enter Mean Annual Flow, Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter 7Q2, Q <sub>s</sub> = background stream flow in cfs above point of discharge (For LWF class streams)
Enter to Left	Enter C <sub>s</sub> = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q <sub>w</sub> + Q <sub>d2</sub> + Q <sub>s</sub>	Q <sub>s</sub> = resultant in-stream flow, after discharge
Calculated on other	C <sub>s</sub> = 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 s.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

February 16, 2014

Freshwater F&W classification		Freshwater Acute (µg/L) C <sub>10</sub> =1Q10										Freshwater Chronic (µg/L) C <sub>10</sub> =7Q10										Human Health Consumption Fish only (µg/l) Carcinogen C <sub>10</sub> =Annual Average Non-Carcinogen C <sub>10</sub> =7Q10			
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C <sub>52</sub> ) Daily Max	Max Daily Discharge as reported by Applicant (C <sub>52</sub> )	Water Quality Criteria (C <sub>52</sub> )	Draft Perms Limit (C <sub>52</sub> )	20% of Draft Permit Limit	RP?	Background from upstream source (C <sub>52</sub> ) Monthly Ave.	Water Quality Criteria (C <sub>52</sub> )	Draft Perms Limit (C <sub>52</sub> )	20% of Draft Permit Limit	RP?	Water Quality Criteria (C <sub>52</sub> )	Draft Perms Limit (C <sub>52</sub> )	20% of Draft Permit Limit	RP?							
1	Antimony			0	0					0					3.73E+02	3.73E+02	7.47E+01	No							
2	Arsenic		YES	0	0	592.334	592.334	118.467	No	0	281.324	281.324	52.265	No	3.03E-01	4.34E-01	8.68E-02	No							
3	Beryllium			0	0					0															
4	Cadmium			0	0	4.347	4.347	0.869	No	0	0.844	0.844	0.169	No											
5	Chromium/ Chromium III			0	0	1537.913	1537.913	307.583	No	0	200.057	200.057	40.011	No											
6	Chromium/ Chromium VI			0	0	18.000	18.000	3.200	No	0	3.600	3.600	0.720	No											
7	Copper			0	0	16.026	16.026	3.605	No	0	12.765	12.766	2.553	No											
8	Lead			0	0	146.281	146.281	29.258	No	0	5.701	5.701	1.140	No											
9	Mercury			0	0.00143	2.400	2.400	0.480	No	0	0.012	0.012	0.002	No	4.24E-02	4.24E-02	8.48E-03	No							
10	Nickel			0	1.5	515.824	515.824	103.165	No	0	57.292	57.292	11.458	No	9.93E-02	9.93E-02	1.99E-02	No							
11	Selenium			0	0	20.000	20.000	4.000	No	0	5.000	5.000	1.000	No	2.43E+03	2.43E+03	4.86E+02	No							
12	Silver			0	0	0.976	0.976	0.195	No	0															
13	Thallium			0	0					0					2.74E-01	2.74E-01	5.47E-02	No							
14	Zinc			0	17.8	197.369	197.369	39.474	No	0	16.7	16.7	3.34	No	1.49E+04	1.49E+04	2.98E+03	No							
15	Cyanide			0	0	22.000	22.000	4.400	No	0	5.200	5.200	1.040	No	9.33E+03	9.33E+03	1.87E+03	No							
16	Total Phenolic Compounds			0	41					0	14														
17	Hardness (As CaCO3)			0	147000					0	134000														
18	Acrolein			0	0					0					5.43E+00	5.43E+00	1.09E+00	No							
19	Acrylonitrile		YES	0	0					0					1.44E-01	2.08E-01	4.12E-02	No							
20	Aldrin		YES	0	0	3.000	3.000	0.600	No	0					2.94E-05	4.21E-05	8.42E-06	No							
21	Benzene		YES	0	0					0					1.55E+01	2.22E+01	4.43E+00	No							
22	Bromoform		YES	0	0					0					7.89E+01	1.13E+02	2.26E+01	No							
23	Carbon Tetrachloride		YES	0	0					0					9.97E-01	1.37E+00	2.74E-01	No							
24	Chlordane		YES	0	0	2.400	2.400	0.480	No	0	0.0043	0.004	0.001	No	2.72E-04	3.71E-04	7.42E-05	No							
25	Chlorobenzene		YES	0	0					0					9.05E+02	9.05E+02	1.81E+02	No							
26	Chlorodibromo-Methane		YES	0	0					0					7.41E+00	1.06E+01	2.12E+00	No							
27	Chloroethane			0	0					0															
28	2-Chloro-Ethylvinyl Ether			0	0					0															
29	Chloroform		YES	0	0					0					1.02E+02	1.48E+02	2.92E+01	No							
30	4,4'-DDD		YES	0	0					0					1.81E-04	2.60E-04	5.19E-05	No							
31	4,4'-DDE		YES	0	0					0					1.28E-04	1.83E-04	3.67E-05	No							
32	4,4'-DDT		YES	0	0					0					1.28E-04	1.83E-04	3.67E-05	No							
33	Dichlorobromo-Methane		YES	0	0	1.100	1.100	0.220	No	0	0.001	0.001	0.000	No	3.08E+01	4.44E+01	8.87E+00	No							
34	1,1-Dichloroethane			0	0					0															
35	1,2-Dichloroethane		YES	0	0					0					2.14E+01	3.06E+01	6.12E+00	No							
36	Trans-1,2-Dichloro-Ethylene			0	0					0					5.81E+03	5.81E+03	1.16E+03	No							
37	1,1-Dichloroethylene		YES	0	0					0					4.17E-03	5.97E-03	1.19E-03	No							
38	1,2-Dichloropropane			0	0					0					8.49E+00	8.49E+00	1.70E+00	No							
39	1,3-Dichloro-Propylene			0	0					0					1.23E+01	1.23E+01	2.46E+00	No							
40	Dieldrin		YES	0	0	0.240	0.240	0.048	No	0	0.056	0.056	0.011	No	3.32E-05	4.47E-05	8.94E-06	No							
41	Ethylbenzene			0	0					0					1.24E+03	1.24E+03	2.49E+02	No							
42	Methyl Bromide			0	0					0					8.71E+02	8.71E+02	1.74E+02	No							
43	Methyl Chloride			0	0					0															
44	Methylene Chloride		YES	0	0					0					3.46E+02	4.95E+02	9.90E+01	No							
45	1,1,2,2-Tetrachloro-Ethane		YES	0	0					0					2.33E+00	3.34E+00	6.69E-01	No							
46	Tetrachloro-Ethylene		YES	0	0					0					1.92E+00	2.74E+00	5.49E-01	No							
47	Toluene			0	0					0					8.72E+03	8.72E+03	1.74E+03	No							
48	Toxaphene		YES	0	0	0.730	0.730	0.146	No	0	0.0002	0.000	0.000	No	6.00E-04	8.32E-04	1.66E-04	No							
49	Tributyltin (TBT)			0	0	0.460	0.460	0.092	No	0	0.072	0.072	0.014	No											
50	1,1,1-Trichloroethane		YES	0	0					0															
51	1,1,2-Trichloroethane		YES	0	0					0					8.10E+00	1.30E+01	2.60E+00	No							
52	Trichloroethylene		YES	0	0					0					1.75E-01	2.50E-01	5.00E-02	No							
53	Vinyl Chloride		YES	0	0					0					1.42E+00	2.04E+00	4.08E-01	No							
54	p-Chloro-m-Cresol			0	0					0															
55	2-Chlorophenol			0	0					0					8.71E+01	8.71E+01	1.74E+01	No							
56	2,4-Dichlorophenol			0	0					0					1.72E+02	1.72E+02	3.44E+01	No							
57	2,4-Dimethylphenol			0	0					0					4.99E+02	4.99E+02	9.99E+01	No							
58	4,6-Dinitro-O-Cresol			0	0					0															
59	2,4-Dinitrophenol			0	0					0					3.11E+03	3.11E+03	6.22E+02	No							
60	4,6-Dinitro-2-methylphenol		YES	0	0					0					1.65E+02	2.37E+02	4.74E+01	No							
61	Dioxin (2,3,7,8-TCDD)		YES	0	0					0					2.67E-08	3.82E-08	7.64E-09	No							
62	2-Nitrophenol			0	0					0															
63	4-Nitrophenol			0	0					0															
64	Pentachlorophenol		YES	0	0	8.723	8.723	1.745	No	0	6.693	6.693	1.339	No	1.77E+00	2.53E+00	5.06E-01	No							
65	Phenol			0	41					0	14				5.00E+05	5.00E+05	1.00E+05	No							
66	2,4,6-Trichlorophenol		YES	0	0					0					1.41E+00	2.02E+00	4.05E-01	No							
67	Acenaphthene			0	0					0					5.79E+02	5.79E+02	1.16E+02	No							
68	Acenaphthylene			0	0					0															
69	Anthracene			0	0					0					2.33E+04	2.33E+04	4.67E+03	No							
70	Benidine			0	0					0					1.19E-04	1.66E-04	3.32E-05	No							
71	Benzo(A)Anthracene		YES	0	0					0					1.07E-02	1.53E-02	3.05E-03	No							
72	Benzo(A)Pyrene		YES	0	0					0					1.07E-02	1.53E-02	3.05E-03	No							
73	Benzo(B)Fluoranthene			0	0					0					1.07E-02	1.53E-02	3.05E-03	No							
74	Benzo(K)Fluoranthene			0	0					0															
75	Benzo(G)Fluoranthene			0	0					0															
76	Bis (2-Chloroethoxy) Methane			0	0					0					1.07E-02	1.53E-02	3.05E-03	No							
77	Bis (2-Chloroethyl)-Ether		YES	0	0					0					3.07E-01	4.40E-01	8.80E-02	No							
78	Bis (2-Chloro-Propyl) Ether			0	0					0					3.78E+04	3.78E+04	7.56E+03	No							
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0					0					1.28E+00	1.84E+00	3.67E-01	No							
80	4-Bromophenyl Phenyl Ether			0	0					0															
81	Butyl Benzyl Phthalate			0	0					0					1.13E+03	1.13E+03	2.26E+02	No							
82	2-Chloronaphthalene			0	0					0					9.24E+02	9.24E+02	1.85E+02	No							
83	4-Chlorophenyl Phenyl Ether			0	0					0															
84	Chrysene		YES	0	0					0					3.07E-02	4.30E-02	8.60E-03	No							
85	Di-N-Butyl Phthalate			0	0					0					1.53E-02	2.14E-02	4.28E-03	No							
86	Di-N-Octyl Phthalate			0	0					0					2.62E+03	2.62E+03	5.24E+02	No							
87	Dibenzo(A,H)Anthracene		YES	0	0					0					1.07E-02	1.53E-02	3.05E-03	No							
88	1,2-Dichlorobenzene			0	0					0					7.55E+03	7.55E+03	1.51E+02	No							
89	1,3-Dichlorobenzene			0	0					0					5.82E+02	5.82E+02	1.16E+02	No							
90	1,4-Dichlorobenzene			0	0					0					1.12E+03	1.12E+03	2.24E+02	No							
91	3,3-Dichlorobenzidine		YES	0	0					0					1.95E-02	2.73E-02	5.46E-03	No							
92	Diethyl Phthalate			0	0					0					2.56E+04	2.56E+04	5.11E+03	No							
93	Dimethyl Phthalate			0	0					0					6.49E-05										

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$										Enter Max Daily Discharge as reported by Applicant (C <sub>d</sub> ) Max	Enter Avg Daily Discharge as reported by Applicant (C <sub>d</sub> ) Ave	Partition Coefficient (Stream/Lake)
ID	Pollutant	Carcinogen Yes	Type	Background from upstream source (C <sub>d2</sub> ) Daily Max	Background from upstream source (C <sub>d2</sub> ) Monthly Ave	Background Instream (C <sub>r</sub> ) Daily Max	Background Instream (C <sub>r</sub> ) Monthly Ave	Background Instream (C <sub>r</sub> ) Daily Max	Background Instream (C <sub>r</sub> ) Monthly Ave	Enter Max Daily Discharge as reported by Applicant (C <sub>d</sub> ) Max	Enter Avg Daily Discharge as reported by Applicant (C <sub>d</sub> ) Ave	Partition Coefficient (Stream/Lake)
1	Arsenic***	YES	Metals	0	0	0	0	0	0	0	0	0.574
2	Beryllium	YES	Metals	0	0	0	0	0	0	0	0	2.4755664
3	Cadmium**	YES	Metals	0	0	0	0	0	0	0	0	0.236
4	Chromium / Chromium III**	YES	Metals	0	0	0	0	0	0	0	0	0.210
5	Chromium / Chromium VI**	YES	Metals	0	0	0	0	0	0	0	0	0
6	Copper**	YES	Metals	0	0	0	0	0	0	0	0	0.388
7	Lead**	YES	Metals	0	0	0	0	0	0	0	0	0.206
8	Mercury**	YES	Metals	0	0	0	0	0	0	0.00143	0.00094	0.302
9	Nickel**	YES	Metals	0	0	0	0	0	0	1.5	1.4	0.506
10	Selenium	YES	Metals	0	0	0	0	0	0	0	0	0
11	Silver	YES	Metals	0	0	0	0	0	0	0	0	0
12	Thallium	YES	Metals	0	0	0	0	0	0	0	0	0
13	Zinc**	YES	Metals	0	0	0	0	0	0	17.8	16.7	0.330
14	Cyanide	YES	Metals	0	0	0	0	0	0	0	0	0
15	Total Phenolic Compounds	YES	Metals	0	0	0	0	0	0	41	14	0
16	Hardness (As CaCO3)	YES	Metals	0	0	0	0	0	0	147000	134000	0
17	Acrolein	YES	VOC	0	0	0	0	0	0	0	0	0
18	Acrylonitrile*	YES	VOC	0	0	0	0	0	0	0	0	0
19	Aldrin	YES	VOC	0	0	0	0	0	0	0	0	0
20	Benzene*	YES	VOC	0	0	0	0	0	0	0	0	0
21	Bromoforn*	YES	VOC	0	0	0	0	0	0	0	0	0
22	Carbon Tetrachloride*	YES	VOC	0	0	0	0	0	0	0	0	0
23	Chlordane	YES	VOC	0	0	0	0	0	0	0	0	0
24	Chlorobenzene	YES	VOC	0	0	0	0	0	0	0	0	0
25	Chlorobromo-Methane*	YES	VOC	0	0	0	0	0	0	0	0	0
26	Chloroethane	YES	VOC	0	0	0	0	0	0	0	0	0
27	2-Chloro-Ethylvinyl Ether	YES	VOC	0	0	0	0	0	0	0	0	0
28	Chloroform*	YES	VOC	0	0	0	0	0	0	0	0	0
29	4,4'-DDD	YES	VOC	0	0	0	0	0	0	0	0	0
30	4,4'-DDE	YES	VOC	0	0	0	0	0	0	0	0	0
31	4,4'-DDT	YES	VOC	0	0	0	0	0	0	0	0	0
32	Dichlorobromo-Methane*	YES	VOC	0	0	0	0	0	0	0	0	0
33	1,1-Dichloroethane	YES	VOC	0	0	0	0	0	0	0	0	0
34	1,2-Dichloroethane*	YES	VOC	0	0	0	0	0	0	0	0	0
35	Trans-1,2-Dichloro-Ethylene	YES	VOC	0	0	0	0	0	0	0	0	0
36	1,1-Dichloroethylene*	YES	VOC	0	0	0	0	0	0	0	0	0
37	1,2-Dichloropropane	YES	VOC	0	0	0	0	0	0	0	0	0
38	1,3-Dichloro-Propylene	YES	VOC	0	0	0	0	0	0	0	0	0
39	Dieldrin	YES	VOC	0	0	0	0	0	0	0	0	0
40	Dibenzodioxin	YES	VOC	0	0	0	0	0	0	0	0	0
41	Dibenzofuran	YES	VOC	0	0	0	0	0	0	0	0	0
42	Methyl Bromide	YES	VOC	0	0	0	0	0	0	0	0	0
43	Methyl Chloride	YES	VOC	0	0	0	0	0	0	0	0	0
44	Methylene Chloride*	YES	VOC	0	0	0	0	0	0	0	0	0
45	1,1,1,2-Tetrachloro-Ethane*	YES	VOC	0	0	0	0	0	0	0	0	0
46	Tetrachloro-Ethylene*	YES	VOC	0	0	0	0	0	0	0	0	0
47	Toluene	YES	VOC	0	0	0	0	0	0	0	0	0
48	Toxaphene	YES	VOC	0	0	0	0	0	0	0	0	0
49	Tributyltin (TBT)	YES	VOC	0	0	0	0	0	0	0	0	0
50	1,1,1-Trichloroethane	YES	VOC	0	0	0	0	0	0	0	0	0
51	1,1,2-Trichloroethane*	YES	VOC	0	0	0	0	0	0	0	0	0
52	Trichloroethylene*	YES	VOC	0	0	0	0	0	0	0	0	0
53	Vinyl Chloride*	YES	VOC	0	0	0	0	0	0	0	0	0
54	p-Chloro-N-Cresol	YES	Acids	0	0	0	0	0	0	0	0	0
55	2-Chlorophenol	YES	Acids	0	0	0	0	0	0	0	0	0
56	2,4-Dichlorophenol	YES	Acids	0	0	0	0	0	0	0	0	0
57	2,4-Dimethylphenol	YES	Acids	0	0	0	0	0	0	0	0	0
58	4,6-Dinitro-O-Cresol	YES	Acids	0	0	0	0	0	0	0	0	0
59	2,4-Dinitrophenol	YES	Acids	0	0	0	0	0	0	0	0	0
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0	0	0	0	0
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0	0	0	0	0
62	2-Nitrophenol	YES	Acids	0	0	0	0	0	0	0	0	0
63	4-Nitrophenol	YES	Acids	0	0	0	0	0	0	0	0	0
64	Pentachlorophenol*	YES	Acids	0	0	0	0	0	0	0	0	0
65	Phenol	YES	Acids	0	0	0	0	0	0	41	14	0
66	2,4,6-Trichlorophenol*	YES	Acids	0	0	0	0	0	0	0	0	0
67	Acenaphthene	YES	Bases	0	0	0	0	0	0	0	0	0
68	Acenaphthylene	YES	Bases	0	0	0	0	0	0	0	0	0
69	Anthracene	YES	Bases	0	0	0	0	0	0	0	0	0
70	Benzo(a)anthracene*	YES	Bases	0	0	0	0	0	0	0	0	0
71	Benzo(a)pyrene*	YES	Bases	0	0	0	0	0	0	0	0	0
72	3,4-Benzo-Fluoranthene	YES	Bases	0	0	0	0	0	0	0	0	0
73	Benzo(g,h,i)perylene	YES	Bases	0	0	0	0	0	0	0	0	0
74	Benzo(k)fluoranthene	YES	Bases	0	0	0	0	0	0	0	0	0
75	Bis(2-Chloroethoxy) Methane	YES	Bases	0	0	0	0	0	0	0	0	0
76	Bis(2-Chloroethyl)-Ether*	YES	Bases	0	0	0	0	0	0	0	0	0
77	Bis(2-Chloroisopropyl) Ether	YES	Bases	0	0	0	0	0	0	0	0	0
78	Bis(2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	0	0	0	0	0
79	4-Bromophenyl Phenyl Ether	YES	Bases	0	0	0	0	0	0	0	0	0
80	Butyl Benzyl Phthalate	YES	Bases	0	0	0	0	0	0	0	0	0
81	2-Chloronaphthalene	YES	Bases	0	0	0	0	0	0	0	0	0
82	4-Chlorophenyl Phenyl Ether	YES	Bases	0	0	0	0	0	0	0	0	0
83	Chrysene*	YES	Bases	0	0	0	0	0	0	0	0	0
84	Di-N-Butyl Phthalate	YES	Bases	0	0	0	0	0	0	0	0	0
85	Di-N-Octyl Phthalate	YES	Bases	0	0	0	0	0	0	0	0	0
86	Dibenz(a,h)anthracene*	YES	Bases	0	0	0	0	0	0	0	0	0
87	1,2-Dichlorobenzene	YES	Bases	0	0	0	0	0	0	0	0	0
88	1,3-Dichlorobenzene	YES	Bases	0	0	0	0	0	0	0	0	0
89	1,4-Dichlorobenzene	YES	Bases	0	0	0	0	0	0	0	0	0
90	1,3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	0	0	0	0	0
91	Diethyl Phthalate	YES	Bases	0	0	0	0	0	0	0	0	0
92	Dimethyl Phthalate	YES	Bases	0	0	0	0	0	0	0	0	0
93	2,4-Dinitrotoluene*	YES	Bases	0	0	0	0	0	0	0	0	0
94	2,6-Dinitrotoluene	YES	Bases	0	0	0	0	0	0	0	0	0
95	1,2-Diphenylhydrazine	YES	Bases	0	0	0	0	0	0	0	0	0
96	Endosulfan (alpha)	YES	Bases	0	0	0	0	0	0	0	0	0
97	Endosulfan (beta)	YES	Bases	0	0	0	0	0	0	0	0	0
98	Endosulfan sulfate	YES	Bases	0	0	0	0	0	0	0	0	0
99	Endrin	YES	Bases	0	0	0	0	0	0	0	0	0
100	Endrin Aldehyde	YES	Bases	0	0	0	0	0	0	0	0	0
101	Fluorene	YES	Bases	0	0	0	0	0	0	0	0	0
102	Fluoranthene	YES	Bases	0	0	0	0	0	0	0	0	0
103	Heptachlor	YES	Bases	0	0	0	0	0	0	0	0	0
104	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	0	0	0
105	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	0	0	0	0
106	Hexachlorobutadiene*	YES	Bases	0	0	0	0	0	0	0	0	0
107	Hexachlorocyclohexane (alpha)	YES	Bases	0	0	0	0	0	0	0	0	0
108	Hexachlorocyclohexane (beta)	YES	Bases	0	0	0	0	0	0	0	0	0
109	Hexachlorocyclohexane (gamma)	YES	Bases	0	0	0	0	0	0	0	0	0
110	Hexachlorocyclopentadiene	YES	Bases	0	0	0	0	0	0	0	0	0
111	Hexachloroethane	YES	Bases	0	0	0	0	0	0	0	0	0
112	Indeno(1,2,3-CK)pyrene*	YES	Bases	0	0	0	0	0	0	0	0	0
113	Isophorone	YES	Bases	0	0	0	0	0	0	0	0	0
114	Naphthalene	YES	Bases	0	0	0	0	0	0	0	0	0
115	Nitrobenzene	YES	Bases	0	0	0	0	0	0	0	0	0
116	N-Nitrosodi-N-Propylamine*	YES	Bases	0	0	0	0	0	0	0	0	0
117	N-Nitrosodi-N-Methylamine*	YES	Bases	0	0	0	0	0	0	0	0	0
118	N-Nitrosodi-N-Phenylamine*	YES	Bases	0	0	0	0	0	0	0	0	0
119	PCB-1016	YES	Bases	0	0	0	0	0	0	0	0	0
120	PCB-1221	YES	Bases	0	0	0	0	0	0	0	0	0
121	PCB-1222	YES	Bases	0	0	0	0	0	0	0	0	0
122	PCB-1242	YES	Bases	0	0	0	0	0	0	0	0	0
123	PCB-1248	YES	Bases	0	0	0	0	0	0	0	0	0
124	PCB-1254	YES	Bases	0	0	0	0	0	0	0	0	0
125	PCB-1260	YES	Bases	0	0	0	0	0	0	0	0	0
126	Phenanthrene	YES	Bases	0	0	0	0	0	0	0	0	0
127	Pyrene	YES	Bases	0	0	0	0	0	0	0	0	0
128	1,2,4-Trichlorobenzene	YES	Bases	0	0	0	0	0	0	0	0	0

1.5	Enter Q <sub>d</sub> = wastewater discharge flow from facility (MGD)
2.4755664	Q <sub>d</sub> = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q <sub>d2</sub> = background stream flow in MGD above point of discharge
0	Q <sub>d2</sub> = background stream flow from upstream source (cfs)
0	Enter TQ10, Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter

Freshwater F&W classification		Freshwater Acute (µg/L) C <sub>a</sub> = 1Q10										Freshwater Chronic (µg/L) C <sub>c</sub> = 7Q10										Human Health Consumption Fish only (µg/g)			
ID	Pollutant	RPT	Carcinogen yes	Background from upstream source (C <sub>25</sub> ) Daily Max	Discharge as reported by Applicant (C <sub>25</sub> )	Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>25</sub> )	20% of Draft Permit Limit	RPT	Background from upstream source (C <sub>25</sub> ) Monthly Ave	Avg Daily Discharge as reported by Applicant (C <sub>25</sub> )	Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>c</sub> )	20% of Draft Permit Limit	RPT	Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>c</sub> )	20% of Draft Permit Limit	RPT	Carcinogen C <sub>a</sub> = Annual Average Non-Carcinogen C <sub>c</sub> = 7Q10					
																				Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>c</sub> )	20% of Draft Permit Limit	RPT	Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>c</sub> )
1	Antimony			0	0				0	0										3.73E+02	3.73E+02	7.47E+01	No		
2	Arsenic		YES	0	0	592.334	592.334	118.467	No	0	0	281.324	281.324	56.265	No	3.03E-01	3.03E-01	3.97E-01	7.94E-02				No		
3	Beryllium			0	0				0	0														No	
4	Cadmium			0	0	4.347	4.347	0.869	No	0	0	0.644	0.644	0.129	No									No	
5	Chromium/ Chromium III			0	0	1537.913	1537.913	307.583	No	0	0	200.051	200.051	40.010	No									No	
6	Chromium/ Chromium VI			0	0	16.000	16.000	3.200	No	0	0	11.000	11.000	2.200	No									No	
7	Copper			0	0	18.028	18.028	3.605	No	0	0	12.766	12.766	2.553	No									No	
8	Lead			0	0	148.281	148.281	29.656	No	0	0	5.701	5.701	1.140	No									No	
9	Mercury			0.00143	0.00143	2.400	2.400	0.480	No	0.00094	0.00094	0.012	0.012	0.002	No					4.24E-02	4.24E-02	8.48E-03	No		
10	Nickel			0	1.5	515.824	515.824	103.165	No	0	1.4	57.292	57.292	11.458	No					9.93E+02	9.93E+02	1.99E+02	No		
11	Selenium			0	0	20.000	20.000	4.000	No	0	0	5.000	5.000	1.000	No					2.43E+03	2.43E+03	4.86E+02	No		
12	Silver			0	0	0.976	0.976	0.195	No	0	0													No	
13	Thallium			0	0				0	0										2.74E-01	2.74E-01	5.47E-02	No		
14	Zinc			0	17.8	197.369	197.369	39.474	No	0	16.7	198.883	198.883	39.797	No	1.45E+04	1.45E+04	2.89E+03					No		
15	Cyanide			0	0	22.000	22.000	4.400	No	0	0	5.200	5.200	1.040	No					9.33E+03	9.33E+03	1.87E+03	No		
17	Total Phenolic Compounds			0	41				0	14														No	
17	Hardness (As CaCO3)			0	147000				0	134000														No	
18	Acrolein			0	0				0	0										5.43E+00	5.43E+00	1.09E+00	No		
19	Acrylonitrile		YES	0	0				0	0										1.44E-01	1.44E-01	2.88E-02	No		
20	Aldrin		YES	0	0	3.000	3.000	0.600	No	0	0									2.94E-02	2.94E-02	5.88E-03	No		
21	Benzene		YES	0	0				0	0										1.55E+01	1.55E+01	3.10E+00	No		
22	Bromoform		YES	0	0				0	0										7.68E+01	7.68E+01	1.54E+01	No		
23	Carbon Tetrachloride		YES	0	0				0	0										9.57E-01	9.57E-01	1.91E-01	No		
24	Chlordane		YES	0	0	2.400	2.400	0.480	No	0	0	0.004	0.004	0.001	No					4.73E-04	4.73E-04	9.46E-05	No		
25	Chlorobenzene			0	0				0	0										8.08E+02	8.08E+02	1.62E+02	No		
26	Chlorodibromo-Methane		YES	0	0				0	0										7.41E+00	7.41E+00	1.48E+00	No		
27	Chloroethane			0	0				0	0														No	
28	2-Chloro-Ethylvinyl Ether			0	0				0	0														No	
29	ChloroForm		YES	0	0				0	0										1.02E+02	1.02E+02	2.04E+01	No		
30	4,4' - DDD		YES	0	0				0	0										1.81E-04	1.81E-04	3.62E-05	No		
31	4,4' - DDE		YES	0	0				0	0										7.8E-04	7.8E-04	1.56E-04	No		
32	4,4' - DDT		YES	0	0	1.100	1.100	0.220	No	0	0	0.001	0.001	0.000	No					1.28E-04	1.28E-04	2.56E-05	No		
33	Dichlorobromo-Methane		YES	0	0				0	0										1.00E+01	1.00E+01	2.00E+00	No		
34	1,1-Dichloroethane			0	0				0	0										2.14E+04	2.14E+04	4.28E+03	No		
35	1,2-Dichloroethane		YES	0	0				0	0										5.81E+03	5.81E+03	1.16E+03	No		
36	Trans-1,2-Dichloro-Ethylene			0	0				0	0										4.17E+03	4.17E+03	8.34E+02	No		
37	1,1-Dichloroethylene		YES	0	0				0	0										8.46E+00	8.46E+00	1.70E+00	No		
38	1,2-Dichloropropane			0	0				0	0										1.23E+01	1.23E+01	2.46E+00	No		
39	1,3-Dichloro-Propylene			0	0				0	0										4.03E-05	4.03E-05	8.06E-06	No		
40	Dieldrin		YES	0	0	0.240	0.240	0.048	No	0	0	0.058	0.058	0.011	No					3.12E-05	3.12E-05	6.24E-06	No		
41	Ethylbenzene			0	0				0	0										1.24E+03	1.24E+03	2.49E+02	No		
42	Methyl Bromide			0	0				0	0										8.71E+02	8.71E+02	1.74E+02	No		
43	Methyl Chloride			0	0				0	0														No	
44	Methylene Chloride		YES	0	0				0	0										3.36E+04	3.36E+04	6.72E+03	No		
45	1, 1, 2, 2-Tetrachloro-Ethane		YES	0	0				0	0										2.33E+00	2.33E+00	4.66E-01	No		
46	Tetrachloro-Ethylene		YES	0	0				0	0										1.02E+00	1.02E+00	2.04E-01	No		
47	Toluene			0	0				0	0										8.72E+03	8.72E+03	1.74E+03	No		
48	Toxaphene		YES	0	0	0.730	0.730	0.146	No	0	0	0.002	0.002	0.000	No					1.82E-04	1.82E-04	3.64E-05	No		
49	Tributyltin (TBT)			0	0	0.460	0.460	0.092	No	0	0	0.072	0.072	0.014	No									No	
50	1, 1,1-Trichloroethane		YES	0	0				0	0										6.10E+02	6.10E+02	1.22E+02	No		
51	1, 1,2-Trichloroethane		YES	0	0				0	0										1.75E+01	1.75E+01	3.50E+00	No		
52	Trichloroethylene		YES	0	0				0	0										1.42E+01	1.42E+01	2.84E+00	No		
53	Vinyl Chloride		YES	0	0				0	0														No	
54	p-Chloro-m-Cresol			0	0				0	0														No	
55	2-Chlorophenol			0	0				0	0										6.71E+01	6.71E+01	1.34E+01	No		
56	2,4-Dichlorophenol			0	0				0	0										1.72E+02	1.72E+02	3.44E+01	No		
57	2,4-Dimethylphenol			0	0				0	0										4.98E+02	4.98E+02	9.96E+01	No		
58	4,6-Dinitro-o-Cresol			0	0				0	0														No	
59	2,4-Dinitrophenol			0	0				0	0										3.11E+03	3.11E+03	6.22E+02	No		
60	4,6-Dinitro-2-methylphenol		YES	0	0				0	0										1.85E+02	1.85E+02	3.70E+01	No		
61	Dioxin (2,3,7,8-TCDD)		YES	0	0				0	0										2.87E+08	2.87E+08	5.74E+07	No		
62	2-Nitrophenol			0	0				0	0														No	
63	4-Nitrophenol			0	0				0	0														No	
64	Pentachlorophenol		YES	0	0	8.723	8.723	1.745	No	0	0	6.693	6.693	1.339	No					1.77E+00	1.77E+00	3.54E-01	No		
65	Phenol			0	41				0	14										5.00E+05	5.00E+05	1.00E+05	No		
66	2,4,6-Trichlorophenol		YES	0	0				0	0										1.41E+00	1.41E+00	2.82E-01	No		
67	Acenaphthene			0	0				0	0										5.79E+02	5.79E+02	1.16E+02	No		
68	Acenaphthylene			0	0				0	0														No	
69	Anthracene			0	0				0	0										2.33E+04	2.33E+04	4.67E+03	No		
70	Benzo(a)anthracene		YES	0	0				0	0										1.16E-04	1.16E-04	2.32E-05	No		
71	Benzo(a)pyrene		YES	0	0				0	0										1.07E-02	1.07E-02	2.14E-03	No		
72	Benzo(a)pyrene		YES	0	0				0	0										1.07E-02	1.07E-02	2.14E-03	No		
73	Benzo(b)fluoranthene			0	0				0	0										1.07E-02	1.07E-02	2.14E-03	No		
74	Benzo(g)heliophenanthrene			0	0				0	0														No	
75	Benzo(k)fluoranthene			0	0				0	0														No	
76	Bis (2-Chloroethoxy) Methane			0	0				0	0														No	
77	Bis (2-Chloroethyl)-Ether		YES	0	0				0	0										3.07E-01	3.07E-01	6.14E-02	No</		



**SWWC  
Services, Inc.**

A SouthWest Water Company

728 Volare Drive  
Birmingham, AL 35244  
Phone 205.987.8352  
Fax 205.987.8337  
www.swwc.com

January 19, 2024

Via Email Only:dstokes@adem.alabama.gov

Mr. Dustin Stokes  
Alabama Department of Environmental Management  
P.O. Box 301463  
Montgomery, AL 36130-1463

RE: Request for Delay of Phase III Target Limit Implementation for Total Phosphorus  
Liberty Park WRRF NPDES Permit AL0067814

Dear Mr. Stokes,

Pursuant to your recent phone inquiry regarding the current Total Phosphorus Implementation schedule, SWWC Services, Inc. (SWWC) on behalf of Enviro Services, LLC would like to official request for ADEM to consider further postponing the schedule of compliance for the Phase III Target Limit of 0.043 mg/l currently scheduled for 2027 until 2032. This request would cover both discharges of 1.15mgd and the future 1.6mgd. Our request is based in part on the following brief summary findings and facts pursuant to our many years of research and testing regarding this matter. SWWC will be happy to provide supporting documentation if needed in consideration of this request.

- A. The Cahaba River TMDL utilized the "reference-condition approach" wherein ADEM committed to implement continued stream modeling as part of the adaptive management approach before implementing the initial target limit of 0.043 mg/l monthly average value.
- B. SWWC has performed extensive testing utilizing the most reasonable best available technology wherein achieving the 0.043 mg/l target limit has been inconsistent.
- C. Low level TP laboratory equipment yields inconsistent results on split samples.
- D. Once threatened and declared extinct species of a particular snail native to the Cahaba River has been found since the implementation of the 2007 nutrient TMDL.

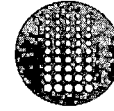
Additionally, we trust ADEM will continue to rely on the adaptive management approach regarding the initial target value presented in the TMDL wherein additional in-stream monitoring might result in a refinement of the 0.043 mg/l TP target limit.

Should you have any questions or comments regarding this request, please feel free to contact me.

Sincerely,

Jesse Kelley  
Operations Manager  
SWWC Services, Inc

C: John Bonnano; Enviro Services, Inc



**SouthWest  
Water Company**

728 Volare Drive  
Birmingham, AL 35244  
Phone 205.987.8352  
Fax 205.987.8337  
www.swwc.com

May 26, 2023

Dustin Stokes  
Alabama Department of Environmental Management  
Post Office Box 301463  
Montgomery, AL 36130-1463

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RE: Liberty Park WRRF Permit Revocation & Renewal  
NPDES Permit AL0067814

JAN 30 2023

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Dustin:

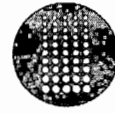
On behalf of Enviro Services, L.L.C.(Enviro), SWWC Services, Inc, (SWWC) has enclosed herein the NPDES permit application to revoke & renew for the Liberty Park Water Resource and Recovery Facility (WRRF). I have included Form 188, 2A, 2S & 2F for each Outfall associated with this facility. Please note, per our discussion Form 2A has temporarily omitted Table C as we work to get three samples collected and tested. Table C will be submitted by June 30th.

In Nov 2020, ADEM performed a stream model for Enviro with the intent to add an additional discharge outfall just downstream of the current outfall (020). The intent of this additional outfall is part of the overall expansion plan for the Liberty Park development.

Upon obtaining the new outfall (030), Enviro would furthermore request eliminating the Golf Course irrigation outfall (0053). The sole intent of 0053 was to supplement the Golf Irrigation system with reuse water. Once 030 is granted, that is no longer necessary. This would leave Enviro's permit with only the two remaining direct discharge outfalls of 020 & 030. The next phase of development would allow for 020 to be eliminated. This could occur as soon as the fall of 2024 with the installation of a valve and connection to the existing golf course force main.

I have attached an aerial depiction showing the current and proposed layout for your review.

Lastly, as you are aware, Enviro is currently under construction to expand the facility to accommodate flows up to the tiered 1.6mgd. The new construction is expected to be complete sometime in 2024. SWWC will update you accordingly.



**SouthWest  
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RE: Liberty Park WRRF Permit Revocation & Renewal  
NPDES Permit AL0067814

Accordingly, included herewith the NPDES Application is a check made payable to ADEM, in the amount of \$8,075.

Should you have any questions or comments regarding this Permit Renewal Application, please feel free to contact me.


Sincerely,

Jesse Kelley  
Operations Manager  
SWWC Services, Inc

C: File w/attachments



EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Form Approved 03/05/19 OMB No. 2040-0004
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Form 2A NPDES		<b>U.S. Environmental Protection Agency</b> <b>Application for NPDES Permit to Discharge Wastewater</b> <b>NEW AND EXISTING PUBLICLY OWNED TREATMENT WORKS</b>
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**SECTION 1. BASIC APPLICATION INFORMATION FOR ALL APPLICANTS (40 CFR 122.21(j)(1) and (9))**

Facility Information	1.1	Facility name Liberty Park WRRF		
		Mailing address (street or P.O. box) 1000 Urban Center Dr Suite 235		
		City or town Birmingham	State AL	ZIP code 35242
		Contact name (first and last) John Bonanno	Title Vice President	Phone number (205) 945-6560
		Email address jbonnano@libertypark.com		
		Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address 13059 Liberty Parkway		
		City or town Vestavia Hills	State AL	ZIP code 35242
	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 Enviro Services, LLC.		
		Applicant address (street or P.O. box) 1000 Urban Center Dr Suite 235		
		City or town Vestavia Hills	State AL	ZIP code 35242
		Contact name (first and last) Jesse Kelley	Title Operations Mgr	Phone number (205) 987-8352
		Email address jkelley@swwc.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 type="checkbox"/> Applicant <input checked="" 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.)		
		<b>Existing Environmental Permits</b>		
		<input checked="" type="checkbox"/> NPDES (discharges to surface water) AL0067814	<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 type="checkbox"/> Other (specify)	

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EPA Identification Number

NPDES Permit Number

Facility Name

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

AL0067814

Liberty Park WRRF

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	



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 mgd	

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)?  
 Yes  No → SKIP to Item 1.23.

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.)

Discharges into marine waters (CWA Section 301(h))  Water quality related effluent limitation (CWA Section 302(b)(2))

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?  
 Yes  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)	SWWC Services, Inc	Meeks Environmental	
Mailing address (street or P.O. box)	728 Volare Dr	1625 Holmes Dr	
City, state, and ZIP code	Birmingham, AL 35244	Bessemer, AL	
Contact name (first and last)	Jesse Kelley	Steve Meeks	
Phone number	(205) 987-8352	(205) 425-8303	
Email address	jkelly@swwc.com	info@meeksonsite.com	
Operational and maintenance responsibilities of contractor	Operate and Maintain treatment facility and collection system	Hauls dewatered sludge to Jefferson County landfill	

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

<b>Design Flow</b>	<b>Outfalls to Waters of the United States</b>					
	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.				
<b>Inflow and Infiltration</b>	2.2	Provide the treatment works' current average daily volume of inflow and infiltration.	<b>Average Daily Volume of Inflow and Infiltration</b> 50,000 gpd			
	Indicate the steps the facility is taking to minimize inflow and infiltration. We perform routine cleaning and TVI of gravity collection system to assist in performance and help identify problem areas that are to be corrected. We monitor lift station run times and are able to identify any anomalies that need to be corrected.					
<b>Topographic Map</b>	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				
<b>Flow Diagram</b>	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				
<b>Scheduled Improvements and Schedules of Implementation</b>	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. Adding new treatment tankage and equipment to reach 1.6 mgd					
	2.					
	3.					
	4.					
	2.6	Provide scheduled or actual dates of completion for improvements.				
<b>Scheduled or Actual Dates of Completion for Improvements</b>						
	<b>Scheduled Improvement (from above)</b>	<b>Affected Outfalls (list outfall number)</b>	<b>Begin Construction (MM/DD/YYYY)</b>	<b>End Construction (MM/DD/YYYY)</b>	<b>Begin Discharge (MM/DD/YYYY)</b>	<b>Attainment of Operational Level (MM/DD/YYYY)</b>
	1.	020	06/01/2022	02/01/2024	04/01/2024	04/01/2024
	2.	030	06/01/2022	02/01/2024	04/01/2024	04/01/2024
	3.					
	4.					
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: <p style="text-align: center;">RECEIVED</p>					

**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>020</u>		Outfall Number <u>030</u>		Outfall Number _____	
	State	AL		AL			
	County	Jefferson		Jefferson			
	City or town	Birmingham		Birmingham			
	Distance from shore	5 ft.		5 ft.		ft.	
	Depth below surface	0 ft.				ft.	
	Average daily flow rate	0.77 mgd		0.00 mgd		mgd	
	Latitude	33° 28' 24.9" N		33° 29' 2.01" N		° ' "	
	Longitude	-86° 41' 8.50" W		-86° 40' 34.1" 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)						
Average flow of each discharge	mgd		mgd		mgd		
Months in which discharge occurs							
Diffuser Type	3.4	Are any of the outfalls listed under Item 3.1 equipped with a diffuser? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.6.					
	3.5	Briefly describe the diffuser type at each applicable outfall.					
		Outfall Number _____		Outfall Number _____		Outfall Number _____	
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.					

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FEB 23 2024



AL0067814

Liberty Park WRRF

Receiving Water Description	3.7	Provide the receiving water and related information (if known) for each outfall.		
		Outfall Number <u>020</u>	Outfall Number <u>030</u>	Outfall Number _____
	Receiving water name	UT to Gumsuck Branch	Gumsuck Branch	
	Name of watershed, river, or stream system	Cahaba	Cahaba	
	U.S. Soil Conservation Service 14-digit watershed code	NA	NA	
	Name of state management/river basin	Cahaba River	Cahaba River	
	U.S. Geological Survey 8-digit hydrologic cataloging unit code			
	Critical low flow (acute)	NA cfs	NA cfs	cfs
	Critical low flow (chronic)	NA cfs	NA cfs	cfs
	Total hardness at critical low flow	NA mg/L of CaCO <sub>3</sub>	NA mg/L of CaCO <sub>3</sub>	mg/L of CaCO <sub>3</sub>
Treatment Description	3.8	Provide the following information describing the treatment provided for discharges from each outfall.		
		Outfall Number <u>020</u>	Outfall Number <u>030</u>	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 checked="" type="checkbox"/> Advanced <input type="checkbox"/> Other (specify) _____	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input checked="" type="checkbox"/> Secondary <input checked="" 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			
	BOD <sub>5</sub> or CBOD <sub>5</sub>	>85 %	>85 %	%
	TSS	>85 %	>85 %	%
	Phosphorus	<input type="checkbox"/> Not applicable 20 %	<input type="checkbox"/> Not applicable 20 %	%
	Nitrogen	<input type="checkbox"/> Not applicable >75 %	<input type="checkbox"/> Not applicable >75 %	%
Other (specify) _____	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	%	

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<b>Treatment Description Continued</b>	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.																												
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align:center;">Outfall Number <u>020</u></td> <td style="text-align:center;">Outfall Number <u>030</u></td> <td style="text-align:center;">Outfall Number _____</td> </tr> <tr> <td>Disinfection type</td> <td style="text-align:center;">UV</td> <td style="text-align:center;">UV</td> <td></td> </tr> <tr> <td>Seasons used</td> <td style="text-align:center;">Year Around</td> <td style="text-align:center;">Year Around</td> <td></td> </tr> <tr> <td>Dechlorination used?</td> <td> <input checked="" type="checkbox"/> Not applicable  <input type="checkbox"/> Yes  <input type="checkbox"/> No         </td> <td> <input checked="" type="checkbox"/> Not applicable  <input type="checkbox"/> Yes  <input type="checkbox"/> No         </td> <td> <input type="checkbox"/> Not applicable  <input type="checkbox"/> Yes  <input type="checkbox"/> No         </td> </tr> </table>		Outfall Number <u>020</u>	Outfall Number <u>030</u>	Outfall Number _____	Disinfection type	UV	UV		Seasons used	Year Around	Year Around		Dechlorination used?	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" 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												
		Outfall Number <u>020</u>	Outfall Number <u>030</u>	Outfall Number _____																										
	Disinfection type	UV	UV																											
	Seasons used	Year Around	Year Around																											
Dechlorination used?	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" 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																											
<b>Effluent Testing Data</b>	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.																												
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td></td> <td colspan="2" style="text-align:center;">Outfall Number <u>020</u></td> <td colspan="2" style="text-align:center;">Outfall Number <u>030</u></td> <td colspan="2" style="text-align:center;">Outfall Number _____</td> </tr> <tr> <td></td> <td style="text-align:center;">Acute</td> <td style="text-align:center;">Chronic</td> <td style="text-align:center;">Acute</td> <td style="text-align:center;">Chronic</td> <td style="text-align:center;">Acute</td> <td style="text-align:center;">Chronic</td> </tr> <tr> <td>Number of tests of discharge water</td> <td style="text-align:center;">-</td> <td style="text-align:center;">2</td> <td style="text-align:center;">-</td> <td style="text-align:center;">-</td> <td></td> <td></td> </tr> <tr> <td>Number of tests of receiving water</td> <td style="text-align:center;">-</td> <td style="text-align:center;">-</td> <td style="text-align:center;">-</td> <td style="text-align:center;">-</td> <td></td> <td></td> </tr> </table>		Outfall Number <u>020</u>		Outfall Number <u>030</u>		Outfall Number _____			Acute	Chronic	Acute	Chronic	Acute	Chronic	Number of tests of discharge water	-	2	-	-			Number of tests of receiving water	-	-	-	-		
		Outfall Number <u>020</u>		Outfall Number <u>030</u>		Outfall Number _____																								
		Acute	Chronic	Acute	Chronic	Acute	Chronic																							
	Number of tests of discharge water	-	2	-	-																									
	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 type="checkbox"/> Yes → Complete Table B, including chlorine. <input checked="" 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"> <li>• The facility has a design flow greater than or equal to 1 mgd.</li> <li>• The POTW has an approved pretreatment program or is required to develop such a program.</li> <li>• 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).</li> </ul> <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 type="checkbox"/> Yes <input checked="" 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.				
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Date(s) Submitted (MM/DD/YYYY)</th> <th style="width:50%;">Summary of Results</th> </tr> <tr> <td style="text-align: center;">11/15/2022</td> <td>All Results Passed. Other submitted dates:11/09/2021; 11/10/20</td> </tr> </table>	Date(s) Submitted (MM/DD/YYYY)	Summary of Results	11/15/2022	All Results Passed. Other submitted dates:11/09/2021; 11/10/20
	Date(s) Submitted (MM/DD/YYYY)	Summary of Results				
	11/15/2022	All Results Passed. Other submitted dates:11/09/2021; 11/10/20				
	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 checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 4.7.				
	4.2	Indicate the number of SIUs and NSCIUs that discharge to the POTW.				
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Number of SIUs</th> <th style="width:50%;">Number of NSCIUs</th> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> </table>	Number of SIUs	Number of NSCIUs		
	Number of SIUs	Number of NSCIUs				
	4.3	Does the POTW have an approved pretreatment program? <input 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 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 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"/> Rail		
	<input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Other (specify) _____		
	<input type="checkbox"/> Truck	<input type="checkbox"/> Rail		
	<input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Other (specify) _____		
	<input type="checkbox"/> Truck	<input type="checkbox"/> Rail		
	<input type="checkbox"/> Dedicated pipe	<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



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5.4		For each CSO outfall, provide the following information. (Attach additional sheets as necessary.)		
CSO Outfall Description		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.
5.5		Did the POTW monitor any of the following items in the past year for its CSO outfalls?		
CSO Monitoring		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
5.6		Provide the following information for each of your CSO outfalls.		
CSO Events in Past Year		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

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5.7

Provide the information in the table below for each of your CSO outfalls.

CSO Receiving Waters

	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))**

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.

Checklist and Certification Statement

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 type="checkbox"/> w/ Table C	<input type="checkbox"/> w/ Table D <input checked="" type="checkbox"/> w/ Table E <input checked="" type="checkbox"/> w/ additional attachments
<input type="checkbox"/> Section 4: Industrial Discharges and Hazardous Wastes	<input type="checkbox"/> w/ SIU and NSCIU attachments <input type="checkbox"/> w/ additional attachments	<input 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)

John Bonanno

Official title

Vice President

Signature

Date signed

04/27/23

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Outfall Number 0201
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**TABLE A. EFFLUENT PARAMETERS FOR ALL POTWS**

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Biochemical oxygen demand <input type="checkbox"/> BOD <sub>5</sub> or <input checked="" type="checkbox"/> CBOD <sub>5</sub> (report one)	7.85	mg/l	3.22	mg/l	104	SM5210B	<input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Fecal coliform	14	col/100	0.26	col/100	104	EPA1603	2507 col/100 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Design flow rate	1.73	mgd	0.77	mgd	365		
pH (minimum)	6.63	S.U.					
pH (maximum)	7.25	S.U.					
Temperature (winter)	-	-	-	-	-		
Temperature (summer)	-	-	-	-	-		
Total suspended solids (TSS)	9.5	mg/l	2.47	mg/l	104	SM2540D	<input type="checkbox"/> ML <input type="checkbox"/> MDL

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

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**TABLE B. 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 <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Ammonia (as N)	1.27	mg/l	0.10	mg/l	10	4500-NH3D	<input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Chlorine (total residual, TRC) <sup>2</sup>	-	-	-	-	-	-	0.019- <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Dissolved oxygen	12.98	mg/l	8.53	mg/l	10	4500-O	7.0 <input checked="" type="checkbox"/> ML <input type="checkbox"/> MDL
Nitrate/nitrite	11.30	mg/l	8.33	mg/l	10	4500-NO3	report <input type="checkbox"/> ML <input type="checkbox"/> MDL
Kjeldahl nitrogen	11.50	mg/l	0.82	mg/l	10	4500-NH3	report <input type="checkbox"/> ML <input type="checkbox"/> MDL
Oil and grease	-	-	-	-	-	-	- <input type="checkbox"/> ML <input type="checkbox"/> MDL
Phosphorus	1.86	mg/l	0.50	mg/l	10	4500P	report <input type="checkbox"/> ML <input type="checkbox"/> MDL
Total dissolved solids	-	-	-	-	-	-	- <input type="checkbox"/> ML <input type="checkbox"/> MDL

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

<sup>2</sup> 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 <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
<b>Metals, Cyanide, and Total Phenols</b>							
Hardness (as CaCO <sub>3</sub> )	147	mg/l	134	mg/l	3	130.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Antimony, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Arsenic, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Beryllium, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Cadmium, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Chromium, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Copper, total recoverable	ND	mg/l	NS	mg/l	3	200.8	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Lead, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Mercury, total recoverable	1.43	ng/l	0.94	mg/l	3	EPA 1631E	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Nickel, total recoverable	.0015	mg/l	.0014	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Selenium, total recoverable	ND	mg/l	ND	mg/l	3	200.8	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Silver, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Thallium, total recoverable	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Zinc, total recoverable	.0178	mg/l	.0167	mg/l	3	200.8	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Cyanide	ND	mg/l	ND	mg/l	3	ASTM D7511-09	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Total phenolic compounds	0.041	mg/l	0.014	mg/l	3	420.4	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
<b>Volatile Organic Compounds</b>							
Acrolein	ND	mg/l	ND	mg/l	3	624.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Acrylonitrile	ND	mg/l	ND	mg/l	3	624.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzene	ND	mg/l	ND	mg/l	3	624.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Bromoform	ND	mg/l	ND	mg/l	3	624.1	mg/l <input 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 <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Carbon tetrachloride	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Chlorobenzene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Chlorodibromomethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Chloroethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2-chloroethylvinyl ether	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Chloroform	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Dichlorobromomethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,1-dichloroethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichloroethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
trans-1,2-dichloroethylene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,1-dichloroethylene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichloropropane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,3-dichloropropylene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Ethylbenzene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Methyl bromide	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Methyl chloride	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Methylene chloride	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,1,2,2-tetrachloroethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Tetrachloroethylene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Toluene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,1,1-trichloroethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,1,2-trichloroethane	ND	mg/l	ND	mg/l	3	200.7	mg/l <input 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 <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Trichloroethylene	ND	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Vinyl chloride	ND**	mg/l	ND	mg/l	3	200.7	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
<b>Acid-Extractable Compounds</b>							
p-chloro-m-cresol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2-chlorophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dichlorophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dimethylphenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
4,6-dinitro-o-cresol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2-nitrophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
4-nitrophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Pentachlorophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Phenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4,6-trichlorophenol	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
<b>Base-Neutral Compounds</b>							
Acenaphthene	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Acenaphthylene	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Anthracene	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzidine	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(a)anthracene	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(a)pyrene	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
3,4-benzofluoranthene	ND	mg/l	ND	mg/l	3	642.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Outfall Number 020
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Form Approved 03/05/19  
OMB No. 2040-0004

**TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS**

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(k)fluoranthene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethoxy) methane	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethyl) ether	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroisopropyl) ether	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-ethylhexyl) phthalate	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
4-bromophenyl phenyl ether	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Butyl benzyl phthalate	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2-chloronaphthalene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
4-chlorophenyl phenyl ether	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Chrysene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
di-n-butyl phthalate	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
di-n-octyl phthalate	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Dibenzo(a,h)anthracene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichlorobenzene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,3-dichlorobenzene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,4-dichlorobenzene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
3,3-dichlorobenzidine	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Diethyl phthalate	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Dimethyl phthalate	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrotoluene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,6-dinitrotoluene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Outfall Number 020
---------------------------	----------------------------------	------------------------------------	-----------------------

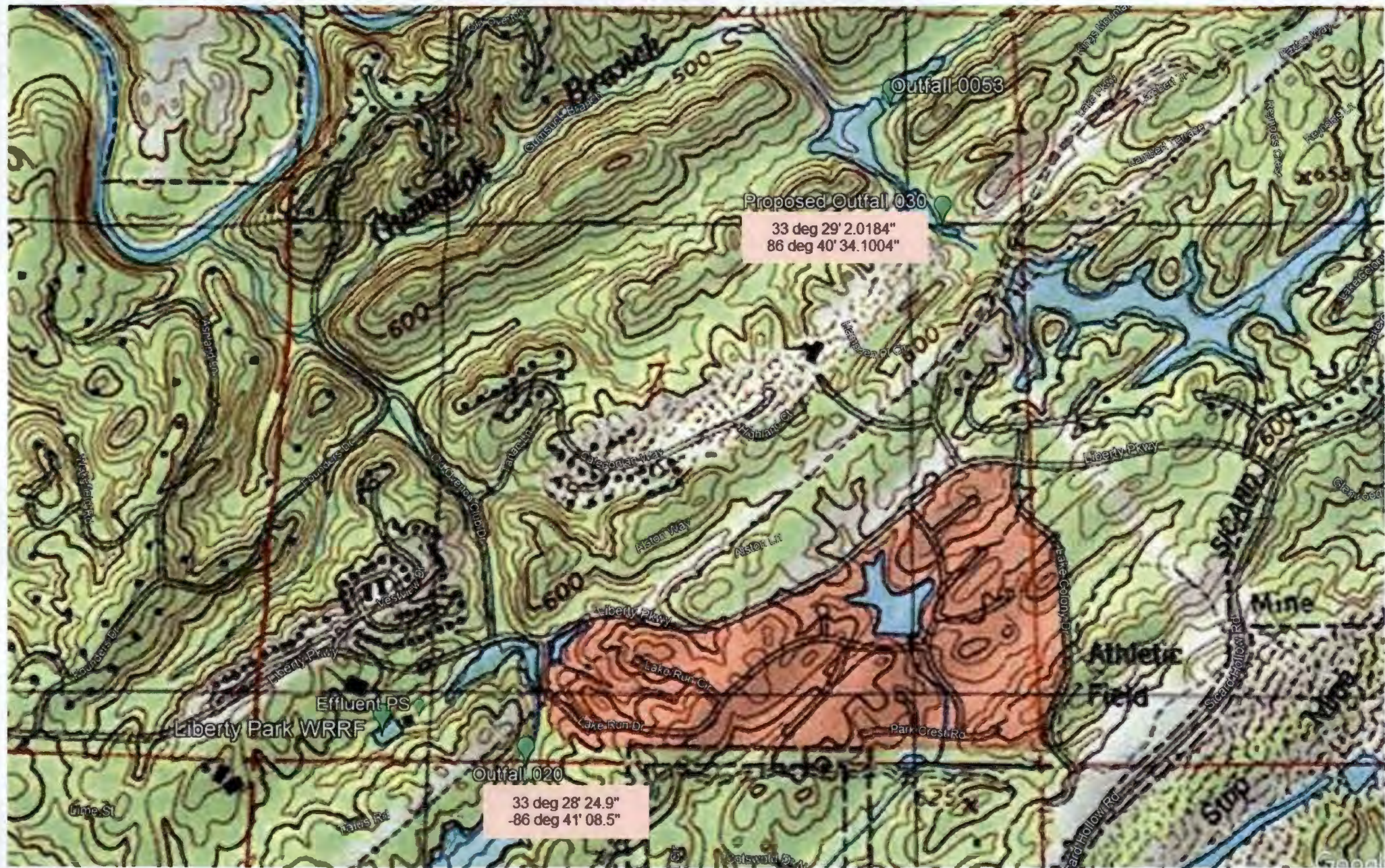
Form Approved 03/05/19  
OMB No. 2040-0004

**TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS**

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method <sup>1</sup>	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Fluoranthene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Fluorene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorobenzene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorobutadiene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorocyclo-pentadiene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachloroethane	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Indeno(1,2,3-cd)pyrene	ND	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Isophorone	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Naphthalene	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Nitrobenzene	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodi-n-propylamine	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodimethylamine	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodiphenylamine	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Phenanthrene	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
Pyrene	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL
1,2,4-trichlorobenzene	N.D.	mg/l	ND	mg/l	3	625.1	mg/l <input type="checkbox"/> ML <input type="checkbox"/> MDL

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





Outfall 0053

Proposed Outfall 030

33 deg 29' 2.0184"  
86 deg 40' 34.1004"

Outfall 020

33 deg 28' 24.9"  
-86 deg 41' 08.5"

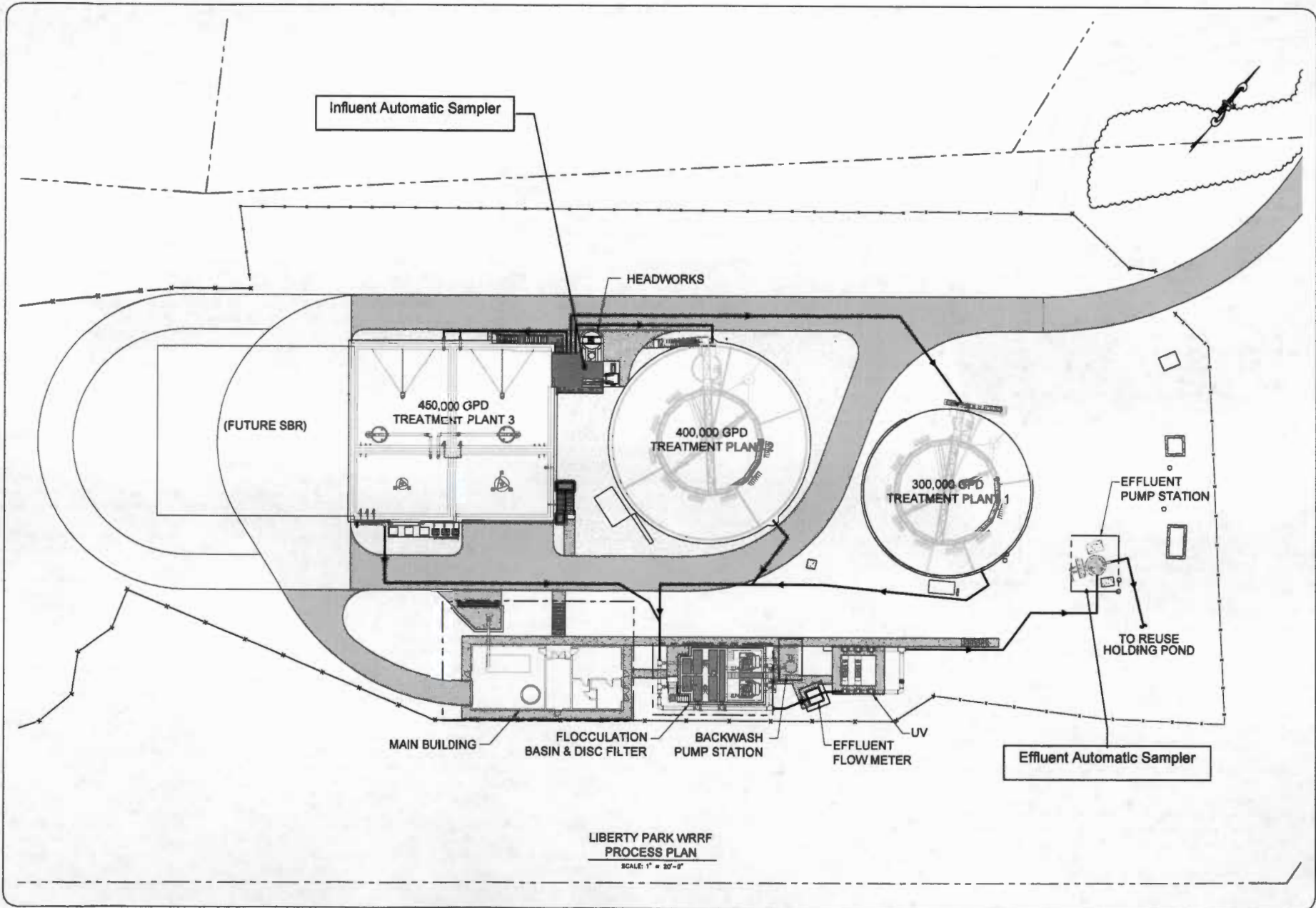
Effluent PS  
Liberty Park WRRF

Athletic  
Field

Mine

Stump





Influent Automatic Sampler

HEADWORKS

(FUTURE SBR)

450,000 GPD  
TREATMENT PLANT 3

400,000 GPD  
TREATMENT PLANT 2

300,000 GPD  
TREATMENT PLANT 1

EFFLUENT  
PUMP STATION

TO REUSE  
HOLDING POND

MAIN BUILDING

FLOCCULATION  
BASIN & DISC FILTER

BACKWASH  
PUMP STATION

EFFLUENT  
FLOW METER

UV

Effluent Automatic Sampler

**LIBERTY PARK WRRF  
PROCESS PLAN**

SCALE: 1" = 30'-0"

NO.	DATE	DESCRIPTION

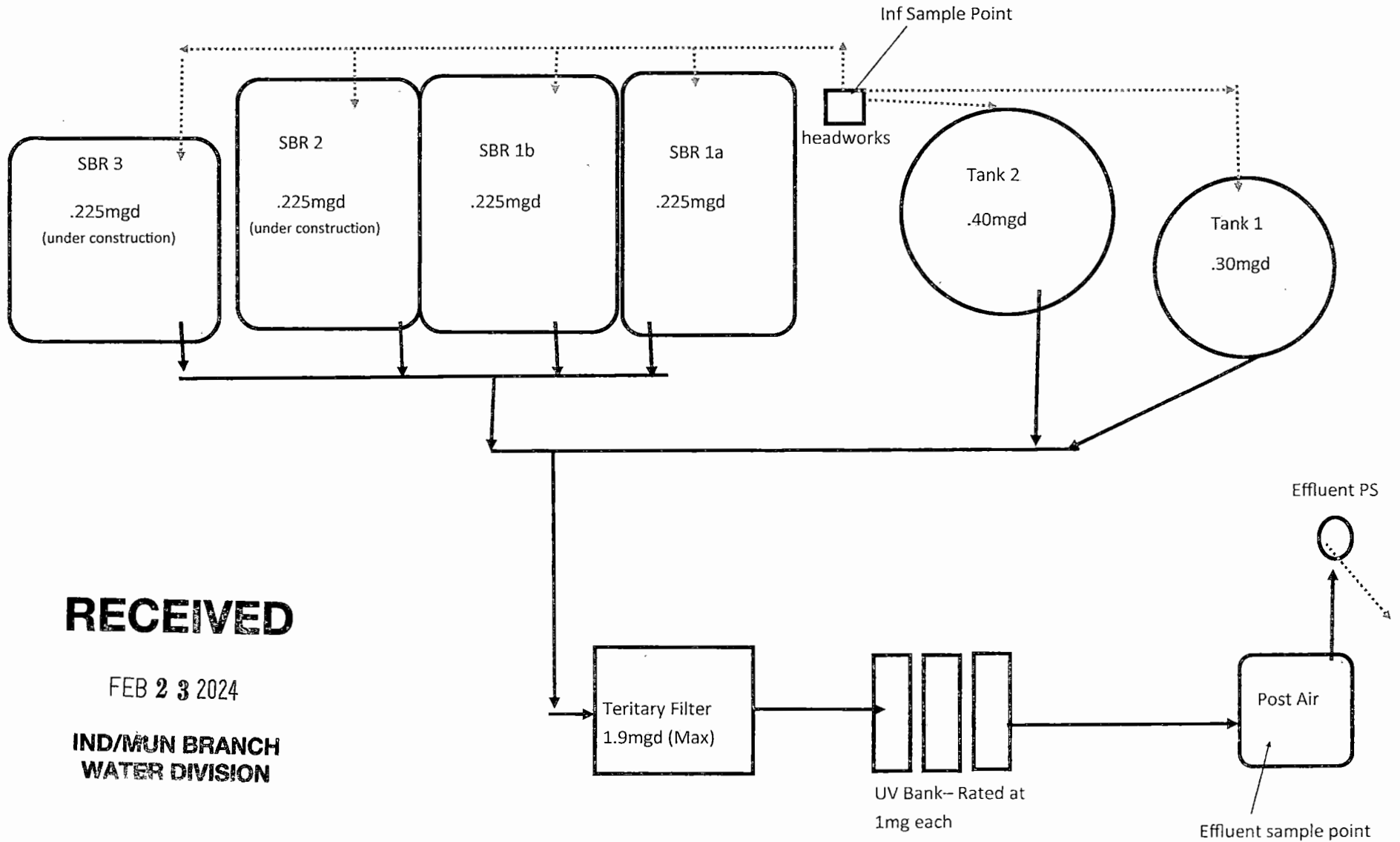
PREPARED  
 CHECKED  
 DESIGNED  
 DRAWN  
 REVISIONS



ENVIRO SERVICES, LLC  
 VESTAVIA HILLS, AL  
**LIBERTY PARK WRRF  
 IMPROVEMENTS**

PROPOSED PERMIT

JOB NO: LP-1310  
 DATE: MAY 2016  
 DESIGNED BY: CDS  
 DRAWN BY: CDS  
 SCALE: AS NOTED  
 DWG:  
 SHEET NUMBER **1**



**RECEIVED**

FEB 23 2024

**IND/MUN BRANCH  
WATER DIVISION**

**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**

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

**SECTION A – GENERAL INFORMATION**

1. Facility Name: Liberty Park Water Resource Recovery Facility (WRRF) Facility County: Jefferson **RECEIVED**

a. Operator Name: SWWC Services, Inc

b. Is the operator identified in A.1.a, the owner of the facility?  Yes  No

JUN 02 2023

If No, provide the following information:

Operator Name: SWWC Services, Inc

**IND/MUN BRANCH  
WATER DIVISION**

Operator Address (Street or PO Box): 728 Volare Drive

City: Birmingham

AL

Zip: 35244

Phone Number: 205-987-8352

Email Address: jkelly@swwc.com

Operator Status:

Public-federal  Public-state  Public-other (please specify): \_\_\_\_\_

Private  Other (please specify): \_\_\_\_\_

Describe the operator's scope of responsibility for the facility:

Operate and Manage Treatment Facility and Collection System through contract operations.

c. Name of Permittee\* if different than Operator: Enviro Services, LLC

*\*Permittee will be responsible for compliance with the conditions of the permit*

2. NPDES Permit Number: AL 0067814 (Not applicable if initial permit application)

3. Facility Location (Front Gate): Latitude: 33° 28' 29.6" N Longitude: 86° 41' 18" W

4. Responsible Official (as described on last page of this application):

Name and Title: John Bonanno- Vice President

Address: 1000 Urban Center Dr Suite 235

City: Vestavia Hills

State: Alabama

Zip: 35242

Phone Number: 770-367-9552

Email Address: jbanno@libertypark.com

5. Designated Facility/DMR Contact:

Name: Robert Adams Title: Facility Manager  
 Phone Number: 205-987-8352 Email Address: radams@swwc.com

6. Designated Emergency Contact:

Name: John Bonanno Title: - Vice President  
 Phone Number: 770-367-9552 Email Address: jbonanno@libertypark.com

7. 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.4.

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

8. 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>
NA			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SECTION B – WASTEWATER DISCHARGE INFORMATION**

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

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

For each shared outfall, provide the following:

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

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

**Current:** Flow Metering  Yes  No  N/A  
 Sampling Equipment  Yes  No  N/A  
**Planned:** Flow Metering  Yes  No  N/A  
 Sampling Equipment  Yes  No  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:

4. 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

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

Yes, the facility is current under construction for expansion bringing the treatment capacity to a minimum 1.6mgd

**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
Aerobic Sludge	Digesters (3) within Facility

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

**SECTION D – INDUSTRIAL INDIRECT DISCHARGE CONTRIBUTORS**

1. 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?
NA				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

2. 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:

- |  | <u>Yes</u>               | <u>No</u>                |
|--|--------------------------|--------------------------|
| 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.

- 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.
- 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?

See the Anti-Degradation Evaluation



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

See the Anti-Degradation Evaluation

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

See the Anti-Degradation Evaluation

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

See the Anti-Degradation Evaluation

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

Receiving raw sewage, treating, & discharging high quality effluent back into the environment.  
See the Anti-Degradation Evaluation

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

Will allow for more residential and commercial development.  
See the Anti-Degradation Evaluation

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#### 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. 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. If the facility design capacity is equal to or greater than 1 MGD, Form 2F is also required.
2. Applicants for new or existing land application of sanitary wastewater must submit Form 2A and Form 2F.
3. Applicants for new and existing discharges of process wastewater from water treatment facilities (i.e. public water supply treatment plants) must submit Form 1 and Form 2C.
4. Applicants that generate sewage sludge, derive a material from sewage sludge, or dispose of sewage sludge must submit Part 2 of Form 2S.

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#### SECTION H– ENGINEERING REPORT/BMP PLAN REQUIREMENTS

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

**SECTION I – RECEIVING WATERS**

Outfall No.	Receiving Water(s)	303(d) Segment?		Included in TMDL?*	
020	UT Gumsuck Branch in Cahaba River Basin	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
030	UT Gumsuck Branch in Cahaba River Basin	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

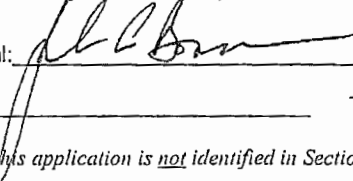
\*If a TMDL Compliance Schedule is requested, the following should be attached as supporting documentation:

- (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: 2.20.2024  
 Name: John Borriano Title: Vice President

If the Responsible Official signing this application is not identified in Section A.4 or A.7, 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.

**WEATHERLY WATER RECLAMATION SYSTEM**

**ADEM FORM 188 ANTI-DEGRADATION EVALUATION**

**AND**

**ATTACHMENT 3 TO SUPPLEMENTARY FORM**

**ADEM FORM 313**

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MUNICIPAL SECTION

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## **1.0 INTRODUCTION**

The Liberty Park development is located in Vestavia Hills, Alabama and is served by a private wastewater treatment facility owned by Enviro Services, LLC. The treatment system is known as the Liberty Park Water Resource Recovery Facility (WWTP). The operations and maintenance of the system is contracted to SWWC Services, Inc.

Wastewater treatment is accomplished through a biological treatment process, followed by tertiary filtration and ultraviolet disinfection. Originally, the treated effluent was discharged through land application (spray irrigation), and a hydraulically controlled release outfall on a tributary to the Cahaba River. Subsequently, the land application site was developed and multiple surface water outfalls were utilized depending on the needs of the golf course, as the effluent is used as supplemental water for irrigation. Currently, the effluent from the polishing pond is discharged through an outlet to a golf course irrigation lift station. The lift station was used to supply the irrigation system directly and requires ongoing maintenance due to the sophisticated controls. The proposed plan would bypass the golf course lift station and utilize the existing WWTP effluent lift station to pump directly to the golf course irrigation source pond.

The proposed project would eliminate existing outfall 0053 and would replace it with proposed outfall 0030. A waste load allocation model has already been performed for the new outfall.

The project location and outfall locations are shown in Figure 1.





Figure 1: Project Vicinity Map\*  
\*from Google Maps copyright 2023 Google

The existing treatment system is under construction to increase the treatment capacity of the facility to 1.6 MGD. The scope of work includes the addition of another sequencing batch reactor (SBR), UV disinfection and post aeration. A future project will include flow equalization and second stage filtration to meet the final tier of TP limits as required for major surface water dischargers in this watershed.

The Liberty Park WRRF produces high-quality water suitable for reuse. A portion of the effluent is used for irrigation of the golf course. The proposed outfall will allow for direct discharge to the irrigation pond at the Old Overton Golf Course.

In accordance with 40 CFR 131.12 and the Alabama Department of Environmental Management Administrative Code, Section 335-6-10-.04 for anti-degradation, the following report for the Liberty Park WRRF is hereby submitted to ADEM for comment and approval.

## 2.0 ANTI-DEGRADATION EVALUATION

- A. What environmental or public health problem will the discharger be correcting?  
*This facility provides centralized treatment of wastewater for an existing residential development and other potential developments in the surrounding area and eliminate the need for individual septic tanks and disposal fields, which have a higher potential for failure. This system has been engineered to protect the water quality and habitat in the area and provide reuse quality effluent.*
- B. How much will the discharger be increasing employment (at its existing facility or as the result of locating a new facility)?  
*This facility will need additional support personnel and operator attention. The facility will also allow for continued growth in the development which includes additional businesses and retail shops in the City which require more employees.*
- C. How much reduction in employment will the discharger be avoiding?  
*This facility will only enhance opportunity for employment.*
- D. How much additional state or local taxes will the discharger be paying?  
*The increased growth of the service area which includes a hotel and restaurants will generate additional sales tax. The expansion of the WWTP is needed to provide capacity for the growth.*
- E. What public service to the community will the discharger be providing?  
*This project will support additional growth in the development which help attract new businesses and improve the quality of life of the local residents. The facility will provide centralized wastewater treatment under highly restrictive discharge requirements.*
- F. What economic or social benefit will the discharger be providing to the community?  
*Aside from the additional property tax base and sales tax from new business, the WWTP produces water which is used for irrigation of the golf course.*



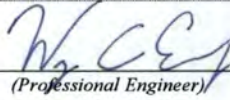
### 3.0 ALTERNATIVES ANALYSIS

*Applicant/Project: Liberty Park WWRF*


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

Alternative	Viable	Non-Viable	Comment
1 Land Application		X	See 4.01
2 Pretreatment/Discharge to POTW		X	See 4.02
3 Relocation of Discharge	X		See 4.03
4 Reuse/Recycle		X	See 4.04
5 Process/Treatment Alternatives		X	See 4.05
6 On-site/Sub-surface Disposal		X	See 4.06

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

Signature:   
(Professional Engineer)

Date: November 18, 2023



4.0 ADEM FORM 313

4.01 ALTERNATIVE 1:

EXTENDED AERATION WWTP DISCHARGE TO LAND APPLICATION

Calculation of Total Annualized Project Costs  
for Private-Sector Projects

Capital Costs to be Financed (Supplied by applicant)	<u>\$ 7,276,000 (1)</u>
Interest rate for Financing (Expressed as a decimal)	<u>0.06 (i)</u>
Time Period of Financing (Assume 10 years*)	<u>10 years (n)</u>
Annualization Factor = $\frac{i}{(1+i)^{10} - 1} + i$	<u>0.136 (2)</u>
Annualized Capital Cost [Calculate: (1) x (2) ]	<u>\$ 989,536 (3)</u>
Annual Cost of Operation and Maintenance (including but not limited to monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement)**	<u>\$ 320,250 (4)</u>
<b>Total Annual Cost of Pollution Control Project [ (3) + (4) ]</b>	<b><span style="border: 1px solid black; padding: 2px;">\$ 1,309,786 (5)</span></b>

\* While actual payback schedules may differ across projects and companies, assume equal annual payments over a 10-year period for consistency in comparing projects.

\*\* For recurring costs that occur less frequently than once a year, pro rate the cost over the relevant number of years (e.g., for pumps replaced once every three years, include one-third of the cost in each year).

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**4.02 ALTERNATIVE 2:**

**PRETREATMENT/DISCHARGE TO POTW (CONNECT TO JEFFERSON COUNTY ESD SEWER SYSTEM)**

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

Capital Costs to be Financed (Supplied by applicant)	<u>\$ 8,600,000 (1)</u>
Interest rate for Financing (Expressed as a decimal)	<u>0.06 (i)</u>
Time Period of Financing (Assume 10 years*)	<u>10 years (n)</u>
Annualization Factor = $\frac{i}{(1+i)^{10} - 1} + i$	<u>0.136 (2)</u>
Annualized Capital Cost [Calculate: (1) x (2) ]	<u>\$ 1,169,600 (3)</u>
Annual Cost of Operation and Maintenance (including but not limited to monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement)**	<u>\$ 38,325 (4)</u>
<b>Total Annual Cost of Pollution Control Project [ (3) + (4) ]</b>	<b><span style="border: 1px solid black; padding: 2px;">\$ 1,207,925 (5)</span></b>

\* While actual payback schedules may differ across projects and companies, assume equal annual payments over a 10-year period for consistency in comparing projects.

\*\* For recurring costs that occur less frequently than once a year, pro rate the cost over the relevant number of years (e.g., for pumps replaced once every three years, include one-third of the cost in each year).

**4.03 ALTERNATIVE 3:**

**RELOCATION OF DISCHARGE**

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

Capital Costs to be Financed (Supplied by applicant)	<u>\$ 500,000 (1)</u>
Interest rate for Financing (Expressed as a decimal)	<u>0.06 (i)</u>
Time Period of Financing (Assume 10 years*)	<u>10 years (n)</u>
Annualization Factor = $\frac{i}{(1+i)^{10} - 1} + i$	<u>0.136 (2)</u>
Annualized Capital Cost [Calculate: (1) x (2) ]	<u>\$ 68,000 (3)</u>
Annual Cost of Operation and Maintenance (including but not limited to monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement)**	<u>\$ 5,875 (4)</u>
<b>Total Annual Cost of Pollution Control Project [ (3) + (4) ]</b>	<b><span style="border: 1px solid black; padding: 2px;">\$ 73,875 (5)</span></b>

\* While actual payback schedules may differ across projects and companies, assume equal annual payments over a 10-year period for consistency in comparing projects.

\*\* For recurring costs that occur less frequently than once a year, pro rate the cost over the relevant number of years (e.g., for pumps replaced once every three years, include one-third of the cost in each year).

**4.04 ALTERNATIVE 4:**

**REUSE/RECYCLE (OFF-SITE PUBLIC ACCESS & RESTRICTED ACCESS PROJECT)**

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

Capital Costs to be Financed (Supplied by applicant)	<u>\$10,000,000 (1)</u>
Interest rate for Financing (Expressed as a decimal)	<u>0.06 (i)</u>
Time Period of Financing (Assume 10 years*)	<u>10 years (n)</u>
Annualization Factor = $\frac{i}{(1+i)^{10} - 1} + i$	<u>0.136 (2)</u>
Annualized Capital Cost [Calculate: (1) x (2) ]	<u>\$ 1,360,000 (3)</u>
Annual Cost of Operation and Maintenance (including but not limited to monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement)**	<u>\$ 275,000 (4)</u>
<b>Total Annual Cost of Pollution Control Project [ (3) + (4) ]</b>	<b><span style="border: 1px solid black; padding: 2px;"><u>\$ 1,635,000 (5)</u></span></b>

\* While actual payback schedules may differ across projects and companies, assume equal annual payments over a 10-year period, for consistency in comparing projects.

\*\* For recurring costs that occur less frequently than once a year, pro rate the cost over the relevant number of years (e.g., for pumps replaced once every three years, include one-third of the cost in each year).



**4.05 ALTERNATIVE 5:**

**PROCESS/TREATMENT ALTERNATIVES**

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

Capital Costs to be Financed (Supplied by applicant)	<u>\$ 8,500,000 (1)</u>
Interest rate for Financing (Expressed as a decimal)	<u>0.06 (i)</u>
Time Period of Financing (Assume 10 years*)	<u>10 years (n)</u>
Annualization Factor = $\frac{i}{(1+i)^{10} - 1} + i$	<u>0.136 (2)</u>
Annualized Capital Cost [Calculate: (1) x (2) ]	<u>\$ 1,156,000 (3)</u>
Annual Cost of Operation and Maintenance (including but not limited to monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement)**	<u>\$ 250,000 (4)</u>
<b>Total Annual Cost of Pollution Control Project [ (3) + (4) ]</b>	<b><span style="border: 1px solid black; padding: 2px;">\$ 1,406,000 (5)</span></b>

\* While actual payback schedules may differ across projects and companies, assume equal annual payments over a 10-year period for consistency in comparing projects.

\*\* For recurring costs that occur less frequently than once a year, pro rate the cost over the relevant number of years (e.g., for pumps replaced once every three years, include one-third of the cost in each year).

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**4.06 ALTERNATIVE 6:**

**ON-SITE/SUB-SURFACE DISPOSAL (AT SAME SITE AS LAND APPLICATION DISPOSAL)**

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

Capital Costs to be Financed (Supplied by applicant)	<u>\$ 7,400,000 (1)</u>
Interest rate for Financing (Expressed as a decimal)	<u>0.06 (i)</u>
Time Period of Financing (Assume 10 years*)	<u>10 years (n)</u>
Annualization Factor = $\frac{i}{(1+i)^{10} - 1} + i$	<u>0.136 (2)</u>
Annualized Capital Cost [Calculate: (1) x (2) ]	<u>\$ 1,006,400 (3)</u>
Annual Cost of Operation and Maintenance (including but not limited to monitoring, inspection, permitting fees, waste disposal charges, repair, administration and replacement)**	<u>\$ 320,000.00 (4)</u>
<b>Total Annual Cost of Pollution Control Project [ (3) + (4) ]</b>	<b><span style="border: 1px solid black; padding: 2px;">\$ 1,326,400 (5)</span></b>

\* While actual payback schedules may differ across projects and companies, assume equal annual payments over a 10-year period for consistency in comparing projects.

\*\* For recurring costs that occur less frequently than once a year, pro rate the cost over the relevant number of years (e.g., for pumps replaced once every three years, include one-third of the cost in each year).

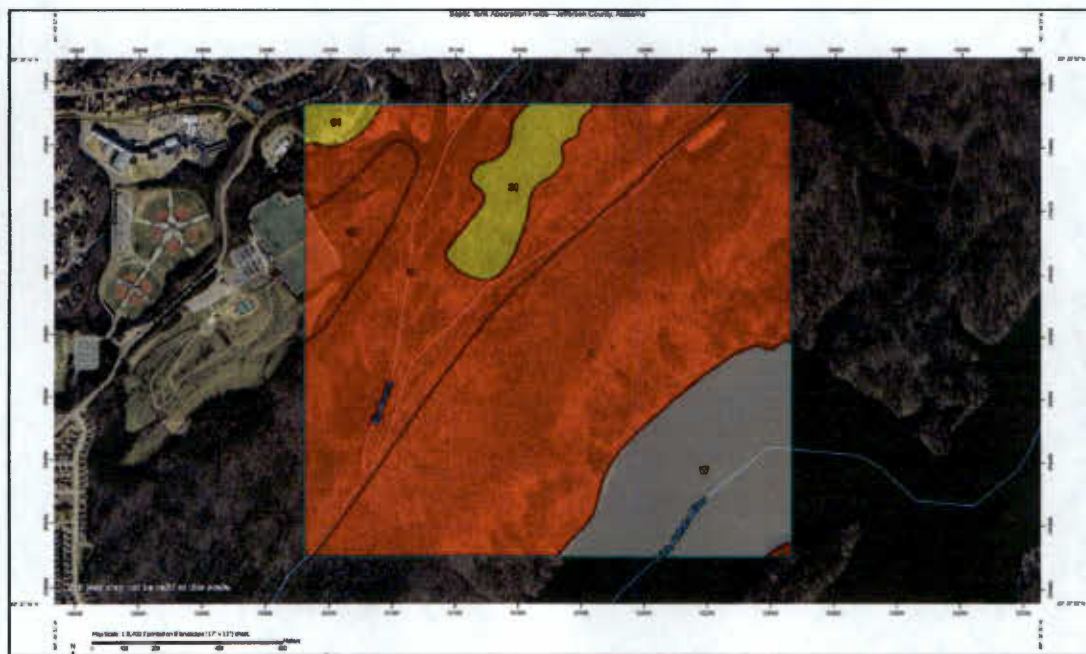
## 5.0 SUMMARY

The analysis of alternatives was based on several assumptions. We will discuss the methodology and assumptions which went into the cost analysis for each alternative in this section.

Option 4.01 Land Application was a method of disposal at Liberty Park when the system was originally developed. Once the property values increased this method was no longer tenable along with the need for additional land requirements for the increased flow generated by the development. Land application for disposal of 1.6 million gallons per day is no longer feasible due to the footprint, adverse topography, marginal soil conditions and environmentally sensitive property that would need to be utilized for application.

For the sake of our analysis, we will assume that there is property available for purchase for effluent land application. The area would most likely be located between the Liberty Park development and Lake Purdy. As the primary water source for the Birmingham Water Works (BWWB) system, there are protective covenants adopted by BWWB which limit use within the watershed. A land application system in this sensitive area would require significant input and concessions by the BWWB along with public input.

Further, the soils in this area were evaluated and primarily consist of the following general classifications (excerpted from the Web Soil Survey of Jefferson County by the Natural Resources Conservation Service, <http://websoilsurvey.nrcs.usda.gov/app/>):



The soil survey indicates that most of the area of interest is classified as very limited (red shading) for septic tank absorption fields which would be applicable to a land application system. This rating is generally a result of the topography in this area. The following describes the predominant soils series in this area in greater detail:

**Septic Tank Absorption Fields**

Map unit symbol	Map unit name	Rating	Component name (percent)	Rating reasons (numeric values)	Acres in AOI	Percent of AOI
9	Bodine-Fullerton association, steep	Very limited	Bodine (55%)	Slope (1.00)	251.1	45.9%
			Lee (1%)	Seepage, bottom layer (1.00)		
				Flooding (1.00)		
				Depth to saturated zone (1.00)		
			Slow water movement (0.50)			
31	Nauvoo fine sandy loam, 8 to 15 percent slopes	Somewhat limited	Nauvoo (85%)	Depth to bedrock (0.91)	32.1	5.9%
				Slope (0.63)		
				Slow water movement (0.50)		
34	Nauvoo-Montevallo association, 10 to 40 percent slopes	Very limited	Nauvoo (45%)	Slope (1.00)	156.4	28.6%
				Depth to bedrock (0.91)		
				Slow water movement (0.50)		
			Montevallo (35%)	Depth to bedrock (1.00)		
				Slope (1.00)		
35	Palmerdale complex, steep	Very limited	Palmerdale (70%)	Slope (1.00)	27.2	5.0%
				Seepage, bottom layer (1.00)		
			Kinston (1%)	Flooding (1.00)		
				Depth to saturated zone (1.00)		
			Slow water movement (0.50)			
W	Water	Not rated	Water (95%)		80.5	14.7%
<b>Totals for Area of Interest</b>					<b>547.3</b>	<b>100.0%</b>
<b>Rating</b>		<b>Acres in AOI</b>		<b>Percent of AOI</b>		
Very limited		434.7		79.4%		

The review of published soil data indicates the soils are very limited for conventional on-site systems or land application. The area required for a land application system for 1.6 MGD and these soils is roughly 350 acres. The land acquisition cost comprises the bulk of the capital costs that are estimated for this option.

The option of pretreatment and discharge to a POTW (**Part 4.02**) was considered as part of this analysis. The nearest POTW is owned by the Jefferson County Commission. The nearest accessible connection point is the gravity sewer that was intended to serve Liberty Park and was terminated due to public pressure over 20 years ago. The sewer was labeled the “Cahaba Super Sewer” by environmental protection groups and would have required several crossings under the Cahaba River to serve Liberty Park and other proposed development in the Cahaba River watershed. The project was under construction when the decision to terminate the project was made as a result of public outcry. This line would need to be extended another 4 miles through an environmentally sensitive area to serve Liberty Park.

Assuming the project could be resurrected, and rights-of-way could be obtained, the cost to construct this line is significant. In addition, the Cahaba Water Reclamation Facility would require improvements to support an additional load of 1.6 MGD. The capital costs for this option include the line extension costs and lift station to pump to the gravity sewer; however, the costs associated with public outreach and sewer impact fees would likely be as substantial as the sewer extension itself. This option is not feasible economically or realistic based on the past history of this project.

The option of discharging treated wastewater at another location (is included as **Part 4.03**). The proposed project is represented by this option. The new outfall would allow for the golf course lift station to be bypassed and the effluent would directly discharge to the source pond for the golf course irrigation. The majority of the infrastructure has been installed and this modification would only require a small extension or relocation of the effluent force main.

**The option of reuse/recycle (Part 4.04)** is already being utilized at the Liberty Park WWRF system. A portion of the treated effluent is being used by the golf course for irrigation. If the reuse option was broadened to include non-potable use in the subdivision, then a significant amount of infrastructure would need to be added along with storage for both reuse water and “reject” water. Although the water quality is suitable for additional uses, the subdivision is fully developed with underground utilities and the addition of non-potable lines would cause major disruption and substantial costs. The capital costs provided include the costs for a storage basin, a distribution lift station and non-potable water lines to serve the main business district and school which are the most densely populated parts of the development.

**Alternative 4.05 Process/Treatment Alternatives** represents another comparable treatment system using different technology or process. The Liberty Park WWRF treats wastewater with a SBR biological process followed by tertiary filtration and UV disinfection. Metal salts are added during the growing season (April through October) to supplement solids removal to meet the stringent TP limits imposed on major dischargers in the Cahaba River watershed. Other technologies or processes include membrane filtration or densification of biological solids to provide a high-quality effluent or decrease the footprint required for the treatment units. For the purpose of developing a cost for this option we have assumed the existing tanks would be used and membrane



filters would be added for additional capacity. Membrane filtration requires a greater level of screening prior to the biological process. The scope and capital costs for this includes fine screening, membrane filters and ancillary items.


**Alternative 4.06 On-site/Subsurface disposal** would be subjected to the same land requirements and issues described in Alternative 4.01 Land Application. There is simply not enough usable area available on the existing property. However, there are 2 distinctions between these alternatives; the use of subsurface disposal would not require additional effluent storage capacity, but it would require pressure filters to remove solids that would otherwise clog drip tubing emitters. The most significant difference in the costs between these options is with the operation and maintenance duties. We anticipate that there will be additional time spent cleaning the required in-line filters (due to algae) for the sub-surface system and the overall complexity of having control wiring, automated control and isolation valves and a PLC based control system will drive the ongoing costs higher.

Further, a subsurface drip system (Part 4.06) of this size would require a substantial amount of drip emitters. The additional operational complexity and maintenance concerns have eliminated this option from consideration. There is also no appreciable difference in environmental protection or benefits to this option versus land application/spray irrigation (Part 4.01).

#### SUMMARY

Alternative 4.03 relocation of discharge has been selected as the best option for this system. The relocation of the outfall will allow for a lift station to be taken offline which will reduce the operation and maintenance costs and allow for a direct discharge to the pond used for the irrigation of the golf course.

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Form Approved 03/05/19 OMB No. 2040-0004
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Form 2F NPDES		<b>U.S. Environmental Protection Agency</b> <b>Application for NPDES Permit to Discharge Wastewater</b> <b>STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY</b>
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**SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))**

Outfall Location	1.1.	Provide information on each of the facility's outfalls in the table below			
		Outfall Number	Receiving Water Name	Latitude	Longitude
		006S	UT to Gumsuck Branch	33° 28' 29" N	86° 41' 15" W
				° ' "	° ' "
				° ' "	° ' "
				° ' "	° ' "
				° ' "	° ' "

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

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

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

Site Drainage Map	3.1	Have you attached a site drainage map containing all required information to this application? (See instructions for specific guidance.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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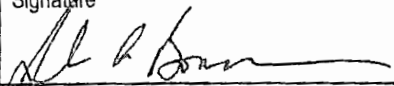
**SECTION 4. POLLUTANT SOURCES (40 CFR 122.26(c)(1)(i)(B))**

Pollutant Sources	4.1	Provide information on the facility's pollutant sources in the table below.			
		Outfall Number	Impervious Surface Area (within a mile radius of the facility)		Total Surface Area Drained (within a mile radius of the facility)
		006	7.8	specify units acres	42.3 specify units acres
				specify units acres	specify units acres
				specify units acres	specify units acres
				specify units	specify units
				specify units	specify units
				specify units	specify units
				specify units	specify units
		4.2	Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.)  Runoff is from 75% Impervious asphalt paving. Remaining site is gravel with little vegetation		
	4.3	Provide the location and a description of existing structural and non-structural control measures to reduce pollutants in stormwater runoff. (See instructions for specific guidance.)			
		Stormwater Treatment			
		Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)	
		006	Dissapating rlp rap swells	1-X, 1-U	

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF
---------------------------	----------------------------------	------------------------------------

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

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

Non-Stormwater Discharges	5.1	I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-stormwater discharges. Moreover, I certify that the outfalls identified as having non-stormwater discharges are described in either an accompanying NPDES Form 2C, 2D, or 2E application.		
		Name (print or type first and last name)	Official title	
		John Bonanno	Vice President	
		Signature	Date signed	
			3.21.2024	
	5.2	Provide the testing information requested in the table below.		
		Outfall Number	Description of Testing Method Used	Date(s) of Testing
		NA		

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

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

**SECTION 7. DISCHARGE INFORMATION (40 CFR 122.26(g)(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	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	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 type="checkbox"/> Yes <input checked="" 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 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No		



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

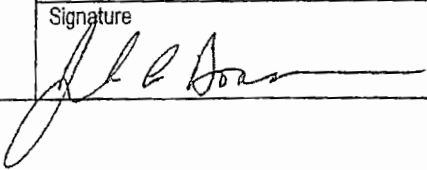
**SECTION 8. BIOLOGICAL TOXICITY TESTING DATA (40 CFR 122.21(g)(11))**

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

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

Contract Analysis Information:	9.1	Were any of the analyses reported in Section 7 (on Tables A through C) performed by a contract laboratory or consulting firm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 10.		
	9.2	Provide information for each contract laboratory or consulting firm below.		
		Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
		Name of laboratory/firm	SWWC Laboratory	
		Laboratory address	728 Volare Drive Birmingham, AL 35244	
		Phone number	(205) 987-8352	
	Pollutant(s) analyzed	PH,TSS,NH-N3,TKN,Total N,TP, E Coli, CBOD		

**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 type="checkbox"/> Section 2	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 3	<input type="checkbox"/> w/ site drainage map
		<input checked="" type="checkbox"/> Section 4	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 5	<input type="checkbox"/> w/ attachments
		<input type="checkbox"/> Section 6	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 7	<input checked="" type="checkbox"/> Table A <input type="checkbox"/> w/ small business exemption request <input checked="" type="checkbox"/> Table B <input checked="" type="checkbox"/> w/ analytical results as an attachment <input type="checkbox"/> Table C <input type="checkbox"/> Table D
		<input 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 checked="" type="checkbox"/>
	10.2	<b>Certification Statement</b> <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
		Name (print or type first and last name)	Official title
		John Bonnano	<del>Site</del> President
		Signature	Date signed
			3.21.2024

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Outfall Number 006S
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Form Approved 03/05/19  
OMB No. 2040-0004

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

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

Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1. Oil and grease	<5.0mg/l		<5.0mg/l		1	
2. Biochemical oxygen demand (BODs)	NA		NA		1	
3. Chemical oxygen demand (COD)	0.5mg/l		0.5mg/l		1	
4. Total suspended solids (TSS)	15.0mg/l		15.0mg/l		1	
5. Total phosphorus	0.049mg/l		0.049mg/l		1	
6. Total Kjeldahl nitrogen (TKN)	0.82mg/l		0.82mg/l		1	
7. Total nitrogen (as N)	0.87mg/l		0.87mg/l		1	
8. pH (minimum)	9.5		9.5		1	
	9.5		9.5		1	

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

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EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Outfall Number 006S
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Form Approved 03/05/19  
OMB No. 2040-0004

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

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

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
Total Ammonia	0.033mg/l		0.033mg/l			
Ecoli	276 col/100ml		276col/100ml			

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



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33°28'29"N  
86°41'15"W

006S



**PART 2 PERMIT APPLICATION INFORMATION (40 CFR 122.21(q))**

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))**

<b>General Information</b>	All Part 2 applicants must complete this section.			
	<b>Facility Information</b>			
	1.1	Facility name Liberty Park WRRF		
		Mailing address (street or P.O. box) 1000 Urban Center Pkwy Suite 235		
		City or town Vestavia Hills	State Alabama	ZIP code 35242
		Phone number (205) 945-6462		
		Contact name (first and last) John Bonanno	Title Vice President	Email address jbonanno@libertypark.com
		Location address (street, route number, or other specific identifier) 13059 Liberty Parkway		<input type="checkbox"/> Same as mailing address
		City or town Vestavia Hills	State AL	ZIP code 35242
	1.2	Is this facility a Class I sludge management facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	1.3	Facility Design Flow Rate	1.6 million gallons per day (mgd)	
	1.4	Total Population Served	1964	
	1.5	<b>Ownership Status</b>		
		<input type="checkbox"/> Public—federal	<input type="checkbox"/> Public—state	<input type="checkbox"/> Other public (specify) _____
		<input checked="" type="checkbox"/> Private	<input type="checkbox"/> Other (specify) _____	
<b>Applicant Information</b>				
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 Enviro Services, LLC.			
	Applicant mailing address (street or P.O. box) 1000 Urban Center Pkwy Suite 235			
	City or town Vestavia Hills	State AL	ZIP code 35242	
	Contact name (first and last) Jesse Kelley	Title Operations Mgr	Phone number (205) 987-8352	
	Email address JKELLEY@SWWC.COM			
1.8	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Both			
1.9	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input type="checkbox"/> Applicant <input checked="" type="checkbox"/> Facility and applicant (they are one and the same)			

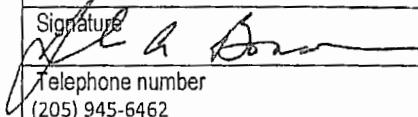
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**IND/MUN BRANCH  
WATER DIVISION**

EPA Identification Number		NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Form Approved 03/05/19 OMB No. 2040-0004
1.10	Facility's NPDES permit number <input type="checkbox"/> Check here if you do not have an NPDES permit but are otherwise required to submit Part 2 of Form 2S.		AL0067814	
1.11	Indicate all other federal, state, and local permits or construction approvals received or applied for that regulate this facility's sewage sludge management practices below.			
	<input type="checkbox"/> RCRA (hazardous wastes)	<input type="checkbox"/> Nonattainment program (CAA)	<input type="checkbox"/> NESHAPs (CAA)	
	<input type="checkbox"/> PSD (air emissions)	<input type="checkbox"/> Dredge or fill (CWA Section 404)	<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> Ocean dumping (MPRSA)	<input type="checkbox"/> UIC (underground injection of fluids)		
<b>Indian Country</b>				
1.12	Does any generation, treatment, storage, application to land, or disposal of sewage sludge from this facility occur in Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.14 (Part 2, Section 1) below.			
1.13	Provide a description of the generation, treatment, storage, land application, or disposal of sewage sludge that occurs.			
<b>Topographic Map</b>				
1.14	Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Line Drawing</b>				
1.15	Have you attached a line drawing and/or a narrative description that identifies all sewage sludge practices that will be employed during the term of the permit containing all the required information to this application? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Contractor Information</b>				
1.16	Do contractors have any operational or maintenance responsibilities related to sewage sludge generation, treatment, use, or disposal at the facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 1.18 (Part 2, Section 1) below.			
1.17	Provide the following information for each contractor. <input type="checkbox"/> Check here if you have attached additional sheets to the application package.			
		<b>Contractor 1</b>	<b>Contractor 2</b>	<b>Contractor 3</b>
	Contractor company name	SWWC Services, Inc	Meeks Environmental	
	Mailing address (street or P.O. box)	728 Volare Dr	1625 Holmes Dr	
	City, state, and ZIP code	Birmingham, AL 35244	Bessemer, AL 35020	
	Contact name (first and last)	Jesse Kelley	John Meeks	
	Telephone number	(205) 987-8352	(205) 425-8303	
	Email address	jkelly@swwc.com	emily@meeksonsite.com	



EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Form Approved 03/05/19 OMB No. 2040-0004
1.17 cont.	Responsibilities of contractor	Contractor 1	Contractor 2
<b>Contractor 3</b>			
<b>Pollutant Concentrations</b>			
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	<b>Pollutant</b>	<b>Average Monthly Concentration (mg/kg dry weight)</b>	<b>Analytical Method</b>
	Arsenic	NA	
	Cadmium	NA	
	Chromium	NA	
	Copper	NA	
	Lead	NA	
	Mercury	NA	
	Molybdenum	NA	
	Nickel	NA	
	Selenium	NA	
	Zinc	NA	
<b>Checklist and Certification Statement</b>			
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.		
	<b>Column 1</b>	<b>Column 2</b>	
	<input type="checkbox"/> Section 1 (General Information)	<input type="checkbox"/> w/ attachments	
	<input checked="" type="checkbox"/> Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)	<input checked="" type="checkbox"/> w/ attachments	
	<input type="checkbox"/> Section 3 (Land Application of Bulk Sewage Sludge)	<input 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	<b>Certification Statement</b>		
	<i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>		
	Name (print or type first and last name) John Bonanno	Official title Vice President	
	Signature 	Date signed 2-20-2024	
	Telephone number (205) 945-6462		
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.			

General Information Continued

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MUNICIPAL SECTION

**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.		
<b>Amount Generated Onsite</b>			
2.2	Total dry metric tons per 365-day period generated at your facility:		712
<b>Amount Received from Off Site Facility</b>			
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.		
	<b>Amount (dry metric tons)</b>	<b>Pathogen Class and Reduction Alternative</b>	<b>Vector Attraction Reduction Option</b>
		<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 degritting) <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 checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction <input type="checkbox"/> Other (specify) _____	

EPA Identification Number	NPDES Permit Number AL0067814	Facility Name Liberty Park WRRF	Form Approved 03/05/19 OMB No. 2040-0004	
Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	<b>Treatment Provided at Your Facility</b>			
	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.		
		<b>Use or Disposal Practice (check one)</b>	<b>Pathogen Class and Reduction Alternative</b>	<b>Vector Attraction Reduction Option</b>
		<input type="checkbox"/> Land application of bulk sewage <input type="checkbox"/> Land application of biosolids (bulk) <input type="checkbox"/> Land application of biosolids (bags) <input checked="" type="checkbox"/> Surface disposal in a landfill <input type="checkbox"/> Other surface disposal <input type="checkbox"/> Incineration	<input checked="" 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 checked="" 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
	2.9	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 degritting) <input checked="" 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 checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction	
	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. <input type="checkbox"/> Check here if you have attached the description to the application package.  Waste activated sludge is stabilized in an aerobic digester. Once digester is full, liquid digested sludge (about 2% solids) is dewatered through a belt press. The finished product results in a 13% product. The dewatered sludge is then hauled to the Landfill.		
	<b>Preparation of Sewage Sludge Meeting Ceiling and Pollutant Concentrations, Class A Pathogen Requirements, and One of Vector Attraction Reduction Options 1 to 8</b>			
	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input type="checkbox"/> Check here once you have completed Items 2.11 to 2.13, then → SKIP to Item 2.32 (Part 2, Section 2) below.				



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

**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
<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable
<input type="checkbox"/> Class A, Alternative 1	<input type="checkbox"/> Option 1
<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2
<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3
<input type="checkbox"/> Class A, Alternative 4	<input type="checkbox"/> Option 4
<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 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

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<b>Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued</b>	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 degritting)	<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 checked="" 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.	
	<b>Land Application of Bulk Sewage Sludge</b>		
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.		
<b>Surface Disposal</b>			
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:						
	<b>Incineration</b>							
	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:							
<b>Disposal in a Municipal Solid Waste Landfill</b>								
2.46	Is sewage sludge from your facility placed on a municipal solid waste landfill? <input checked="" type="checkbox"/> Yes <input 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.						1	



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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.48	Name of landfill Big Sky Landfill						
		Mailing address (street or P.O. box) 5100 Flat Top Rd						
		City or town Adamsville			State AL		ZIP code 35005	
		Contact name (first and last) Shannon Humphrey		Title Operations	Phone number (205) 743-0080		Email address info@bigskyenv.com	
		Location address (street, route number, or other specific identifier)					<input checked="" type="checkbox"/> Same as mailing address	
		County			County code			<input type="checkbox"/> Not available
		City or town			State AL		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:					712	
	2.50	List the numbers of all other federal, state, and local permits that regulate the operation of this municipal solid waste landfill.						
		<b>Permit Number</b>		<b>Type of Permit</b>				
	37-48		Municipal Solid Waste					
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 checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 4.		
	3.2	Do any of the following conditions apply? <ul style="list-style-type: none"> <li>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);</li> <li>The sewage sludge is sold or given away in a bag or other container for application to the land; or</li> <li>You provide the sewage sludge to another facility for treatment or blending.</li> </ul> <input type="checkbox"/> Yes → SKIP to Part 2, Section 4. <input 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.		
	<b>Identification of Land Application Site</b>			
	3.4	Site name or number		
		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
		<b>Latitude/Longitude of Land Application Site (see instructions)</b>		
		Latitude		Longitude
		" ' "		" ' "
		<b>Method of Determination</b>		
		<input 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 type="checkbox"/> Check here to indicate you have attached a topographic map for this site.		
	<b>Owner Information</b>			
3.6	Are you the owner of this land application site? <input 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	
<b>Applier Information</b>				
3.8	Are you the person who applies, or who is responsible for application of, sewage sludge to this land application site? <input 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	

Land Application of Bulk Sewage Sludge Continued

<b>Site Type</b>			
3.10	Type of land application:		
	<input type="checkbox"/> Agricultural land	<input type="checkbox"/> Forest	
	<input type="checkbox"/> Reclamation site	<input type="checkbox"/> Public contact site	
	<input type="checkbox"/> Other (describe)		
<b>Crop or Other Vegetation Grown on Site</b>			
3.11	What type of crop or other vegetation is grown on this site?		
3.12	What is the nitrogen requirement for this crop or vegetation?		
<b>Vector Attraction Reduction</b>			
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 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 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.		
<b>Cumulative Loadings and Remaining Allotments</b>			
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 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 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		
	Contact person		
	Telephone number		
	Email address		
3.19	Based on your inquiry, has bulk sewage sludge subject to CPLRs been applied to this site since July 20, 1993?		
	<input 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		
	Mailing address (street or P.O. box)		
	City or town	State	ZIP code
	Contact name (first and last)	Title	Phone number
			Email address

**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.		
	<b>Information on Active Sewage Sludge Units</b>			
	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
		<b>Latitude/Longitude of Active Sewage Sludge Unit (see instructions)</b>		
		Latitude	Longitude	
		<b>Method of Determination</b> <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 $1 \times 10^{-7}$ 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.			

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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.						
	<b>Sewage Sludge from Other Facilities</b>							
	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.							
	<b>Pathogen Class and Reduction Alternative</b>			<b>Vector Attraction Reduction Option</b>				
	<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) _____				



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?

Option 9 (Injection below and surface)

Option 11 (Covering active sewage sludge unit daily)

Option 10 (Incorporation into soil within 6 hours)

None

4.22 Describe any treatment processes used at the active sewage sludge unit to reduce vector attraction properties of sewage sludge.

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?

Yes

No → SKIP to Item 4.26 (Part 2, Section 4) below.

4.24 Provide a copy of available groundwater monitoring data.

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.

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?

Yes

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.

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?

Yes

No → SKIP to Item 4.30 (Part 2, Section 4) below.

4.29 Submit a copy of the certification with this permit application.

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?

Yes

No → SKIP to Part 2, Section 5.

4.31 Submit information to support the request for site-specific pollutant limits with this application.

Check here to indicate you have attached the requested information.

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<b>PART 2, SECTION 5 INCINERATION (40 CFR 122.21(q)(11))</b>				
<b>Incineration</b>	<b>Incinerator Information</b>			
	5.1	Do you fire sewage sludge in a sewage sludge incinerator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> 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	<input type="checkbox"/> Not available
		City or town	State	ZIP code
		<b>Latitude/Longitude of Incinerator (see instructions)</b>		
		Latitude		Longitude
		. ' "		. ' "
		<b>Method of Determination</b>		
		<input type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____		
		<b>Amount Fired</b>		
	5.4	Dry metric tons per 365-day period of sewage sludge fired in the sewage sludge incinerator:		
		<b>Beryllium NESHAP</b>		
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. <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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 <i>and</i> documentation of ongoing incinerator operating parameters indicating that the NESHAP emission rate limit for beryllium has been and will continue to be met. <input type="checkbox"/> Check here to indicate that you have attached this information.			
	<b>Mercury NESHAP</b>			
5.8	Is compliance with the mercury NESHAP being demonstrated via stack testing? <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> Check here to indicate that you have attached this information.			
5.11	Do you demonstrate compliance with the mercury NESHAP by sewage sludge sampling? <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Check here to indicate that you have attached this information.			

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.  
 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).  
 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?  
 Yes  No → SKIP to Item 5.21 (Part 2, Section 5) below.
- 5.20 Identify the type of incinerator used as the basis.  
 Fluidized bed with wet scrubber  Other types with wet scrubber  
 Fluidized bed with wet scrubber and wet electrostatic precipitator  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)?  
 Yes  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.  
 Check here to indicate that you have attached this information.  Not applicable

**Incinerator Parameters**

- 5.24 Do you monitor total hydrocarbons (THC) in the exit gas of the sewage sludge incinerator?  
 Yes  No
- 5.25 Do you monitor carbon monoxide (CO) in the exit gas of the sewage sludge incinerator?  
 Yes  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):  
 Actual stack height  Creditable stack height

