



**Alabama Department of Environmental Management**  
[adem.alabama.gov](http://adem.alabama.gov)

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MAY 17, 2024

John Barnes, Manager  
City of Arab Sewer Board  
654 11th Avenue NW  
Arab, AL 35016

RE: Draft Permit  
NPDES Permit No. AL0056626  
Gilliam Creek WWTP  
Marshall County, Alabama

Dear Mr. Barnes:

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:

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.F 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 Michael Simmons at [michael.simmons@adem.alabama.gov](mailto:michael.simmons@adem.alabama.gov) or (334) 274-4220.

Sincerely,

Michael N. Simmons  
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

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



# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

**PERMITTEE:** CITY OF ARAB SEWER BOARD  
654 11TH AVENUE NW  
ARAB, AL 35016

**FACILITY LOCATION:** GILLIAM CREEK WWTP (0.83 MGD)  
1420 COUNTRY CLUB DRIVE  
ARAB, ALABAMA  
MARSHALL COUNTY

**PERMIT NUMBER:** AL0056626

**RECEIVING WATERS:** GILLIAM CREEK

*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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Alabama Department of Environmental Management

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**PART I: DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS****A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS****1. DSN 0011: Municipal/Industrial Wastewater**

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	6.0 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	207 Monthly Average	311 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	13.8 Monthly Average	20.7 Weekly Average	lbs/day	*****	2.0 Monthly Average	3.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	8.3 Monthly Average	12.4 Weekly Average	lbs/day	*****	1.2 Monthly Average	1.8 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
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	GRO
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	GRO
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	GRO

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.

(2) S = Summer (May – November)

W = Winter (December - April)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

GRO = Growing Season (April – October)

(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.

**1. DSN 0011 (Continued): Municipal/Industrial Wastewater**

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq 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	117 Monthly Average	176 Weekly Average	lbs/day	*****	17.0 Monthly Average	25.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	89.9 Monthly Average	134 Weekly Average	lbs/day	*****	13.0 Monthly Average	19.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
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  
See Permit Requirements for Effluent Toxicity Testing in Part IV.B.
- (2) S = Summer (May – November)  
W = Winter (December - April)  
ECS = E. coli Summer (May - October)  
ECW = E. coli Winter (November - April)  
GRO = Growing Season (April – October)
- (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.

**2. DSN 001Q: Quarterly Effluent Monitoring**

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

Parameter	Quantity or Loading		Units	Quality or Concentration		Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
				(Report) Monthly Average	(Report) Maximum Daily				
Zinc Total Recoverable (01094) Effluent Gross Value	*****	*****	*****	*****		ug/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

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

(2) S = Summer (April – October)

W = Winter (November - March)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

### 3. DSN 001T: Quarterly Toxicity Testing

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

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

(2) S = Summer (May – November)

W = Winter (December - April)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

GRO = Growing Season (April – October)



## **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(b) 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.

- f. The Permittee shall maintain a record of all known wastewater discharge points that are not authorized as permitted outfalls, including but not limited to SSOs. The Permittee shall include this record in its **Municipal Water Pollution Prevention (MWPP) Annual Reports**, which shall be submitted to the Department each year by May 31st for the prior calendar year period beginning January 1st and ending December 31st. The MWPP Annual Reports shall contain a list of all known wastewater discharge points that are not authorized as permitted outfalls and any discharges that occur prior to the headworks of the wastewater treatment plant covered by this permit. The Permittee shall also provide in the MWPP Annual Reports a list of any discharges reported during the applicable time period in accordance with Provision I.C.2.a. The Permittee shall include in its MWPP Annual Reports the following information for each known unpermitted discharge that occurred:
- (1) The cause of the discharge;
  - (2) Date, duration and volume of discharge (estimate if unknown);
  - (3) Description of the source (e.g., manhole, lift station);
  - (4) Location of the discharge, by latitude and longitude (or other appropriate method as approved by the Department);
  - (5) The ultimate destination of the flow (e.g., surface waterbody, municipal separate storm sewer to surface waterbody); and
  - (6) Corrective actions taken and/or planned to eliminate future discharges.

#### **D. OTHER REPORTING AND NOTIFICATION REQUIREMENTS**

##### **1. Anticipated Noncompliance**

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

##### **2. Termination of Discharge**

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

##### **3. Updating Information**

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

##### **4. Duty to Provide Information**

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

**E. SCHEDULE OF COMPLIANCE****1. Compliance with discharge limits**

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

**COMPLIANCE SHALL BE ATTAINED ON THE EFFECTIVE DATE OF THIS PERMIT****2. EPA Form 2A Table C**

Within 180 days from initially accepting industrial wastewater, the Permittee shall submit to the Department, a completed copy of EPA Form 2A Table C "Effluent Parameters for Selected POTWs." The Permittee shall provide data from a minimum of three samples collected. Samples must be representative of the seasonal variation in the discharge.

**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 Outfall 0011.
- b. The samples shall be diluted using appropriate control water to the Instream Waste Concentration (IWC) which is 100 percent effluent. The IWC is the actual concentration of effluent, after mixing, in the receiving stream during a 7-day, 10-year low flow period.
- c. Any test result that shows a statistically significant reduction in survival, growth, or reproduction between the control and test samples at the 95% confidence level indicates chronic toxicity and shall constitute noncompliance with this permit.

#### **2. General Test Requirements**

- a. A minimum of three (3) 24-hour composite samples shall be obtained for use in the above biomonitoring tests. Samples shall be collected every other day so that the laboratory receives water samples on the first, third, and fifth day of the seven-day test period. The holding time for each composite sample shall not exceed 36 hours. The control water shall be a water prepared in the laboratory in accordance with the EPA procedure described in EPA

821-R-02-013 (most current edition) or another control water selected by the Permittee and approved by the Department.

- b. Test results shall be deemed unacceptable and the Permittee shall rerun the tests as soon as practical within the monitoring period for the following:
  - (1) For testing with *P. promelas*: effluent toxicity tests with control survival of less than 80% or if dry weight per surviving control organism is less than 0.25 mg;
  - (2) For testing with *C. dubia*: if the number of young per surviving control organism is less than 15 or if less than 60% of surviving control females produce three broods; or
  - (3) If the other requirements of the EPA Test Procedure are not met.
- c. In the event of an invalid test, upon subsequent completion of a valid test, the results of all tests, valid and invalid, are to be reported to the Department along with an explanation of the tests performed and the test results.
- d. Toxicity tests shall be conducted for the duration of this permit, after initial acceptance of industrial wastewater, in the month(s) of **February, May, August, and November**. Should results from a Toxicity test indicate that **Outfall 001T** exhibits chronic toxicity, then the Permittee must conduct the follow-up testing described in Part IV.B.4.a. Should results from four consecutive testing periods indicate that Outfall 001T does not exhibit chronic toxicity, the Permittee may request, in writing, a reduction in the testing frequency.

### 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. POLLUTANT SCANS

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

#### F. 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/alEnviroRegLaws/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.

**NPDES PERMIT RATIONALE**

NPDES Permit No: **AL0056626** Date: May 17, 2024

Permit Applicant: City of Arab Sewer Board  
654 11th Avenue NW  
Arab, AL 35016

Location: **Gilliam Creek WWTP**  
1420 Country Club Drive  
Arab, AL 35016

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

Basis for Limitations: Water Quality Model: CBOD<sub>5</sub>, DO, NH<sub>3</sub>-N  
Reissuance with no modification: CBOD<sub>5</sub>, CBOD<sub>5</sub> % Removal, DO, E. Coli, NH<sub>3</sub>-N, pH, TRC, TSS, TSS % Removal  
Instream calculation at 7Q10: 100%  
Toxicity based: TRC  
Secondary Treatment Levels: CBOD<sub>5</sub> % Removal, TSS, TSS % Removal  
Other (described below): E. Coli, pH

Design Flow in Million Gallons per Day: 0.83 MGD

Major: No

Description of Discharge:

Feature ID	Description	Receiving Water	Waterbody Use Classification	303(d)	TMDL
001	Municipal/Industrial Wastewater	Gilliam Creek	Fish and Wildlife	No	No

Discussion:

This is a permit revoke and reissuance due to the Permittee accepting Circulus Holding, Inc. as a new industrial wastewater contribution. Limits for Five Day Carbonaceous Biochemical Oxygen Demand (CBOD<sub>5</sub>), Dissolved Oxygen (DO), and Total Ammonia-Nitrogen (NH<sub>3</sub>-N), and were developed based on a Waste Load Allocation (WLA) model that was completed by ADEM's Water Quality Branch (WQB). The monthly average limits for CBOD<sub>5</sub> summer (May-November) and winter (December-April) are 13.0 mg/L and 17.0 mg/L, respectively. The monthly average limits for NH<sub>3</sub>-N summer (May-November) and winter (December-April) are 1.2 mg/L and 2.0 mg/L, respectively. The daily minimum DO limit is 6.0 mg/L.

The pH daily minimum and daily maximum limits of 6.0 and 8.5 S.U, respectively, were developed to be supportive of the water-use classification of the receiving stream. The Total Residual Chlorine (TRC) limits of 0.011 mg/L (monthly average) and 0.019 mg/L (daily maximum) are based on EPA's recommended water quality values and on the current Toxicity Rationale, which considers the available dilution in the receiving stream. 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. Monitoring for TRC is only applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter "\*9" on the monthly DMR.

The imposed E. coli limits were determined based on the water-use classification of the receiving stream. Since Gilliam Creek is 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 Total Suspended Solids (TSS) and TSS % removal limits of 30.0 mg/L monthly average and 85.0%, respectively, are based on the requirements of 40 CFR part 133.102 Secondary Treatment. A minimum percent removal limit of 85.0% is imposed for CBOD<sub>5</sub> also in accordance with 40 CFR 133.102 regarding Secondary Treatment.

The Municipal Section, in consultation with the Department's Water Quality Branch, has conducted a narrative nutrient reasonable potential analysis. Based on a review of the facility's current levels of nutrients in the discharge and current assessments of the available information, the Permittee is required to monitor and report effluent test results for Total Kjeldahl Nitrogen (TKN), Nitrite plus Nitrate (NO<sub>2</sub>+NO<sub>3</sub>), and Total Phosphorus (TP) during the growing season (April – October). Monitoring for these nutrient-related parameters is imposed so that sufficient information will be available regarding the nutrient contribution from this point source, should it be necessary at some later time to impose nutrient limits on this discharge.

Because this facility is a minor municipal discharger treating municipal and industrial wastewater, 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 quarterly in the months of February, May, August, and November since the facility is accepting a new industrial wastewater discharge. Should the results show chronic toxicity, the permittee would have to conduct follow-up testing as described in Part IV.B of the permit.

Because this facility will be treating both municipal and industrial wastewater, the Department completed a numerical reasonable potential analysis (RPA) of the discharge based on the application data and Pass-Through calculations provided by the Department's Industrial Section. 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. The RPA indicates whether pollutants in treated effluent have potential to contribute to excursions of Alabama's in-stream water quality standards. The reasonable potential analysis indicates that reasonable potential may exist to cause an in-stream water quality criteria exceedance for zinc. The Department is imposing quarterly monitoring limits for Total Recoverable Zinc in this reissuance.

The monitoring frequency for CBOD<sub>5</sub>, DO, E. Coli, NH<sub>3</sub>-N, pH, TRC, and TSS three times per week. The monitoring frequency for TKN, NO<sub>2</sub>+NO<sub>3</sub>-N and TP is once per month during the April through October summer growing season. CBOD<sub>5</sub> % Removal and TSS % Removal and are to be calculated once per month. Flow is to be continuously monitored daily.

Gilliam Creek is a Tier I stream and is not listed on the most recent 303(d) list. However, Mill Pond Creek, which is downstream of the Gilliam Creek WWTP discharge, is listed on the most recent 303(d) list for siltation. The 303(d) indicates that the cause is agriculture. TSS associated with WWTPs is typically comprised primarily of organic matter and is not expected to contribute to the impairment. There are no TMDLs affecting this discharge.

The permit language in Parts I.C.1.c and I.C.2.e has been updated to reflect the electronic discharge monitoring reporting and sanitary sewer overflow reporting requirements due to the transition to the Department's new Alabama Environmental Permitting and Compliance System (AEPACS) from the E2 Reporting System.

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.

Prepared by: Michael N. Simmons

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$										
ID	Pollutant	Carcinogen "Yes"	Type	Background from upstream source (C <sub>d1</sub> )	Background from upstream source (C <sub>d2</sub> )	Background (C <sub>s</sub> ) Daily Mix	Background (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	Partition Coefficient (Stream / Lake)
				µg/l Daily Max	µg/l Monthly Ave	µg/l	µg/l	µg/l	µg/l	
1	Antimony		Metals	0	0	0	0	0	0	0.574
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	0.235
5	Chromium / Chromium (III)**		Metals	0	0	0	0	1.17	1.17	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	1.17	1.17	0.210
7	Copper**		Metals	0	0	0	0	0.98	0.98	0.388
8	Lead**		Metals	0	0	0	0	1.31	1.31	0.206
9	Mercury**		Metals	0	0	0	0	0	0	0.302
10	Nickel**		Metals	0	0	0	0	2.08	2.08	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	156.37	156.37	0.330
15	Cyanide		Metals	0	0	0	0	0	0	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0	-
17	Hardness (As CaCO3)		Metals	0	0	0	0	0	0	-
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	Benazene*	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	2, 4-Dinitrophenol		Acids	0	0	0	0	0	0	-
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0	0	-
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0	0	-
62	2-Nitrophenol		Acids	0	0	0	0	0	0	-
63	4-Nitrophenol		Acids	0	0	0	0	0	0	-
64	Pentachlorophenol*	YES	Acids	0	0	0	0	0	0	-
65	Phenol		Acids	0	0	0	0	0	0	-
66	2, 4, 6-Trichlorophenol*	YES	Acids	0	0	0	0	0	0	-
67	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(G,H)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-Chloroisopropyl) Ether		Bases	0	0	0	0	0	0	-
79	Bis (2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	0	0	-
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
81	Buryl 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-Buryl 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	Hexachlorocyclohexane (alpha)	YES	Bases	0	0	0	0	0	0	-
109	Hexachlorocyclohexane (beta)	YES	Bases	0	0	0	0	0	0	-
110	Hexachlorocyclohexane (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-CD)Pyrene*	YES	Bases	0	0	0	0	0	0	-
114	Izophtone		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	-

0.83	Enter C <sub>s</sub> = wastewater discharge flow from facility (MGD)
1.28+20007	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	Enter Mean Annual Flow, Q <sub>s</sub> = background stream flow in cfs above point of discharge
0	Enter TQ2, 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>d</sub> + Q <sub>d2</sub> / Q <sub>s</sub>	C <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)
100	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

May 16, 2014

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> )	Freshwater Acute (µg/l) C <sub>a</sub> = 1Q10			RP?	Background from upstream source (C <sub>D2</sub> ) Monthly Ave	Avg Daily Discharge as reported by Applicant (C <sub>app</sub> )	Freshwater Chronic (µg/l) C <sub>a</sub> = 7C10			RP?	Human Health Consumption Fish only (µg/l) Carcinogen C <sub>a</sub> = Annual Average Non-Carcinogen C <sub>a</sub> = 7C10			RP?
						Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>DPL</sub> )	20% of Draft Permit Limit				Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>DPL</sub> )	20% of Draft Permit Limit		Water Quality Criteria (C <sub>c</sub> )	Draft Permit Limit (C <sub>DPL</sub> )	20% of Draft Permit Limit	
1	Arsenic		YES	0	0	592.334	592.334	118.467	No	0	261.324	261.324	52.265	No	3.73E+02	3.73E+02	7.47E+01	No	
2	Beryllium			0	0				No	0				No				No	
3	Cadmium			0	0	8.533	8.533	1.707	No	0	1.042	1.042	0.208	No				No	
4	Chromium Chromium III			0	1.17	2713.159	2713.159	542.632	No	0	352.926	352.926	70.585	No				No	
5	Chromium Chromium VI			0	1.17	16.000	16.000	3.200	No	0	11.000	11.000	2.200	No				No	
6	Copper			0	0.99	34.637	34.637	6.927	No	0	23.082	23.082	4.616	No				No	
7	Lead			0	1.31	313.522	313.522	62.700	No	0	12.217	12.217	2.443	No				No	
8	Mercury			0	0	2.400	2.400	0.480	No	0	0.012	0.012	0.002	No	4.24E-02	4.24E-02	8.46E-03	No	
9	Nickel			0	2.09	927.250	927.250	185.440	No	0	102.983	102.983	20.597	No	9.93E-02	9.93E-02	1.99E-02	No	
10	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	
11	Silver			0	0	3.217	3.217	0.643	No	0				No				No	
12	Thallium			0	0				No	0				No				No	
13	Zinc	YES		0	156.37	355.092	355.092	71.018	Yes	156.37	357.997	357.997	71.599	Yes	2.74E+01	2.74E+01	5.47E+02	No	
14	Cyanide			0	0	22.000	22.000	4.400	No	0	5.200	5.200	1.040	No	1.95E+04	1.49E+04	2.98E+03	No	
15	Total Phenolic Compounds			0	0				No	0				No	3.33E+03	9.33E+03	1.87E+03	No	
16	Hardness (As CaCO3)			0	0				No	0				No				No	
17	Acetamin			0	0				No	0				No				No	
18	Acrylonitrile		YES	0	0				No	0				No	5.43E+00	5.43E+00	1.09E+00	No	
19	Alaria		YES	0	0	3.000	3.000	0.600	No	0				No	1.44E-01	1.44E-01	2.88E-02	No	
20	Benzene		YES	0	0				No	0				No	2.84E-05	2.84E-05	5.68E-06	No	
21	Bromofom			0	0				No	0				No	1.55E+01	1.55E+01	3.09E+00	No	
22	Carbon Tetrachloride		YES	0	0				No	0				No	7.88E+05	7.88E+01	1.58E+01	No	
23	Chlorane		YES	0	0	2.400	2.400	0.480	No	0	0.0043	0.004	0.001	No	9.97E-01	9.97E-01	1.91E-01	No	
24	Chlorobenzene			0	0				No	0				No	4.73E-04	4.73E-04	9.46E-05	No	
25	Chlorodibromomethane			0	0				No	0				No	0.00E+02	9.95E+03	1.97E+02	No	
26	Chloroethane		YES	0	0				No	0				No	7.41E+00	7.41E+00	1.48E+00	No	
27	Chloroethene			0	0				No	0				No				No	
28	2-Chloro-1,1-Dichloroethane			0	0				No	0				No				No	
29	Chloroform		YES	0	0				No	0				No	1.02E+02	1.02E+02	2.04E+01	No	
30	4,4'-DDD		YES	0	0				No	0				No	1.81E-04	1.81E-04	3.63E-05	No	
31	4,4'-DDE		YES	0	0				No	0				No	1.28E-04	1.28E-04	2.56E-05	No	
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-05	No	
33	Dichlorobromomethane			0	0				No	0				No	1.00E+01	1.00E+01	2.01E+00	No	
34	1,1-Dichloroethane			0	0				No	0				No				No	
35	1,2-Dichloroethane		YES	0	0				No	0				No	2.14E+01	2.14E+01	4.27E+00	No	
36	Trans-1,2-Dichloroethene			0	0				No	0				No	5.91E+03	5.91E+03	1.18E+03	No	
37	1,1-Dichloroethene		YES	0	0				No	0				No	4.17E+03	4.17E+03	8.33E+02	No	
38	1,2-Dichloropropane			0	0				No	0				No	8.49E+00	8.49E+00	1.70E+00	No	
39	1,3-Dichloropropane			0	0				No	0				No	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	3.12E-05	3.12E-05	6.25E-06	No	
41	Endrin			0	0				No	0				No	1.24E+03	1.24E+03	2.48E+02	No	
42	Methyl Bromide			0	0				No	0				No	3.71E+02	8.71E+02	1.74E+02	No	
43	Methyl Chloride			0	0				No	0				No				No	
44	Methylene Chloride		YES	0	0				No	0				No	3.46E+02	3.46E+02	6.91E+01	No	
45	1,1,2,2-Tetrachloroethane		YES	0	0				No	0				No	2.33E+00	2.33E+00	4.67E-01	No	
46	Tetrachloroethene		YES	0	0				No	0				No	1.92E+00	1.92E+00	3.84E-01	No	
47	Toluene			0	0				No	0				No	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	1.62E-04	1.62E-04	3.24E-05	No	
49	Tributyltin (TBT)		YES	0	0	0.460	0.460	0.092	No	0	0.072	0.072	0.014	No				No	
50	1,1-Trichloroethane			0	0				No	0				No				No	
51	1,1,2-Trichloroethane		YES	0	0				No	0				No	9.10E+00	9.10E+00	1.82E+00	No	
52	Trichloroethylene		YES	0	0				No	0				No	1.79E+01	1.79E+01	3.49E+00	No	
53	Vinyl Chloride		YES	0	0				No	0				No	1.42E+00	1.42E+00	2.85E-01	No	
54	p-Chloro-m-Cresol			0	0				No	0				No				No	
55	2-Chlorophenol			0	0				No	0				No				No	
56	2,4-Dichlorophenol			0	0				No	0				No				No	
57	2,4-Dimethylphenol			0	0				No	0				No				No	
58	4-Dinitro-o-Cresol			0	0				No	0				No				No	
59	2,4-Dinitrophenol			0	0				No	0				No				No	
60	4,6-Dinitro-2-methylphenol		YES	0	0				No	0				No	3.11E+03	3.11E+03	6.22E+02	No	
61	Chlorin (2,3,7,8-TCDD)		YES	0	0				No	0				No	1.05E+02	1.05E+02	2.10E+01	No	
62	2-Nitrophenol			0	0				No	0				No				No	
63	4-Nitrophenol			0	0				No	0				No				No	
64	Pentachlorophenol		YES	0	0	8.723	8.723	1.745	No	0	0.693	0.693	1.339	No	1.77E+00	1.77E+00	3.54E-01	No	
65	Phenol			0	0				No	0				No				No	
66	2,4,6-Trichlorophenol		YES	0	0				No	0				No	5.00E+05	5.00E+05	1.00E+05	No	
67	Acenaphthene			0	0				No	0				No	1.41E+00	1.41E+00	2.83E-01	No	
68	Acenaphthylene			0	0				No	0				No	5.79E+02	5.79E+02	1.16E+02	No	
69	Anthracene			0	0				No	0				No				No	
70	Benzo(a)anthracene		YES	0	0				No	0				No	2.33E+04	2.33E+04	4.67E+03	No	
71	Benzo(a)fluoranthene		YES	0	0				No	0				No	1.16E-04	1.16E-04	2.32E-05	No	
72	Benzo(b)fluoranthene			0	0				No	0				No	1.07E-02	1.07E-02	2.13E-03	No	
73	Benzo(k)fluoranthene			0	0				No	0				No	1.07E-02	1.07E-02	2.13E-03	No	
74	Benzo(a)pyrene			0	0				No	0				No	1.07E-02	1.07E-02	2.13E-03	No	
75	Benzo(a)anthracene			0	0				No	0				No				No	
76	Bis (2-Chloroethoxy) Methane			0	0				No	0				No				No	
77	Bis (2-Chloroethoxy) Ether		YES	0	0				No	0				No				No	
78	Bis (2-Chloroisopropyl) Ether			0	0				No	0				No				No	
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0				No	0				No	3.07E-01	3.07E-01	6.15E-02	No	
80	4-Bromophenyl Phenyl Ether			0	0				No	0				No	3.78E+04	3.78E+04	7.56E+03	No	
81	Butyl Benzyl Phthalate			0	0				No	0				No	1.28E+00	1.28E+00	2.56E-01	No	
82	Chlorobiphenyls			0	0				No	0				No				No	
83	4-Chlorophenyl Phenyl Ether			0	0				No	0				No	1.13E+03	1.13E+03	2.26E+02	No	
84	Chrysenes		YES	0	0				No	0				No	9.24E+02	9.24E+02	1.85E+02	No	
85	Di-N-Butyl Phthalate			0	0				No	0				No				No	
86	Di-N-Octyl Phthalate			0	0				No	0				No	1.07E-02	1.07E-02	2.13E-03	No	
87	Dibenz(a,h)Anthracene		YES	0	0				No	0				No	2.82E+03	2.82E+03	5.64E+02	No	
88	1,2-Dichlorobenzene			0	0				No	0				No				No	
89	1,3-Dichlorobenzene			0	0				No	0				No				No	
90	1,4-Dichlorobenzene			0	0				No	0				No	7.95E+02	7.95E+02	1.59E+02	No	
91	3,3-Dichlorobenzidine		YES	0	0				No	0				No	5.62E+02	5.62E+02	1.12E+02	No	
92	Diethyl Phthalate			0	0				No	0				No	1.72E-02	1.72E-02	3.43E-03	No	
93	Dimethyl Phthalate			0	0				No	0				No	1.66E+02	1.66E+02	3.32E+03	No	
94	2,4-Dinitrotoluene		YES	0	0				No	0				No	2.56E+04	2.56E+04	5.11E+03	No	
95	2,6-Dinitrotoluene			0	0														

## TOXICITY AND DISINFECTION RATIONALE

Facility Name:	<b>Gilliam Creek WWTP</b>	
NPDES Permit Number:	<b>AL0056626</b>	
Receiving Stream:	<b>Gilliam Creek</b>	
Facility Design Flow (Q <sub>w</sub> ):	<b>0.830 MGD</b>	
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>18 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.

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

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

	<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>4.72 mg/l</b>

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

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= 4.8 \text{ mg/l NH}_3\text{-N at Winter Flow} \end{aligned}$$

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>1.20 mg/l NH<sub>3</sub>-N</b>	<b>2.50 mg/l NH<sub>3</sub>-N</b>
Winter	<b>2.00 mg/l NH<sub>3</sub>-N</b>	<b>4.80 mg/l NH<sub>3</sub>-N</b>

**Summer: The DO based limit of 1.20 mg/l NH<sub>3</sub>-N applies.**

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

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

The following factors trigger toxicity testing requirements:

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

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

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

**Chronic toxicity testing is required**

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 100.00\%$$

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: Michael Simmons Date: 4/17/2024

# Waste Load Allocation Summary

## REQUEST INFORMATION

Request Number:

2573

From:		In Branch/Section	
Date Submitted	12/30/1899	Date Required	12/30/1899
FUND Code			
Receiving Waterbody	Gilliam Creek	Date Permit application received by NPDES program	
Previous Stream Name			
Facility Name	Arab Gilliam Creek WWTP	(Name of Discharger-WQ will use to file)	
		Previous Discharger Name	
River Basin	Tennessee	Outfall Latitude	34.340248 (decimal degrees)
*County	Marshall	Outfall Longitude	-86.542099 (decimal degrees)
Permit Number	AL0056626	Permit Type	CONVERSION
		Permit Status	Active
		Type of Discharger	MUNICIPAL

Do other discharges exist that may impact the model?

Yes  No

If yes, impacting dischargers names.

Brewer High School

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

Yes  No

Information Verified By: JEH

Year File Was Created: 1998

Response ID Number: 15

Lat/Long Method

GPS

12 Digit HUC Code: 060300020601

Use Classification: F&W

Site Visit Completed?  Yes  No

Date of Site Visit: 10/21/2008

Waterbody Impaired?  Yes  No

Date of WLA Response: 10/24/2008

Antidegradation  Yes  No

Approved TMDL?

Yes  No

Waterbody Tier Level: Tier I

Use Support Category: 3

Approval Date of TMDL

## Waste Load Allocation Information

Modeled Reach Length: 23.66

Miles

Date of Allocation: 10/24/2008

Name of Model Used: SWQM

Allocation Type: 2 Seasons

Model Completed by: Johnathan Hall

Type of Model Used: Desk-top

Allocation Developed by: Water Quality Branch



# Waste Load Allocation Summary

Annual Effluent Limits	Conventional Parameters				Other Parameters			
	Qw	MGD	Qw	MGD	Qw	MGD	Qw	MGD
		0.83		0.83				
	Season	Summer	Season	Winter	Season		Season	
	From	May	From	Dec	From		From	
	Through	Nov	Through	Apr	Through		Through	
CBOD5	CBOD5	13 mg/L	CBOD5	17 mg/L	TP		TP	
NH3-N	NH3-N	1.2 mg/L	NH3-N	2 mg/L	TN		TN	
TKN	TKN		TKN		TSS		TSS	
D.O.	D.O.	6 mg/L	D.O.	6 mg/L				

"Monitor Only" Parameters for Effluent:		Parameter	Frequency	Parameter	Frequency
		TKN	April - October		
		NO2+NO3-N	April - October		
		TP	April - October		

Water Quality Characteristics Immediately Upstream of Discharge					
Parameter	Summer		Winter		
CBODu	2	mg/l	2	mg/l	
NH3-N	0.11	mg/l	0.11	mg/l	
Temperature	28	°C	18	°C	
pH	7	su	7	su	

### Hydrology at Discharge Location

Drainage Area Qualifier	Drainage Area	Value	Unit	Method Used to Calculate
	Drainage Area	4.84	sq mi	Observation / < 5.0 sq. mi.
	Stream 7Q10	0	cfs	
	Stream 1Q10		cfs	<5.0 sq mi - Bingham Equation
	Stream 7Q2	0	cfs	
	Annual Average		cfs	

**Comments and/or Notations** SW 1/4 Sec 16, T8S, R1E  
211 SE - Hulaco

## Simmons, Michael N

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**From:** arabsewer@otelco.net  
**Sent:** Wednesday, April 17, 2024 1:04 PM  
**To:** Simmons, Michael N  
**Subject:** Requested material  
**Attachments:** Form 188 Page 1 Gilliam 2024.pdf; Form 2A Page 30 Gilliam 2024.pdf; Form 2A Table C Gilliam 2024.pdf

Mr. Simmons,

City of Arab Sewer Board would like to Revoke and Reissue the Gilliam Creek WWTP Permit. (AL0056626)

I have the requested form revisal's attached.

Thanks,  
John Barnes



# NPDES Individual Permit - Modification/Reissuance - Municipal (Form 188)

version 1.11

(Submission #: HQ1-RDV5-FTM12, version 1)

Digitally signed by:  
AEPACS  
Date: 2024.02.28 12:56:35 -06:00  
Reason: Submission Data  
Location: State of Alabama

## Details

---

Submission ID HQ1-RDV5-FTM12

## Form Input

---

### General Instructions

NPDES Individual Permit Modification and Reissuance Form ♦ Publicly-Owned Treatment Works (POTW), Other Treatment Works Treating Domestic Sewage (TWTDS), and Public Water Supply Treatment Plants

IF YOU ARE APPLYING FOR A PERMIT MODIFICATION, PLEASE CONTACT YOUR ASSIGNED PERMIT CONTACT TO DISCUSS THE TYPE OF MODIFICATION YOU SHOULD APPLY FOR BEFORE COMPLETING THIS FORM.

This form should be used to submit the following permit requests for permitted Publicly-Owned Treatment Works (POTW), Other Treatment Works Treating Domestic Sewage (TWTDS), and Public Water Supply Treatment Plants:

- (1) Permit Transfers
- (2) Permittee/Facility Name Changes
- (3) Minor Modifications  
This modification may not be used for changes that would result in changes to permit conditions
- (4) Major Modifications (No Effluent Limit Change)
- (5) Major Modifications (Effluent Limit Change)
- (6) Reissuances  
Reissuance of a permit due to approaching expiration  
Revocation and Reissuance of permit prior to its scheduled expiration

Please complete all questions and attach all necessary documentation as prompted throughout the application process. Incomplete or incorrect information will delay processing.

#### Applicable Fees:

Permit Transfers and/or Permittee/Facility Name Changes  
\$800  
Minor Modifications  
\$800  
Major Modifications (No Effluent Limit Change)  
\$3,140 (Major Sources)  
\$2,250 (Minor Sources or Public Water Supply Treatment Plants)  
Major Modifications (Effluent Limit Change)  
\$7,060 (Major Sources)  
\$4,290 (Minor Sources or Public Water Supply Treatment Plants)  
Reissuances  
\$7,060 (Major Sources)  
\$4,290 (Minor Sources or Public Water Supply Treatment Plants)

For assistance, please click here to determine the permit engineer responsible for the site or call (334) 271-7810.

### Processing Information

**Purpose of Application**

Reissuance of Permit Due to Approaching Expiration

**Please indicate if the Permittee is applying for a permit transfer and/or name change in addition to permit modification or reissuance:**

None

**Action Type**

Reissuance

**Briefly describe any planned changes at the facility that are included in this reissuance application:**

None.

**Do you have additional contacts associated with this site?**

No

**Permit Information**

**Permit Number**

AL0056626

**Current Permittee Name**

City of Arab Sewer Board

**Permittee**

**Permittee Name**

*City of Arab Sewer Board*

**Mailing Address**

654 11th Avenue NW

Arab, AL 35016

**Is the Operator the same as the Permittee?**

Yes

**Has the Operator's scope of responsibility changed?**

No

**Responsible Official**

**Prefix**

*Mr.*

**First Name      Last Name**

*John                  Barnes*

**Title**

*Manager*

**Organization Name**

*City of Arab Sewer Board*

**Phone Type    Number            Extension**

*Business            2565866148*

**Email**

*arabsewer@otelco.net*

**Mailing Address**

*654 11th Avenue NW*

*Arab, AL 35016*

**Existing Permit Contacts**

Affiliation Type	Contact Information	Remove?
------------------	---------------------	---------

Affiliation Type	Contact Information	Remove?
Permittee	City of Arab Sewer Board	NONE PROVIDED
Responsible Official, Emergency Contact, Notification Recipient, DMR Contact	John M. Barnes Jr., City of Arab Sewer Board	NONE PROVIDED

## Facility/Site Information

### Facility/Site Name

Gilliam Creek WWTP

### Organization/Ownership Type

Water/Sewer/Utility District or Board

The Facility/Site Address is the physical location of the treatment plant. Do not enter a PO Box. Do not enter the address of the office of the Permittee if different from the treatment plant.

### Facility/Site Physical Location Address

1420 Country Club Drive

Arab, AL 35016

### Facility/Site County

Marshall

### Facility/Site Contact

#### Prefix

*Mr.*

#### First Name      Last Name

John              *Barnes*

#### Title

*Manager*

#### Organization Name

*City of Arab Sewer Board*

#### Phone Type      Number      Extension

Business      2565866148

#### Email

arabsewer@otelco.net

### Note

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Detailed directions should be included if a street address is not available.

### Detailed Directions to the Facility/Site

NONE PROVIDED

Please refer to the link below for Lat/Long map instruction help.

[Map Instruction Help](#)

### Facility/Site Front Gate Latitude and Longitude

34.330762,-86.521902

1420 Country Club Drive, Arab, AL

### Primary SIC Code

4952-Sewerage Systems

**Primary NAICS Code**

221320-Sewage Treatment Facilities

**Emergency Contact**

**Prefix**  
Mr.

**First Name**    **Last Name**  
John                Barnes

**Title**  
Manager

**Phone Type**   **Number**        **Extension**  
Mobile            2565500937

**Email**  
arabsewer@otelco.net

**Does the facility have a designated Environmental Contact who is different than the Facility Contact or Emergency Contact listed above?**

No

**Enforcement History**

**Has the applicant been issued any Notices of Violation, Orders (Consent or Administrative/Unilateral), or Judicial Actions (Complaint, Settlement Agreement, Consent Decree, or Court Order) concerning water pollution or other permit violations within the State of Alabama in the past five years?**

Yes

**Identify all Notices of Violation, Orders (Consent or Administrative/Unilateral), or Judicial Actions (Complaint, Settlement Agreement, Consent Decree, or Court Order) concerning water pollution or other permit violations, if any, against the Applicant within the State of Alabama in the past five years.**

Facility/Site Name	Permit Number	Type of Action	Date of Action
Gilliam Creek WWTP	AL0056626	Consent Decree	02/28/2024
Riley Maze Creek WWTP	AL0020303	Consent Decree	02/28/2024

**Wastewater Treatment & Discharge Information**

**Please indicate which type of operations occur at this facility:**

Treatment Works Treating Domestic Sewage

**What treatment type is used at this facility:**

Mechanical (WWTP)

**What discharge options are used at this facility:**

Surface Water

**What is the Total Design Flow (in millions of gallons per day, MGD) for this facility?**

0.830000000

**What is the facility's total 2-Year Actual Average Flow (in millions of gallons per day, MGD)?**

0.916

**Process Flow Schematic**

[Gilliam Creek WWTP Layout.pdf - 02/28/2024 09:36 AM](#)

**Comment**

NONE PROVIDED

**Do you share an outfall with another facility?**

No

**Indicate if automatic sampling equipment or continuous wastewater flow metering equipment is being operated at**

**this facility:**

Current	Yes/No
Continuous Wastewater Flow Metering Equipment	Yes
Automatic Sampling Equipment	Yes

**Indicate if installation of automatic sampling equipment or continuous wastewater flow metering equipment is planned at this facility:**

Planned	Yes/No
Continuous Wastewater Flow Metering Equipment	No
Automatic Sampling Equipment	No

**Schematic Diagram**

[Gilliam Creek WWTP flow and sampler locations.pdf - 02/28/2024 09:43 AM](#)

**Comment**

NONE PROVIDED

**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)?**

No

**Treatment Methods (TWTDS)**

**Treatment Level**

Preliminary Treatment (e.g., grit removal, flow equalization, screening)

Primary Treatment (e.g., primary clarification, chemically-enhanced primary treatment)

**Wastewater Disinfection Technology Information**

Chlorination

**Please select all POTW Treatment Categories that apply.**

Activated Sludge Process & Modifications

Land Application

Aeration

Clarification

Dechlorination

**Please select all unit operations that apply for Activated Sludge Process & Modifications:**

Activated Sludge, Extended Aeration

**Please select all unit operations that apply for Aeration:**

Aeration (general)

**Please select all unit operations that apply for Clarification:**

Clarification, Secondary

**Please select all unit operations that apply for Land Application:**

Land Application, Slow Rate, W/O Underdrain

**Please select all unit operations that apply for Preliminary Treatment:**

Aerated Grit Chambers

Grit Removal

Screen, Bar

**Waste Storage & Disposal Information**

**Any storage of solids or liquids at the facility that have any potential for accidental discharge to a water of the state?**

No

**Collection System Information**



**Collection Systems**

Collection System ID	Collection System Name	Owner Type of Collection System	Population of Collection System
AL0056626	Gilliam Creek WWTP Basin	Publicly owned (Owned by State, municipality, or Tribal government. This includes a district association or other public body created by or pursuant to State law and having jurisdiction over the disposal of sewage).	10,000

**Industrial Indirect Discharge Contributors**

**Does this wastewater treatment system receive or plan to receive industrial source wastewater contributions?**  
Yes

**How will you be submitting the list of existing and proposed industrial source wastewater contributions to the municipal wastewater treatment system?**  
I want to add my data directly on this form.

**List the existing and proposed industrial source wastewater contributions to the municipal wastewater treatment system:**

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?
Circulus Holdings, LLC	Domestic Waste and Process	Proposed	110000	Yes

**Are industrial wastewater contributions regulated via a locally approved sewer use ordinance?**  
Yes

**Please attach a copy of the ordinance.**  
[Sanitary Sewer Use Ordinance.pdf - 02/28/2024 09:30 AM](#)  
**Comment**  
 NONE PROVIDED

**Coastal Zone Information**

**Is the discharge(s) located within the 10-foot elevation contour and within the limits of Mobile or Baldwin County?**  
No

**Anti-Degradation Evaluation**

**Does this modification/reissuance include a new or increased discharge that began after April 3, 1991?**  
No

**Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced above?**  
No

**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 must be submitted 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.  
The EPA application forms are found on the Department's website here.

**EPA Form 2A**

Form2aGilliam2024.pdf - 02/28/2024 12:36 PM  
**Comment**  
NONE PROVIDED

**EPA form 2S**

Form2SGilliam2024.pdf - 02/28/2024 12:37 PM  
2024SludgeReportGilliam.pdf - 02/28/2024 12:37 PM  
**Comment**  
NONE PROVIDED

**Other attachments (as needed)**

NONE PROVIDED  
**Comment**  
NONE PROVIDED

**Topographic Map**

Attach topographic map here.

Gilliam2024Topo.pdf - 02/28/2024 12:47 PM  
**Comment**  
NONE PROVIDED

**Engineering Report/BMP Plan Requirements**

Engineering Report/BMP Plan Requirements

NONE PROVIDED  
**Comment**  
NONE PROVIDED

**Outfalls (1 of 1)**

**Outfall: 001**

**Do you want to remove this outfall from the modified/reissued permit?**

No

**Outfall Identifier**

001

**Is this Outfall equipped with a diffuser?**

No

**What is this Outfall's 2-Year Average Flow (in millions of gallons per day, MGD)?**

.830

**Receiving Water**

Gilliam Creek

**Does the discharge enter the named receiving water via an unnamed tributary?**

NONE PROVIDED

**Please refer to the link below for Lat/Long map instruction help.**

Map Instruction Help

**Location of Outfall or Discharge Point/Receiving Water**

34.34019800000000, -86.54211400000000

A list of the 303(d) impaired waters can be found here.

**303(d) Segment?**

No

A list of waters subject to a TMDL can be found here.

**TMDL Segment?**

No

**NOTE**

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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, and 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 the requested compliance schedule.

**TMDL Attachments**

NONE PROVIDED

**Comment**

NONE PROVIDED

**Fee**

**Fee**

4290

**Note: Additional Fees may be assessed after the review of the application is complete. These fees may include any of the following:**

Modeling with Data Collection (10 Stations) - \$60,390

Modeling with Data Collection (5 Stations) - \$49,315

Modeling - desktop - \$4,855

Review of Model Performed by Others - \$2,705

Seasonal Limits - \$4,855/additional season

Biomonitoring & Toxicity Limits - \$1,015

Please contact your area engineer if you have any questions about which additional fees may be assessed for this application.

**Application Preparer**

**Application Preparer**

**Prefix**

NONE PROVIDED

**First Name**

NONE PROVIDED

**Last Name**

NONE PROVIDED

**Title**

NONE PROVIDED

**Organization Name**

NONE PROVIDED

**Phone Type**

**Number**

**Extension**

NONE PROVIDED

**Email**

NONE PROVIDED

**Address**

[NO STREET ADDRESS SPECIFIED]

[NO CITY SPECIFIED], AL [NO ZIP CODE SPECIFIED]

# Agreements and Signature(s)

## SUBMISSION AGREEMENTS

- I am the owner of the account used to perform the electronic submission and signature.
- I have the authority to submit the data on behalf of the facility I am representing.
- I agree that providing the account credentials to sign the submission document constitutes an electronic signature equivalent to my written signature.
- I have reviewed the electronic form being submitted in its entirety, and agree to the validity and accuracy of the information contained within it to the best of my knowledge.

*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.*

### **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.*

**Signed** John Barnes on 02/28/2024 at 12:50 PM  
**By**

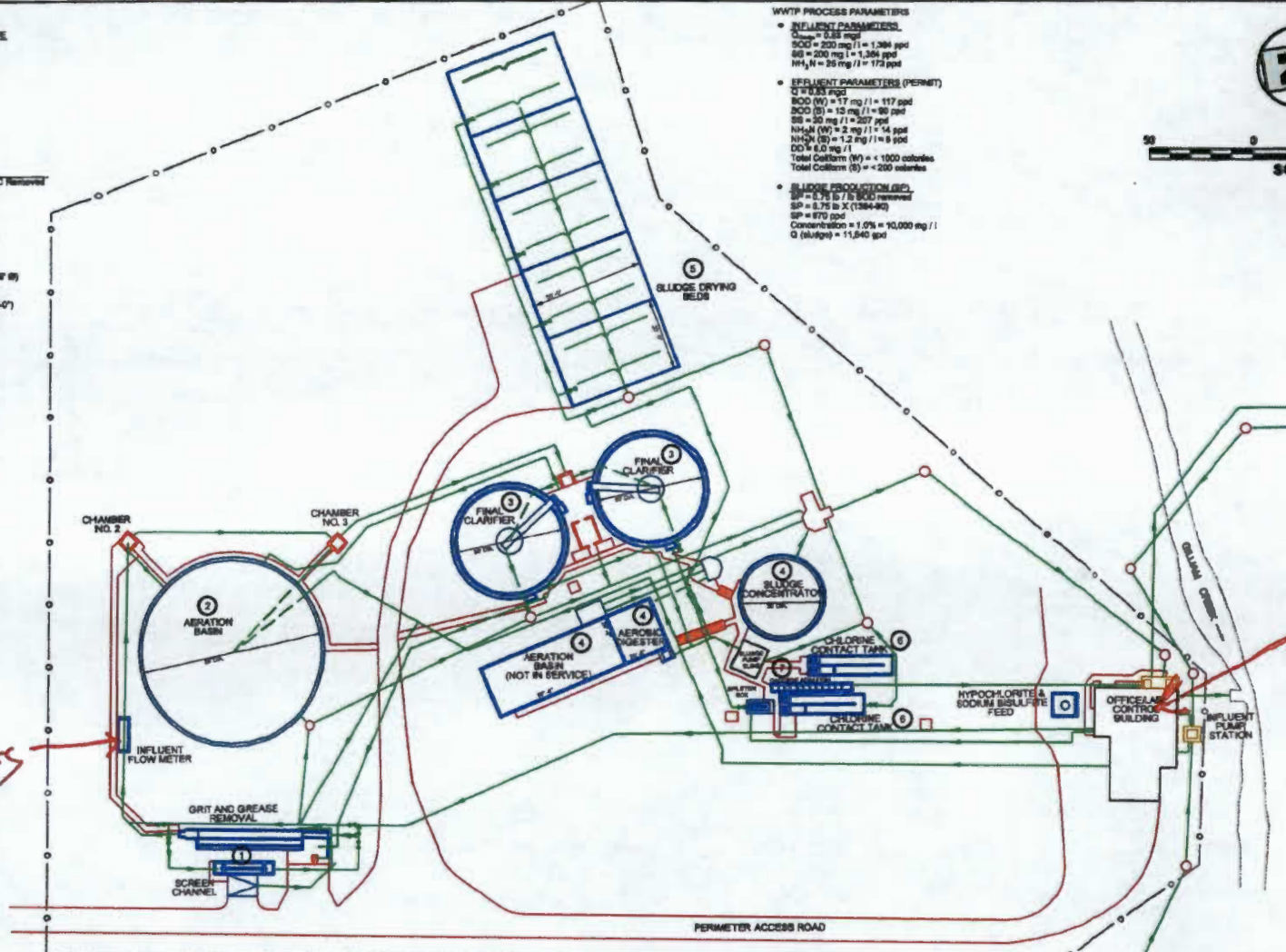
- 1 HEADWORKS - MAXIMALLY EFFICIENT AT PRELIMINARY TREATMENT
- 2 AERATION BASIN  
 $V = 17,258 \text{ gal}$   
 Det = 21 hrs  
 Load = 14.2 lb / 1000 ft
- 3 FINAL CLARIFIERS  
 Two Each Clarifiers 87' Dia. w/ 12' BWD  
 Surface Area = 1,953 sq ft / Clarifier  
 Web Length = 104 ft / Clarifier  
 Surface Loading = 211 gpd / sq ft  
 Web Loading = 2,798 gpd / ft Clarifier
- 4 AEROBIC SLUDGE DIGESTER  
 Sludge Production = 0.75 lb BOD Removed  
 = 970 gpd  
 Sludge Concentration = 1.0% sluc.  
 = 10,000 mg / l  
 $Q$  (sludge) = 11,540 gpd  
 AEROBIC SLUDGE DIGESTER VOLUME  
 $V = 69,000 \text{ gal}$   
 Det = 5 days  
 EXISTING SLUDGE CONCENTRATOR (24' DIA)  
 NOT IN SERVICE  
 EXISTING AERATION BASIN (37' DIA X 24' D)  
 NOT IN SERVICE
- 5 SLUDGE DRYING BEDS  
 Surface Area = 3' x 2' x 1000 ft  
 Surface Area = 6000 sq ft  
 Annual Loading = 529,500 (lb) sludge  
 5000 ft  
 Annual Loading = 37 lb / yr / sq ft
- 6 CHLORINE CONTACT CHAMBER  
 $V = \text{Chamber 1} + \text{Chamber 2}$   
 $V = 15,750 \text{ gal} + 15,750 \text{ gal}$   
 $V = 31,500 \text{ gal}$   
 $T = 61 \text{ min}$  when both in service
- 7 CARGAGE AERATION

- WWTP PROCESS PARAMETERS
- EFFLUENT PARAMETERS  
 $Q_{\text{max}} = 0.85 \text{ mgd}$   
 $\text{BOD} = 200 \text{ mg / l} = 1,200 \text{ ppd}$   
 $\text{SS} = 200 \text{ mg / l} = 1,200 \text{ ppd}$   
 $\text{NH}_4\text{-N} = 35 \text{ mg / l} = 173 \text{ ppd}$
  - EFFLUENT PARAMETERS (PERMIT)  
 $Q = 0.85 \text{ mgd}$   
 $\text{BOD (5)} = 17 \text{ mg / l} = 117 \text{ ppd}$   
 $\text{BOD (20)} = 15 \text{ mg / l} = 90 \text{ ppd}$   
 $\text{SS} = 20 \text{ mg / l} = 207 \text{ ppd}$   
 $\text{NH}_4\text{-N (5)} = 2 \text{ mg / l} = 14 \text{ ppd}$   
 $\text{NH}_4\text{-N (20)} = 1.2 \text{ mg / l} = 8 \text{ ppd}$   
 $\text{DD} = 6.0 \text{ mg / l}$   
 Total Coliform (5) = < 1000 colonies  
 Total Coliform (20) = < 200 colonies
  - SLUDGE PRODUCTION (SIC)  
 $\text{SP} = 0.75 \text{ lb BOD removed}$   
 $\text{SP} = 0.75 \text{ lb X } (1384-80)$   
 $\text{SP} = 870 \text{ gpd}$   
 Concentration = 1.0% = 10,000 mg / l  
 $Q$  (sludge) = 11,540 gpd



*Flow Monitoring*

*Raw & Effluent Samples*



**HETHCOAT DAVIS**  
 ENGINEERS PLANNERS

876 FRANKLIN ROAD, SUITE 200 • 300 VESTAVIA PARKWAY, SUITE 2300  
 BRENTWOOD, TN 37027 • BIRMINGHAM, AL 35211

**SITE LAYOUT**  
**GILLIAM CREEK WASTEWATER TREATMENT PLANT**  
 CITY OF ARAB, ALABAMA

**Fig**  
**3-2**  
 FILE NO. 1081.01

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MUNICIPAL SECTION

**1 HEADWORKS - MARGINALLY EFFECTIVE AT PRELIMINARY TREATMENT**

**2 AERATION BASIN**  
 $V = 0.725 \text{ mg}$   
 Det = 21 hrs  
 Load = 14.2 lb / 1000 cf

**3 FINAL CLARIFIERS**  
 Two Each Clarifiers 50' Dia. w / 12' SWD  
 Surface Area = 1,963 sf / Clarifier  
 Weir Length = 154 ft / Clarifier  
 Surface Loading = 211 gpd / sf  
 Weir Loading = 2,700 gpd / ft / Clarifier

**4 AEROBIC SLUDGE DIGESTER**  
 Sludge Production = 0.75 lb / lb BOD Removed  
 = 970 gpd  
 Sludge Concentration = 1.0% Max.  
 = 10,000 mg / l  
 = 11,640 gpd  
 $Q$  (sludge)

**AEROBIC SLUDGE DIGESTER VOLUME**  
 $V = 60,000 \text{ gal}$   
 Det = 6 days

EXISTING SLUDGE CONCENTRATOR (36" Ø)  
 NOT IN SERVICE

EXISTING AERATION BASIN (67'-6" X 24'-0")  
 NOT IN SERVICE

**5 SLUDGE DRYING BEDS**  
 Surface Area = 3 Ea X 1825 sf  
 Surface Area = 9625 sf  
 Annual Loading = 970 gpd (365 days)  
 1825 sf  
 Annual Loading = 37 lb / yr / sf

**6 CHLORINE CONTACT CHAMBER**  
 $V = \text{Chamber 1} + \text{Chamber 2}$   
 $V = 15,700 \text{ gal} + 19,328 \text{ gal}$   
 $V = 35,028 \text{ gal}$   
 $T = 61 \text{ min}$  when both in service

**7 CASCADE AERATION**

**WWTP PROCESS PARAMETERS**

**INFLUENT PARAMETERS**  
 $Q_{\text{inlet}} = 0.83 \text{ mgd}$   
 $\text{BOD} = 200 \text{ mg / l} = 1,384 \text{ ppd}$   
 $\text{SS} = 200 \text{ mg / l} = 1,384 \text{ ppd}$   
 $\text{NH}_4\text{-N} = 25 \text{ mg / l} = 173 \text{ ppd}$

**EFFLUENT PARAMETERS (PERMIT)**  
 $Q = 0.83 \text{ mgd}$   
 $\text{BOD (W)} = 17 \text{ mg / l} = 117 \text{ ppd}$   
 $\text{BOD (S)} = 13 \text{ mg / l} = 90 \text{ ppd}$   
 $\text{SS} = 30 \text{ mg / l} = 207 \text{ ppd}$   
 $\text{NH}_4\text{-N (W)} = 2 \text{ mg / l} = 14 \text{ ppd}$   
 $\text{NH}_4\text{-N (S)} = 1.2 \text{ mg / l} = 8 \text{ ppd}$   
 $\text{DO} = 5.0 \text{ mg / l}$   
 Total Coliform (W) = < 1000 colonies  
 Total Coliform (S) = < 200 colonies

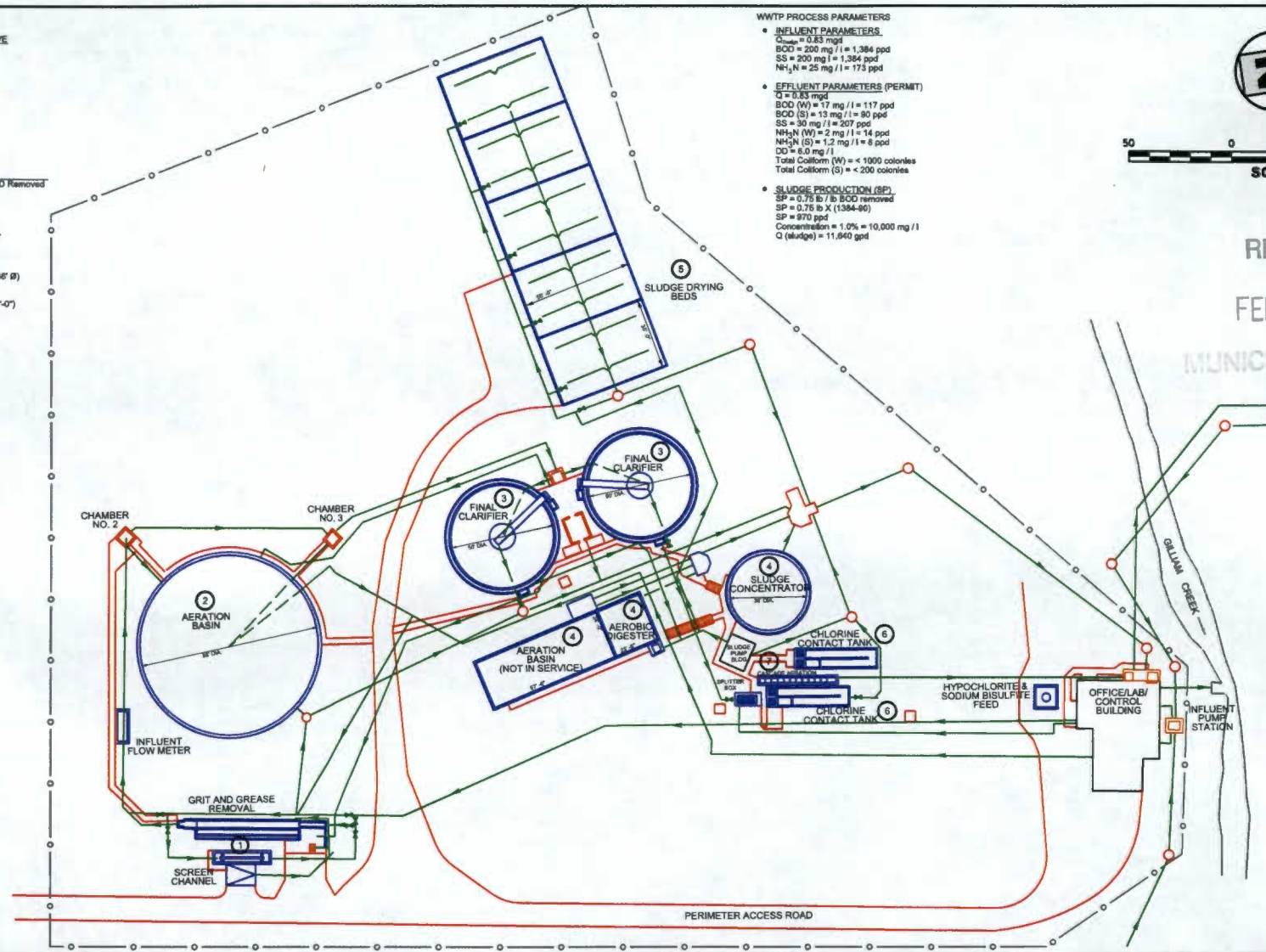
**SLUDGE PRODUCTION (SP)**  
 $\text{SP} = 0.75 \text{ lb / lb BOD removed}$   
 $\text{SP} = 0.75 \text{ lb X (1384-gd)}$   
 $\text{SP} = 970 \text{ gpd}$   
 Concentration = 1.0% = 10,000 mg / l  
 $Q$  (sludge) = 11,640 gpd



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MUNICIPAL SECTION



MUNICIPAL SECTION

FEB 28 2024

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*Gilliam Creek Survey*

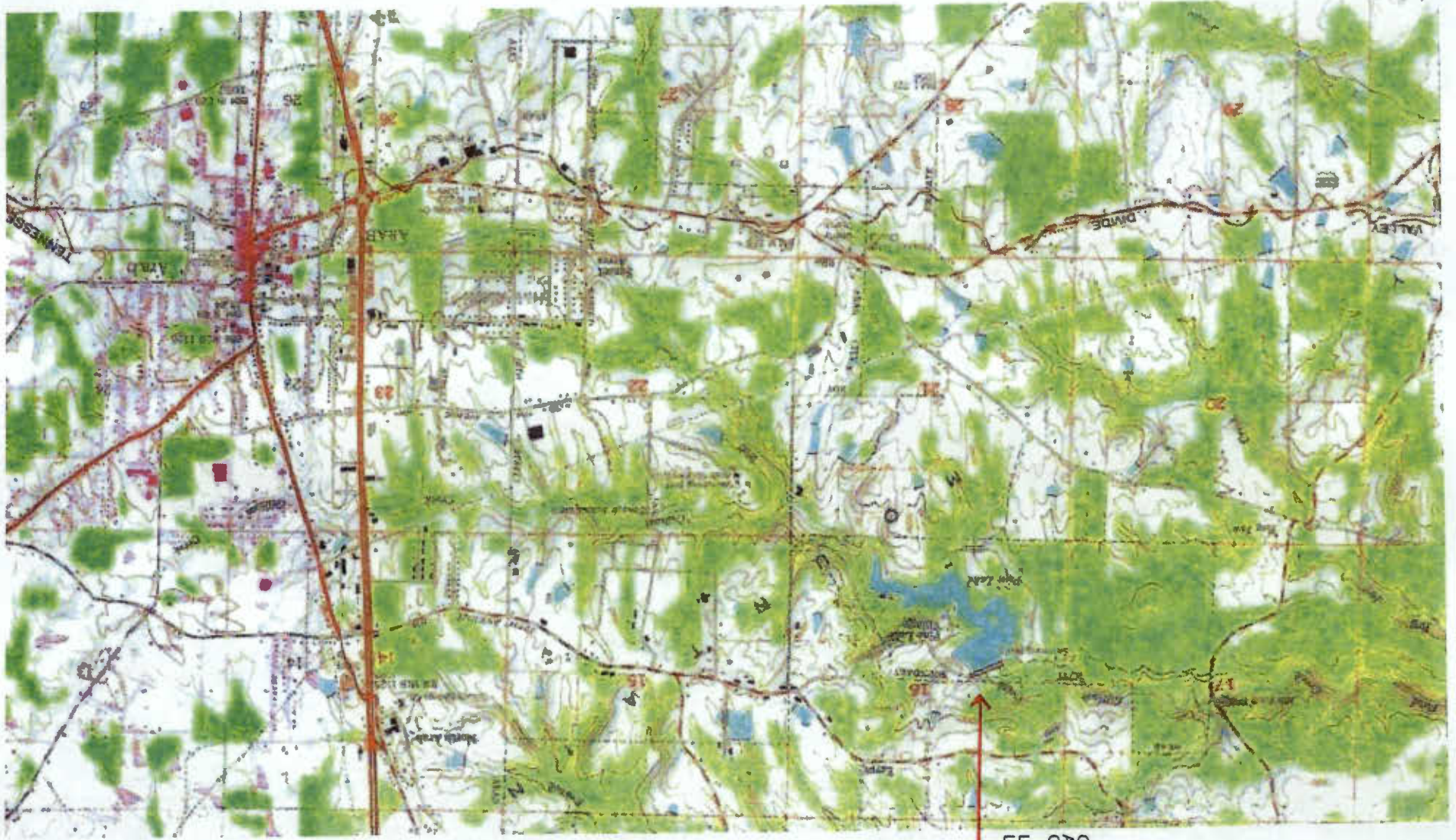




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Gilliam Creek WWTP  
AL0056626  
Outfall 001 1  
LAT - 34 20 24.9  
LON - 86 32 31.5

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MAR 28 2024


MUNICIPAL SECTION



Gilliam Creek WWTP  
AL0056626  
Outfall 001 1

LAT - 34 20 24.9  
LON - 86 32 31.5

EPA identification Number	NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
---------------------------	----------------------------------	-------------------------------------	---

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))**

<b>Facility Information</b>	1.1	Facility name Gilliam Creek WWTP			
		Mailing address (street or P.O. box) 654 11th Avenue NW			
		City or town Arab	State AL	ZIP code 35016	
		Contact name (first and last) John Barnes	Title Manager	Phone number (256) 586-6148	Email address arabsewer@otelco.net
		Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address 1420 Country Club Drive NW			
		City or town Arab	State AL	ZIP code 35016	
	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			

<b>Applicant Information</b>	1.3	Is applicant different from entity listed under Item 1.1 above? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.4.			
		Applicant name			
		Applicant address (street or P.O. box)			
		City or town	State	ZIP code	
		Contact name (first and last)	Title	Phone number	Email address
	1.4	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Both			
	1.5	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)			

<b>Existing Environmental Permits</b>	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) AL0056626 / AL0020303	<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)		

EPA Identification Number		NPDES Permit Number		Facility Name		Form Approved 03/05/19 OMB No. 2040-0004	
		AL0056626		Gilliam Creek WWTP			
Collection System and Population Served	1.7	Provide the collection system information requested below for the treatment works.					
		<b>Municipality Served</b>	<b>Population Served</b>	<b>Collection System Type</b> (indicate percentage)		<b>Ownership Status</b>	
		8500	1450	<u>100</u> % separate sanitary sewer	<input checked="" type="checkbox"/> Own	<input checked="" type="checkbox"/> Maintain	
				<u>0</u> % combined storm and sanitary sewer	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
				<input type="checkbox"/> Unknown	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
				_____ % separate sanitary sewer	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
				_____ % combined storm and sanitary sewer	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
				<input type="checkbox"/> Unknown	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
				_____ % separate sanitary sewer	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
				_____ % combined storm and sanitary sewer	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain	
			<input type="checkbox"/> Unknown	<input type="checkbox"/> Own	<input type="checkbox"/> Maintain		
		<b>Total Population Served</b>	1450				
				<b>Separate Sanitary Sewer System</b>	<b>Combined Storm and Sanitary Sewer</b>		
		Total percentage of each type of sewer line (in miles)		100 %	0 %		
Indian Country	1.8	Is the treatment works located in Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
	1.9	Does the facility discharge to a receiving water that flows through Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Design and Actual Flow Rates	1.10	Provide design and actual flow rates in the designated spaces.				<b>Design Flow Rate</b>	
						.830 mgd	
		<b>Annual Average Flow Rates (Actual)</b>					
		<b>Two Years Ago</b>		<b>Last Year</b>		<b>This Year</b>	
		1.259 mgd		1.078 mgd		.916 mgd	
		<b>Maximum Daily Flow Rates (Actual)</b>					
<b>Two Years Ago</b>		<b>Last Year</b>		<b>This Year</b>			
1.924 mgd		2.225 mgd		1.985 mgd			
Discharge Points by Type	1.11	Provide the total number of effluent discharge points to waters of the United States by type.					
		<b>Total Number of Effluent Discharge Points by Type</b>					
		<b>Treated Effluent</b>	<b>Untreated Effluent</b>	<b>Combined Sewer Overflows</b>	<b>Bypasses</b>	<b>Constructed Emergency Overflows</b>	
		1	0	0	0	0	

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	

EPA Identification Number	NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP
---------------------------	----------------------------------	-------------------------------------

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.			
	<b>Receiving Facility Data</b>				
	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 <span style="float: right;">mgd</span>		
	1.21	Is the wastewater disposed of in a manner other than those already mentioned in Items 1.14 through 1.21 that do not have outlets to waters of the United States (e.g., underground percolation, underground injection)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.23.			
	1.22	Provide information in the table below on these other disposal methods.			
	<b>Information on Other Disposal Methods</b>				
	<b>Disposal Method Description</b>	<b>Location of Disposal Site</b>	<b>Size of Disposal Site</b>	<b>Annual Average Daily Discharge Volume</b>	<b>Continuous or Intermittent (check one)</b>
			acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
			acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
		acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent	
Variance Requests	1.23	Do you intend to request or renew one or more of the variances authorized at 40 CFR 122.21(n)? (Check all that apply. Consult with your NPDES permitting authority to determine what information needs to be submitted and when.) <input type="checkbox"/> Discharges into marine waters (CWA Section 301(h)) <input type="checkbox"/> Water quality related effluent limitation (CWA Section 302(b)(2)) <input checked="" type="checkbox"/> Not applicable			
Contractor Information	1.24	Are any operational or maintenance aspects (related to wastewater treatment and effluent quality) of the treatment works the responsibility of a contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 2.			
	1.25	Provide location and contact information for each contractor in addition to a description of the contractor's operational and maintenance responsibilities.			
	<b>Contractor Information</b>				
		<b>Contractor 1</b>	<b>Contractor 2</b>	<b>Contractor 3</b>	
	Contractor name (company name)				
	Mailing address (street or P.O. box)				
	City, state, and ZIP code				
	Contact name (first and last)				
	Phone number				
Email address					
Operational and maintenance responsibilities of contractor					

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

Design Flow	<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.				
Inflow and Infiltration	2.2	Provide the treatment works' current average daily volume of inflow and infiltration.	Average Daily Volume of Inflow and Infiltration 100 gpd			
	Indicate the steps the facility is taking to minimize inflow and infiltration. Rehab of sanitary sewer lines.					
Topographic Map	2.3	Have you attached a topographic map to this application that contains all the required information? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Flow Diagram	2.4	Have you attached a process flow diagram or schematic to this application that contains all the required information? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Scheduled Improvements and Schedules of Implementation	2.5	Are improvements to the facility scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 3.				
	Briefly list and describe the scheduled improvements.					
	1.					
	2.					
	3.					
	4.					
2.6	Provide scheduled or actual dates of completion for improvements.					
<b>Scheduled or Actual Dates of Completion for Improvements</b>						
	Scheduled Improvement (from above)	Affected Outfalls (list outfall number)	Begin Construction (MM/DD/YYYY)	End Construction (MM/DD/YYYY)	Begin Discharge (MM/DD/YYYY)	Attainment of Operational Level (MM/DD/YYYY)
	1.					
	2.					
	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 type="checkbox"/> None required or applicable					
Explanation:						

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

<b>Description of Outfalls</b>	3.1	Provide the following information for each outfall. (Attach additional sheets if you have more than three outfalls.)		
		Outfall Number <u>001 1</u>	Outfall Number _____	Outfall Number _____
	State	Alabama		
	County	Marshall		
	City or town	Arab		
	Distance from shore	NA ft.	ft.	ft.
	Depth below surface	NA ft.	ft.	ft.
	Average daily flow rate	.916 mgd	mgd	mgd
	Latitude	34° 20' 24.9"	° ' "	° ' "
	Longitude	86° 32' 31.5"	° ' "	° ' "
<b>Seasonal or Periodic Discharge Data</b>	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				
<b>Diffuser Type</b>	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 _____
<b>Waters of the U.S.</b>	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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<b>Receiving Water Description</b>	3.7	Provide the receiving water and related information (if known) for each outfall.		
		Outfall Number <u>001 1</u>	Outfall Number _____	Outfall Number _____
	Receiving water name	Gilliam Creek		
	Name of watershed, river, or stream system	unknown		
	U.S. Soil Conservation Service 14-digit watershed code	unknown		
	Name of state management/river basin	unknown		
	U.S. Geological Survey 8-digit hydrologic cataloging unit code	unknown		
	Critical low flow (acute)	unknown cfs	cfs	cfs
	Critical low flow (chronic)	unknown cfs	cfs	cfs
	Total hardness at critical low flow	unknown mg/L of CaCO <sub>3</sub>	mg/L of CaCO <sub>3</sub>	mg/L of CaCO <sub>3</sub>
<b>Treatment Description</b>	3.8	Provide the following information describing the treatment provided for discharges from each outfall.		
		Outfall Number <u>001 1</u>	Outfall Number _____	Outfall Number _____
	Highest Level of Treatment (check all that apply per outfall)	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input checked="" type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input type="checkbox"/> Other (specify)
	Design Removal Rates by Outfall	001 1		
	BOD <sub>5</sub> or CBOD <sub>5</sub>	85 %	%	%
	TSS	85 %	%	%
	Phosphorus	<input checked="" type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %
	Nitrogen	<input checked="" type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %
Other (specify)	<input checked="" type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	

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<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. 30 Minute CL2 contact chamber.		
		Outfall Number <u>001 1</u>	Outfall Number _____	Outfall Number _____
		Disinfection type	CL2	
		Seasons used	All	
		Dechlorination used?	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No

<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.13.		
	3.12	Indicate the number of acute and chronic WET tests conducted since the last permit reissuance of the facility's discharges by outfall number or of the receiving water near the discharge points.		
		Outfall Number _____	Outfall Number _____	Outfall Number _____
		Acute	Chronic	Acute
		Chronic	Acute	Chronic
		Acute	Chronic	Acute
		Chronic	Acute	Chronic
		Number of tests of discharge water		
		Number of tests of receiving water		
3.13	Does the treatment works have a design flow greater than or equal to 0.1 mgd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.16.			
3.14	Does the POTW use chlorine for disinfection, use chlorine elsewhere in the treatment process, or otherwise have reasonable potential to discharge chlorine in its effluent? <input checked="" type="checkbox"/> Yes → Complete Table B, including chlorine. <input type="checkbox"/> No → Complete Table B, omitting chlorine.			
3.15	Have you completed monitoring for all applicable Table B pollutants and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
3.16	Does one or more of the following conditions apply? <ul style="list-style-type: none"> <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 type="checkbox"/> Yes → Complete Tables C, D, and E as applicable. <input checked="" 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 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 type="checkbox"/> No additional sampling required by NPDES permitting authority.			

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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 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 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"> <thead> <tr> <th>Date(s) Submitted (MM/DD/YYYY)</th> <th>Summary of Results</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Date(s) Submitted (MM/DD/YYYY)	Summary of Results		
Date(s) Submitted (MM/DD/YYYY)	Summary of Results				
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 type="checkbox"/> No → SKIP to Item 3.26.				
3.23	Describe the cause(s) of the toxicity:				
3.24	Has the treatment works conducted a toxicity reduction evaluation? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.26.				
3.25	Provide details of any toxicity reduction evaluations conducted.				
3.26	Have you completed Table E for all applicable outfalls and attached the results to the application package? <input type="checkbox"/> Yes <input type="checkbox"/> Not applicable because previously submitted information to the NPDES permitting authority.				

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

Industrial Discharges and Hazardous Wastes

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

<b>Industrial Discharges and Hazardous Wastes Continued</b>	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?		
		<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input checked="" type="checkbox"/> No → SKIP to Item 4.9.</span>		
	4.8	If yes, provide the following information:		
		<b>Hazardous Waste Number</b>	<b>Waste Transport Method (check all that apply)</b>	<b>Annual Amount of Waste Received</b>
			<input type="checkbox"/> Truck <span style="margin-left: 100px;"><input type="checkbox"/> Rail</span> <input type="checkbox"/> Dedicated pipe <span style="margin-left: 100px;"><input type="checkbox"/> Other (specify) _____</span>	
			<input type="checkbox"/> Truck <span style="margin-left: 100px;"><input type="checkbox"/> Rail</span> <input type="checkbox"/> Dedicated pipe <span style="margin-left: 100px;"><input type="checkbox"/> Other (specify) _____</span>	
		<input type="checkbox"/> Truck <span style="margin-left: 100px;"><input type="checkbox"/> Rail</span> <input type="checkbox"/> Dedicated pipe <span style="margin-left: 100px;"><input type="checkbox"/> Other (specify) _____</span>		
	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?		
		<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input checked="" type="checkbox"/> No → SKIP to Section 5.</span>		
	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)?		
		<input type="checkbox"/> Yes → SKIP to Section 5. <span style="margin-left: 200px;"><input type="checkbox"/> No</span>		
	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?		
		<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>		

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

<b>CSO Map and Diagram</b>	5.1	Does the treatment works have a combined sewer system?		
		<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input checked="" type="checkbox"/> No → SKIP to Section 6.</span>		
	5.2	Have you attached a CSO system map to this application? (See instructions for map requirements.)		
		<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>		
	5.3	Have you attached a CSO system diagram to this application? (See instructions for diagram requirements.)		
		<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>		

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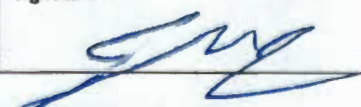
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<b>CSO Outfall Description</b>	5.4	For each CSO outfall, provide the following information. (Attach additional sheets as necessary.)		
		CSO Outfall Number _____	CSO Outfall Number _____	CSO Outfall Number _____
	City or town			
	State and ZIP code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

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

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

<b>Checklist and Certification Statement</b>	<b>6.1</b>	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.		
		<b>Column 1</b>	<b>Column 2</b>	
	<input checked="" type="checkbox"/>	Section 1: Basic Application Information for All Applicants	<input type="checkbox"/> w/ variance request(s)	<input checked="" type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 2: Additional Information	<input 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 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 checked="" type="checkbox"/> w/ attachments	
	<b>6.2</b>	<b>Certification Statement</b>		
		<p><i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i></p>		
	Name (print or type first and last name)		Official title	
	John M. Barnes Jr.		Manager	
	Signature		Date signed	
			02/28/2024	

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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)	254.933	26.3693	76.2083	7.51292	156	40 CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fecal coliform	NA	NA	NA	NA	NA	NA	NA <input type="checkbox"/> ML <input type="checkbox"/> MDL
Design flow rate	1.985	NA	1.05858	NA	365		
pH (minimum)	7.2	NA					
pH (maximum)	8.5	NA					
Temperature (winter)	NA	NA	NA	NA	NA		
Temperature (summer)	NA	NA	NA	NA	NA		
Total suspended solids (TSS)	533.533	33.8133	125.488	11.4819	156	40 CFR	<input type="checkbox"/> ML <input checked="" 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).

EFFLUENT PARAMETERS FOR

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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)	42.7379	2.69333	8.76942	0.73229	156	40 CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorine (total residual, TRC) <sup>2</sup>	0	0	0	0	156	40 CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dissolved oxygen	9.8	NA	8.508	NA	156	40 CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nitrate/nitrite	69	18.8	42	10.77	7	40CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Kjeldahl nitrogen	58	4.13	27.28	4.77	7	40CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Oil and grease	NA	NA	NA	NA	NA	NA	NA <input type="checkbox"/> ML <input type="checkbox"/> MDL
Phosphorus	8	3.35	4.9	1.44	7	40 CFR	<input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Total dissolved solids	NA	NA	NA	NA	NA	NA	NA <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> )	Unknown; lack of historical data		<80	mg/L			<input type="checkbox"/> ML <input type="checkbox"/> MDL
Antimony, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Arsenic, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Beryllium, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Cadmium, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Chromium, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Copper, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Lead, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Mercury, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Nickel, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Selenium, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Silver, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Thallium, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Zinc, total recoverable	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Cyanide	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Total phenolic compounds	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
<b>Volatile Organic Compounds</b>							
Acrolein	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Acrylonitrile	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Bromoform	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL

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EPA Identification Number	NPDES Permit Number	Facility Name Circulus Arab	Outfall Number 001
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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	Believed Absent				None Available	No Data Available for Facility	<input type="checkbox"/> ML
Chlorobenzene	Believed Absent						<input type="checkbox"/> MDL
Chlorodibromomethane	Believed Absent						<input type="checkbox"/> ML
Chloroethane	Believed Absent						<input type="checkbox"/> MDL
2-chloroethylvinyl ether	Believed Absent						<input type="checkbox"/> ML
Chloroform	Believed Absent						<input type="checkbox"/> MDL
Dichlorobromomethane	Believed Absent						<input type="checkbox"/> ML
1,1-dichloroethane	Believed Absent						<input type="checkbox"/> MDL
1,2-dichloroethane	Believed Absent						<input type="checkbox"/> ML
trans-1,2-dichloroethylene	Believed Absent						<input type="checkbox"/> MDL
1,1-dichloroethylene	Believed Absent						<input type="checkbox"/> ML
1,2-dichloropropane	Believed Absent						<input type="checkbox"/> MDL
1,3-dichloropropylene	Believed Absent						<input type="checkbox"/> ML
Ethylbenzene	Believed Absent						<input type="checkbox"/> MDL
Methyl bromide	Believed Absent						<input type="checkbox"/> ML
Methyl chloride	Believed Absent						<input type="checkbox"/> MDL
Methylene chloride	Believed Absent						<input type="checkbox"/> ML
1,1,2,2-tetrachloroethane	Believed Absent						<input type="checkbox"/> MDL
Tetrachloroethylene	Believed Absent						<input type="checkbox"/> ML
Toluene	Believed Absent						<input type="checkbox"/> MDL
1,1,1-trichloroethane	Believed Absent					<input type="checkbox"/> ML	
1,1,2-trichloroethane	Believed Absent					<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	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Vinyl chloride	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
<b>Acid-Extractable Compounds</b>							
p-chloro-m-cresol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2-chlorophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dichlorophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dimethylphenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
4,6-dinitro-o-cresol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2-nitrophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
4-nitrophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Pentachlorophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Phenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4,6-trichlorophenol	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
<b>Base-Neutral Compounds</b>							
Acenaphthene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Acenaphthylene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Anthracene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzidine	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(a)anthracene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(a)pyrene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
3,4-benzofluoranthene	Believed Absent						<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		
Benzo(ghi)perylene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Benzo(k)fluoranthene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethoxy) methane	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethyl) ether	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroisopropyl) ether	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-ethylhexyl) phthalate	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
4-bromophenyl phenyl ether	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Butyl benzyl phthalate	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2-chloronaphthalene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
4-chlorophenyl phenyl ether	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Chrysene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
di-n-butyl phthalate	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
di-n-octyl phthalate	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Dibenzo(a,h)anthracene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
1,2-dichlorobenzene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
1,3-dichlorobenzene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
1,4-dichlorobenzene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
3,3-dichlorobenzidine	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Diethyl phthalate	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Dimethyl phthalate	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrotoluene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
2,6-dinitrotoluene	Believed Absent						<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		
1,2-diphenylhydrazine	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Fluoranthene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Fluorene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorobenzene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorobutadiene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachlorocyclo-pentadiene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Hexachloroethane	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Indeno(1,2,3-cd)pyrene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Isophorone	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Naphthalene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Nitrobenzene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodi-n-propylamine	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodimethylamine	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
N-nitrosodiphenylamine	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Phenanthrene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
Pyrene	Believed Absent						<input type="checkbox"/> ML <input type="checkbox"/> MDL
1,2,4-trichlorobenzene	Believed Absent						<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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EPA Identification Number	NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP
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**TABLE F. INDUSTRIAL DISCHARGE INFORMATION**

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

	SIU <u>1</u>	SIU ____	SIU ____
Name of SIU	Circulus Holdings, LLC		
Mailing address (street or P.O. box)	302 11th Stret SW		
City, state, and ZIP code	Arab, AL 35016		
Description of all industrial processes that affect or contribute to the discharge.	Unknown		
List the principal products and raw materials that affect or contribute to the SIU's discharge.	Domestic Wastes - 1,000 Gallons/Day Process Water - 109,000 Gallons/Day		
Indicate the average daily volume of wastewater discharged by the SIU.	110,000 gpd	gpd	gpd
How much of the average daily volume is attributable to process flow?	109,000 gpd	gpd	gpd
How much of the average daily volume is attributable to non-process flow?	1,000 gpd	gpd	gpd
Is the SIU subject to local limits?	<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
Is the SIU subject to categorical standards?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

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MUNICIPAL SECTION

EPA Identification Number

NPDES Permit Number

Facility Name

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Gilliam Creek WWTP

**TABLE F. INDUSTRIAL DISCHARGE INFORMATION**

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


	SIU 1	SIU	SIU
Under what categories and subcategories is the SIU subject?	Part 414 Organic Chemicals, Plastics, and Synthetic Fibers. 40 CRF 14 Subpart D Thermoplastic Resins SIC 2821 Plastic Materials, Synthetic Resins, and Nonvulcanizable Elastomers.		
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe.			

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APR 17 2024

IND/MUN BRANCH  
WATER DIVISION

EPA Identification Number	NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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Form 2S NPDES		<b>U.S Environmental Protection Agency</b> <b>Application for NPDES Permit for Sewage Sludge Management</b> <b>NEW AND EXISTING TREATMENT WORKS TREATING DOMESTIC SEWAGE</b>
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**PRELIMINARY INFORMATION**

Does your facility currently have an effective NPDES permit or have you been directed by your NPDES permitting authority to submit a full Form 2S permit application?

Yes → Complete Part 2 of application package (begins p. 7).       No → Complete Part 1 of application package (below).

**PART 1 LIMITED BACKGROUND INFORMATION (40 CFR 122.21(c)(2)(II))**

Complete this part only if you are a "sludge-only" facility (i.e., a facility that does not currently have, and is not applying for, an NPDES permit for a direct discharge to a surface body of water).

**PART 1, SECTION 1. FACILITY INFORMATION (40 CFR 122.21(c)(2)(ii)(A))**

<b>Facility Information</b>	1.1	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	
		Location address (street, route number, or other specific identifier)				<input type="checkbox"/> Same as mailing address
		City or town		State	ZIP code	
<b>Facility Information</b>	1.2	<b>Ownership Status</b>				
		<input type="checkbox"/> Public—federal		<input type="checkbox"/> Public—state		
		<input type="checkbox"/> Private		<input type="checkbox"/> Other (specify) _____		

**PART 1, SECTION 2. APPLICANT INFORMATION (40 CFR 122.21(c)(2)(ii)(B))**

<b>Applicant Information</b>	2.1	Is applicant different from entity listed under item 1.1 above?			
	<input type="checkbox"/> Yes		<input type="checkbox"/> No → SKIP to Item 2.3 (Part 1, Section 2).		
	2.2	Applicant name			
		Applicant address (street or P.O. box)			
		City or town		State	ZIP code
	Contact name (first and last)	Title	Phone number	Email address	
2.3	Is the applicant the facility's owner, operator, or both? (Check only one response.)				
<input type="checkbox"/> Owner		<input type="checkbox"/> Operator		<input type="checkbox"/> Both	
2.4	To which entity should the NPDES permitting authority send correspondence? (Check only one response.)				
<input type="checkbox"/> Facility		<input type="checkbox"/> Applicant		<input type="checkbox"/> Facility and applicant (they are one and the same)	

**PART 1, SECTION 3. SEWAGE SLUDGE AMOUNT (40 CFR 122.21(c)(2)(ii)(D))**

<b>Sewage Sludge Amount</b>	3.1	Provide the total dry metric tons per the latest 365-day period of sewage sludge generated, treated, used, and disposed of:		
		<b>Practice</b>		<b>Dry Metric Tons per 365-Day Period</b>
		Amount generated at the facility		
		Amount treated at the facility		
		Amount used (i.e., received from off site) at the facility		
	Amount disposed of at the facility			



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**PART 1, SECTION 5. TREATMENT PROVIDED AT YOUR FACILITY (40 CFR 122.21(c)(2)(ii)(C))**

Treatment Provided at Your Facility	5.1	For each sewage sludge use or disposal practice, indicate the amount of sewage sludge used or disposed of, the applicable pathogen class and reduction alternative, and the applicable vector attraction reduction option. Attach additional pages, as necessary.																																										
		<table border="1"> <thead> <tr> <th>Use or Disposal Practice (check one)</th> <th>Amount (dry metric tons)</th> <th>Pathogen Class and Reduction Alternative</th> <th>Vector Attraction Reduction Option</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Land application of bulk sewage</td> <td rowspan="10"></td> <td><input type="checkbox"/> Not applicable</td> <td><input type="checkbox"/> Not applicable</td> </tr> <tr> <td><input type="checkbox"/> Land application of biosolids (bulk)</td> <td><input type="checkbox"/> Class A, Alternative 1</td> <td><input type="checkbox"/> Option 1</td> </tr> <tr> <td><input type="checkbox"/> Land application of biosolids (bags)</td> <td><input type="checkbox"/> Class A, Alternative 2</td> <td><input type="checkbox"/> Option 2</td> </tr> <tr> <td><input type="checkbox"/> Surface disposal in a landfill</td> <td><input type="checkbox"/> Class A, Alternative 3</td> <td><input type="checkbox"/> Option 3</td> </tr> <tr> <td><input type="checkbox"/> Other surface disposal</td> <td><input type="checkbox"/> Class A, Alternative 4</td> <td><input type="checkbox"/> Option 4</td> </tr> <tr> <td><input type="checkbox"/> Incineration</td> <td><input type="checkbox"/> Class A, Alternative 5</td> <td><input type="checkbox"/> Option 5</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Class A, Alternative 6</td> <td><input type="checkbox"/> Option 6</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Class B, Alternative 1</td> <td><input type="checkbox"/> Option 7</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Class B, Alternative 2</td> <td><input type="checkbox"/> Option 8</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Class B, Alternative 3</td> <td><input type="checkbox"/> Option 9</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Class B, Alternative 4</td> <td><input type="checkbox"/> Option 10</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Domestic septage, pH adjustment</td> <td><input type="checkbox"/> Option 11</td> </tr> </tbody> </table>	Use or Disposal Practice (check one)	Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option	<input type="checkbox"/> Land application of bulk sewage		<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Land application of biosolids (bulk)	<input type="checkbox"/> Class A, Alternative 1	<input type="checkbox"/> Option 1	<input type="checkbox"/> Land application of biosolids (bags)	<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2	<input type="checkbox"/> Surface disposal in a landfill	<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3	<input type="checkbox"/> Other surface disposal	<input type="checkbox"/> Class A, Alternative 4	<input type="checkbox"/> Option 4	<input type="checkbox"/> Incineration	<input type="checkbox"/> Class A, Alternative 5	<input type="checkbox"/> Option 5		<input type="checkbox"/> Class A, Alternative 6	<input type="checkbox"/> Option 6		<input 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	
Use or Disposal Practice (check one)	Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option																																									
<input type="checkbox"/> Land application of bulk sewage		<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable																																									
<input type="checkbox"/> Land application of biosolids (bulk)		<input type="checkbox"/> Class A, Alternative 1	<input type="checkbox"/> Option 1																																									
<input type="checkbox"/> Land application of biosolids (bags)		<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2																																									
<input type="checkbox"/> Surface disposal in a landfill		<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3																																									
<input type="checkbox"/> Other surface disposal		<input type="checkbox"/> Class A, Alternative 4	<input type="checkbox"/> Option 4																																									
<input type="checkbox"/> Incineration		<input type="checkbox"/> Class A, Alternative 5	<input type="checkbox"/> Option 5																																									
		<input type="checkbox"/> Class A, Alternative 6	<input type="checkbox"/> Option 6																																									
		<input 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																																										
	5.2	For each of the use and disposal practices specified in item 5.1, 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 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 type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction <input type="checkbox"/> Other (specify) _____																																									

**PART 1, SECTION 6. SEWAGE SLUDGE SENT TO OTHER FACILITIES (40 CFR 122.21(c)(2)(ii)(C))**

Sewage Sludge Sent to Other Facilities	6.1	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)?			
		<input type="checkbox"/> Yes → SKIP to Part 1, Section 8 (Certification). <input type="checkbox"/> No			
	6.2	Is sewage sludge from your facility provided to another facility for treatment, distribution, use, or disposal?			
		<input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 1, Section 7.			
	6.3	Receiving 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	
6.4	Which activities does the receiving facility provide? (Check all that apply.)				
	<input type="checkbox"/> Treatment or blending	<input type="checkbox"/> Sale or give-away in bag or other container			
	<input type="checkbox"/> Land application	<input type="checkbox"/> Surface disposal			
	<input type="checkbox"/> Incineration	<input type="checkbox"/> Other (describe)			
	<input type="checkbox"/> Composting				

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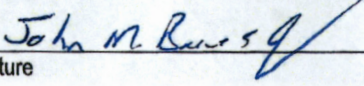
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**PART 1, SECTION 7. USE AND DISPOSAL SITES (40 CFR 122.21(c)(2)(ii)(C))**

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

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

<b>Checklist and Certification Statement</b>	8.1	In Column 1 below, mark the sections of Form 2S, Part 1, that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.	
		<b>Column 1</b>	<b>Column 2</b>
	<input checked="" type="checkbox"/>	Section 1: Facility Information	<input checked="" type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 2: Applicant Information	<input type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 3: Sewage Sludge Amount	<input type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 4: Pollutant Concentrations	<input type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 5: Treatment Provided at Your Facility	<input type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 6: Sewage Sludge Sent to Other Facilities	<input type="checkbox"/> w/ attachments
	<input type="checkbox"/>	Section 7: Use and Disposal Sites	<input type="checkbox"/> w/ attachments
<input type="checkbox"/>	Section 8: Checklist and Certification Statement		

EPA Identification Number		NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Checklist and Certification Statement Continued	8.2	<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	Phone number
				Date signed

**PART 1 APPLICANTS STOP HERE.**

Submit completed application package to your NPDES permitting authority.

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

<b>PART 2, SECTION 1. GENERAL INFORMATION (40 CFR 122.21(q)(1-7) AND (q)(13))</b>
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<b>General Information</b>	All Part 2 applicants must complete this section.				
	<b>Facility Information</b>				
	1.1	Facility name Gilliam Creek WWTP			
		Mailing address (street or P.O. box) 654 11th Avenue NW			
		City or town Arab	State AL	ZIP code 35016	Phone number (256) 586-6148
		Contact name (first and last) John Barnes	Title Manager	Email address arabsewer@otelco.net	
		Location address (street, route number, or other specific identifier) 1420 Country Club Drive NW			<input type="checkbox"/> Same as mailing address
		City or town Arab	State AL	ZIP code 35016	
	1.2	Is this facility a Class I sludge management facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	1.3	Facility Design Flow Rate	.830 million gallons per day (mgd)		
	1.4	Total Population Served	1450		
	1.5	<b>Ownership Status</b>			
		<input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input checked="" type="checkbox"/> Other public (specify) <u>Municipal</u> <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.8 (Part 2, Section 1).			
1.7	Applicant name				
	Applicant mailing address (street or P.O. box)				
	City or town	State	ZIP code		
	Contact name (first and last)	Title	Phone number	Email address	
1.8	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Both				
1.9	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)				

1.10	<b>Facility's NPDES permit number</b> <input type="checkbox"/> Check here if you do not have an NPDES permit but are otherwise required to submit Part 2 of Form 2S.	AL0056626									
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.											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"><input type="checkbox"/> RCRA (hazardous wastes)</td> <td style="width: 33%; padding: 5px;"><input type="checkbox"/> Nonattainment program (CAA)</td> <td style="width: 34%; padding: 5px;"><input type="checkbox"/> NESHAPs (CAA)</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> PSD (air emissions)</td> <td style="padding: 5px;"><input type="checkbox"/> Dredge or fill (CWA Section 404)</td> <td style="padding: 5px;"><input type="checkbox"/> Other (specify)</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Ocean dumping (MPRSA)</td> <td style="padding: 5px;"><input type="checkbox"/> UIC (underground injection of fluids)</td> <td style="padding: 5px;"></td> </tr> </table>			<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)	
<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 <span style="margin-left: 150px;"><input checked="" type="checkbox"/> No → SKIP to Item 1.14 (Part 2, Section 1) below.</span>											
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 <span style="margin-left: 150px;"><input type="checkbox"/> No</span>											
<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 <span style="margin-left: 150px;"><input type="checkbox"/> No</span>											
<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 <span style="margin-left: 150px;"><input type="checkbox"/> No → SKIP to Item 1.18 (Part 2, Section 1) below.</span>											
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	Cherokee Environmental										
Mailing address (street or P.O. box)	2390 Mt. Hebron Road										
City, state, and ZIP code	Boaz, AL 35957										
Contact name (first and last)	Rickey Turner										
Telephone number	(256) 593-7099										
Email address	??										

1.17 cont.		<b>Contractor 1</b>	<b>Contractor 2</b>	<b>Contractor 3</b>
	Responsibilities of contractor	Haul off and land apply. Generate EPA reports.		

**Pollutant Concentrations**

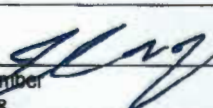
Using the table below or a separate attachment, provide sewage sludge monitoring data for the pollutants for which limits in sewage sludge have been established in 40 CFR 503 for this facility's expected use or disposal practices. All data must be based on three or more samples taken at least one month apart and must be no more than 4.5 years old.

Check here if you have attached additional sheets to the application package.

1.18	Pollutant	Average Monthly Concentration (mg/kg dry weight)	Analytical Method	Detection Level
	Arsenic			
	Cadmium			
	Chromium			
	Copper			
	Lead			
	Mercury			
	Molybdenum			
	Nickel			
	Selenium			
	Zinc			

**Checklist and Certification Statement**

1.19	In Column 1 below, mark the sections of Form 2S, Part 2, that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing. Note that not all applicants are required to complete all sections or provide attachments. See Exhibit 2S-2 in the Instructions.	
	<b>Column 1</b>	<b>Column 2</b>
	<input checked="" type="checkbox"/> Section 1 (General Information)	<input type="checkbox"/> w/ attachments
	<input type="checkbox"/> Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)	<input 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 M. Barnes Jr.	Official title Manager
	Signature 	Date signed 03/28/2024
	Telephone number (256) 586-6148	

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.

**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))**

<b>Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge</b>	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:		26
	<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	
	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 checked="" 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 checked="" 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 AL0056626	Facility Name Gilliam Creek WWTP	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</b> (check one)	<b>Pathogen Class and Reduction Alternative</b>	<b>Vector Attraction Reduction Option</b>
		<input checked="" type="checkbox"/> Land application of bulk sewage	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable
		<input type="checkbox"/> Land application of biosolids (bulk)	<input type="checkbox"/> Class A, Alternative 1	<input type="checkbox"/> Option 1
		<input type="checkbox"/> Land application of biosolids (bags)	<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2
		<input type="checkbox"/> Surface disposal in a landfill	<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3
		<input type="checkbox"/> Other surface disposal	<input type="checkbox"/> Class A, Alternative 4	<input type="checkbox"/> Option 4
		<input type="checkbox"/> Incineration	<input type="checkbox"/> Class A, Alternative 5	<input type="checkbox"/> Option 5
			<input type="checkbox"/> Class A, Alternative 6	<input type="checkbox"/> Option 6
		<input checked="" type="checkbox"/> Class B, Alternative 1	<input type="checkbox"/> Option 7	
		<input type="checkbox"/> Class B, Alternative 2	<input type="checkbox"/> Option 8	
		<input type="checkbox"/> Class B, Alternative 3	<input type="checkbox"/> Option 9	
		<input type="checkbox"/> Class B, Alternative 4	<input checked="" type="checkbox"/> Option 10	
		<input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Option 11	
2.9	Identify the treatment process(es) used at your facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge? (Check all that apply.)			
	<input checked="" type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering)	<input checked="" type="checkbox"/> Thickening (concentration)		
	<input type="checkbox"/> Stabilization	<input checked="" type="checkbox"/> Anaerobic digestion		
	<input type="checkbox"/> Composting	<input type="checkbox"/> Conditioning		
	<input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	<input checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)		
	<input type="checkbox"/> Heat drying	<input type="checkbox"/> Thermal reduction		
	<input type="checkbox"/> Methane or biogas capture and recovery			
2.10	Describe any other sewage sludge treatment or blending activities not identified in Items 2.8 and 2.9 (Part 2, Section 2) above.			
	<input type="checkbox"/> Check here if you have attached the description to the application package.			
<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 checked="" type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No → SKIP to Item 2.14 (Part 2, Section 2) below.</span>			
2.12	Total dry metric tons per 365-day period of sewage sludge subject to this subsection that is applied to the land:	26		
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 <span style="margin-left: 150px;"><input checked="" type="checkbox"/> No</span>			
	<input checked="" 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.			



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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	<b>Sale or Give-Away in a Bag or Other Container for Application to the Land</b>			
	2.14	Do you place sewage sludge in a bag or other container for sale or give-away for land application? <input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No → SKIP to Item 2.17 (Part 2, Section 2) below.</span>		
	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. <input type="checkbox"/> Check here to indicate that you have attached all labels or notices to this application package.		
	<input type="checkbox"/> Check here once you have completed Items 2.14 to 2.16, then → SKIP to Part 2, Section 2, Item 2.32.			
	<b>Shipment Off Site for Treatment or Blending</b>			
	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.) <input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.</span>		
	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. <input type="checkbox"/> 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)		<input type="checkbox"/> 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? <input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No → SKIP to Item 2.24 (Part 2, Section 2) below.</span>			
2.22	Indicate the pathogen class and reduction alternative and the vector attraction reduction option met for the sewage sludge at the receiving facility.			
	<b>Pathogen Class and Reduction Alternative</b>	<b>Vector Attraction Reduction Option</b>		
	<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		

EPA Identification Number	NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.23	Which treatment process(es) are used at the receiving facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge from your facility? (Check all that apply.)	
	<input type="checkbox"/>	Preliminary operations (e.g., sludge grinding and dewatering)	<input type="checkbox"/> Thickening (concentration)
	<input type="checkbox"/>	Stabilization	<input type="checkbox"/> Anaerobic digestion
	<input type="checkbox"/>	Composting	<input type="checkbox"/> Conditioning
	<input type="checkbox"/>	Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	<input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
	<input type="checkbox"/>	Heat drying	<input type="checkbox"/> Thermal reduction
	<input type="checkbox"/>	Methane or biogas capture and recovery	<input type="checkbox"/> Other (specify) _____
	2.24	Attach a copy of any information you provide the receiving facility to comply with the "notice and necessary information" requirement of 40 CFR 503.12(g).	
	<input type="checkbox"/>	Check here to indicate that you have attached material.	
	2.25	Does the receiving facility place sewage sludge from your facility in a bag or other container for sale or give-away for application to the land?	
	<input type="checkbox"/>	Yes	<input type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.
	2.26	Attach a copy of all labels or notices that accompany the product being sold or given away.	
	<input type="checkbox"/>	Check here to indicate that you have attached material.	
	<input type="checkbox"/>	Check here once you have completed Items 2.17 to 2.26 (Part 2, Section 2), then → SKIP to Item 2.32 (Part 2, Section 2) below.	
	<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 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 checked="" type="checkbox"/>	Yes	<input 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:	26	
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 checked="" 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.		
		1	

EPA Identification Number		NPDES Permit Number AL0056626		Facility Name Gilliam Creek WWTP		Form Approved 03/05/19 OMB No. 2040-0004		
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 Cherokee Environmental						
		Mailing address (street or P.O. box) 2390 Mt. Hebron Road						
		City or Town Boaz			State AL		ZIP Code 35957	
		Contact Name (first and last) Rickey Turner		Title Manager		Phone Number (256) 593-7099		Email Address ??
	2.37	Site Contact (Check all that apply.) <input checked="" 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:					26	
	<b>Incineration</b>							
	2.39	Is sewage sludge from your facility fired in a sewage sludge incinerator? <input type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 3.							
2.47	Indicate the total number of municipal solid waste landfills used. (Provide the information in Items 2.48 to 2.52 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.							

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.48 Name of landfill													
	Mailing address (street or P.O. box)													
	City or town				State		ZIP code							
	Contact name (first and last)		Title		Phone number		Email address							
	Location address (street, route number, or other specific identifier)						<input type="checkbox"/> Same as mailing address							
	County			County code			<input type="checkbox"/> Not available							
	City or town			State		ZIP code								
	2.49 Total dry metric tons of sewage sludge from your facility placed in this municipal solid waste landfill per 365-day period:													
	2.50 List the numbers of all other federal, state, and local permits that regulate the operation of this municipal solid waste landfill.													
			<table border="1"> <thead> <tr> <th>Permit Number</th> <th>Type of Permit</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>					Permit Number	Type of Permit					
Permit Number	Type of Permit													
2.51 Attach to the application information to determine whether the sewage sludge meets applicable requirements for disposal of sewage sludge in a municipal solid waste landfill (e.g., results of paint filter liquids test and TCLP test). <input type="checkbox"/> Check here to indicate you have attached the requested information.														
2.52 Does the municipal solid waste landfill comply with applicable criteria set forth in 40 CFR 258? <input type="checkbox"/> Yes <input type="checkbox"/> No														

EPA Identification Number	NPDES Permit Number AL0056626	Facility Name Gilliam Creek WWTP
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**PART 2, SECTION 3 LAND APPLICATION OF BULK SEWAGE SLUDGE (40 CFR 122.21(q)(9))**

Land Application of Bulk Sewage Sludge	3.1	Does your facility apply sewage sludge to land? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 2, Section 4.
	3.2	Do any of the following conditions apply? <ul style="list-style-type: none"> <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 checked="" 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 <input type="checkbox"/> 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
		Method of Determination
		<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	

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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	

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<b>PART 2, SECTION 4 SURFACE DISPOSAL (40 CFR 122.21(q)(10))</b>				
Surface Disposal	4.1	Do you own or operate a surface disposal site? <input type="checkbox"/> Yes <span style="float: right;"><input checked="" type="checkbox"/> No → SKIP to Part 2, Section 5.</span>		
	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 <span style="float: right;"><input type="checkbox"/> No → SKIP to Item 4.9 (Part 2, Section 4) below.</span>			
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 <span style="float: right;"><input type="checkbox"/> No → SKIP to Item 4.11 (Part 2, Section 4) below.</span>			
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"/> 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				
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 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) _____				



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

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

<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 <span style="float: right;">County code <input type="checkbox"/> Not available</span>
	City or town <span style="float: right;">State <span style="margin-left: 20px;">ZIP code</span></span>
	<b>Latitude/Longitude of Incinerator (see instructions)</b>
	Latitude <span style="margin-left: 150px;">Longitude</span>
	. ' "
	<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 and 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.

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

<b>Incineration Continued</b>	<b>Performance Test Operating Parameters</b>	
	5.29	Maximum performance test combustion temperature:
	5.30	Performance test sewage sludge feed rate, in dry metric tons/day
	5.31	Indicate whether value submitted in Item 5.30 is (check only one response): <input type="checkbox"/> Average use <input type="checkbox"/> Maximum design
	5.32	Attach supporting documents describing how the feed rate was calculated. <input type="checkbox"/> Check here to indicate that you have attached this information.
	5.33	Submit information documenting the performance test operating parameters for the air pollution control device(s) used for this sewage sludge incinerator. <input type="checkbox"/> Check here to indicate that you have attached this information.
	<b>Monitoring Equipment</b>	
	5.34	List the equipment in place to monitor the listed parameters.
		<b>Parameter</b>
		<b>Equipment in Place for Monitoring</b>
		Total hydrocarbons or carbon monoxide
		Percent oxygen
		Percent moisture
		Combustion temperature
		Other (describe)
<b>Air Pollution Control Equipment</b>		
5.35	List all air pollution control equipment used with this sewage sludge incinerator. <input type="checkbox"/> Check here if you have attached the list to the application package for the noted incinerator.	

**END of PART 2**

**Submit completed application package to your NPDES permitting authority.**



EPA's sewage sludge regulations require certain publicly owned treatment works (POTWs) and Class I sewage sludge management facilities to submit to a Sewage Sludge (Biosolids) Annual Report (see 40 CFR 503.18 ([https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_118](https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_118)), 503.28 ([https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_128](https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_128)), 503.48 ([https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_148](https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_148))). Facilities that must submit a Sewage Sludge (Biosolids) Annual Report include POTWs with a design flow rate equal to or greater than one million gallons per day, POTWs that serve 10,000 people or more, Class I Sludge Management Facilities (as defined by 40 CFR 503.9 ([https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_19](https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_19))), and facilities otherwise required to file this report (e.g., permit condition, enforcement action, state law). This is the electronic form for Sewage Sludge (Biosolids) Annual Report filers to use if they are located in one of the states, tribes, or territories (<https://www.epa.gov/npdes/npdes-state-program-information>) where EPA administers the Federal biosolids program.

For the purposes of this form, the term 'sewage sludge' ([https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_19](https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_19)) also refers to the material that is commonly referred to as 'biosolids'. EPA does not have a regulatory definition for biosolids but this material is commonly referred to as sewage sludge that is placed on, or applied to the land to use the beneficial properties of the material as a soil amendment, conditioner, or fertilizer. EPA's use of the term 'biosolids' in this form is to confirm that information about beneficially used sewage sludge (a.k.a. biosolids) should be reported on this form.

**Public Availability of Information Submitted on and with this Program Report**

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the NPDES eReporting Help Desk (NPDESereporting@epa.gov (mailto:NPDESereporting@epa.gov)) for further guidance.

Please note that EPA may contact you after you submit this report for more information regarding your sewage sludge management program.

**Burden Statement**

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with EPA NPDES regulations (40 CFR 503.18, 503.28, and 503.48). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average one to five hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

**Facility Information**

**Facility Name:** GILLIAN CREEK WWTP

**NPDES ID:** ALL056626

**Program Information**

Please select all of the following that apply to your obligation to submit a Sewage Sludge (Biosolids) Annual Report in compliance with 40 CFR part 503. The facility is:

- a Class I Sludge Management Facility as defined in 40 CFR 503.9

In the reporting period, did you manage your sewage sludge or biosolids using any of the following management practices: land application, surface disposal, or incineration?

YES  NO

If your facility is a POTW, please provide the estimated total amount of sewage sludge produced at your facility for the reporting period (in dry metric tons). If your facility is not a POTW, please provide the estimated total amount of biosolids produced at your facility for the reporting period (in dry metric tons).

26

**Reporting Period Start Date:** 01/01/2023

**Reporting Period End Date:** 12/31/2023

**Treatment Processes**

**Processes to Significantly Reduce Pathogens (PSRP):**  
Aerobic Digestion

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Air Drying (or Sludge Drying Beds)

**Processes to Further Reduce Pathogens (PFRP):**

**Physical Treatment Options:**

Preliminary Operations (e.g., sludge grinding, dewatering, blending)

**Other Processes to Manage Sewage Sludge:**

Temporary Sludge Storage (Sewage Sludge Stored on Land 2 Years or Less, Not in Sewage Sludge Unit)

Analytical Methods

Did you or your facility collect sewage sludge or biosolids samples for laboratory analysis?  YES  NO

**Analytical Methods**

- EPA Method 6010 - Arsenic (ICP-OES)
- EPA Method 6010 - Cadmium (ICP-OES)
- EPA Method 6010 - Chromium (ICP-OES)
- EPA Method 6010 - Copper (ICP-OES)
- EPA Method 6010 - Lead (ICP-OES)
- EPA Method 7471 - Mercury (CVAA)
- EPA Method 6010 - Molybdenum (ICP-OES)
- EPA Method 6010 - Nickel (ICP-OES)
- EPA Method 6010 - Selenium (ICP-OES)
- EPA Method 6010 - Zinc (ICP-OES)
- EPA Method 6010 - Beryllium (ICP-OES)
- EPA Method 7010 - Copper (GF-AAS)
- EPA Method 7010 - Nickel (GF-AAS)
- Standard Method 4500-N - Nitrogen
- Standard Method 4500-NH3 - Ammonia Nitrogen
- Standard Method 4500-Norg - Organic Nitrogen
- Standard Method 2540 - Total Solids
- Standard Method 2540 - Volatile Solids
- Standard Method 9221 - Fecal coliform

Sludge Management - Land Application

ID: 001

Amount: 26

Handler, Preparer, or Applier Type: Off-Site Third-Party Handler or Applier

**Facility Information:**

Gilliam Creek WWTP / City of Arab Sewer Bo  
ard  
654 11th Avenue NW Arab, AL 35016  
US

**Contact Information:**

John M Barnes  
Manager  
256-586-6148  
arabsewer@otelco.net

Amount Transferred (dry metric tons): 26

Management Practice Detail: Agricultural Land Application

Bulk or Bag/Container: Bulk

Pathogen Class: Class B

**Sewage Sludge or Biosolids Pathogen Reduction Options:**

- Class B-Alternative 1: Fecal Coliform Geometric Mean

**Sewage Sludge or Biosolids Vector Attraction Reduction Options:**

- Option 10 - Sewage Sludge Timely Incorporation into Land

Did the facility land apply bulk sewage sludge when one or more pollutants in the sewage sludge exceeded 90 percent or more of any of the cumulative pollutant loading rates in Table 2 of 40 CFR 503.13?

YES  NO  UNKNOWN

Monitoring Data

**INSTRUCTIONS:** Pollutants, pathogen densities, and vector attraction reduction must be monitored when sewage sludge or biosolids are applied to the land. Please use the following section to report monitoring data for the land application conducted by you or your facility in the reporting period for this SSUID. These monitoring data should be representative of the sewage sludge or biosolids that was applied to land during the compliance monitoring period for this SSUID (40 CFR 503.8(a) ([http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_18](http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_18))). All pollutant monitoring data should be reported in milligrams per kilogram (mg/kg), dry weight basis. EPA will be using these data to demonstrate compliance with EPA's land application requirements (40 CFR 503, Subpart B).

**Compliance Monitoring Periods**

**INSTRUCTIONS:** Please use the table below to identify the start date and end date for each compliance monitoring period. You can adjust the start and end dates as needed. Please note that the compliance monitoring periods cannot overlap and that each compliance monitoring period must have a start date that is equal to or less than the end date. The number of compliance monitoring periods is based on the number of metric tons (dry weight basis) of sewage sludge or biosolids land applied in the reporting period (summed across all land application SSUIDs). For example, you will need to provide monitoring data for 12 compliance monitoring periods for each land application SSUID when you land apply 15,000 or more metric tons (dry weight basis) of sewage sludge or biosolids (summed across all land application SSUIDs) in the reporting period (see 40 CFR 503.16 ([http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_116](http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_116))).

<b>Compliance Monitoring Event No. 1</b>	<b>Compliance Monitoring Period Start Date:</b> 01/01/2023	<b>Compliance Monitoring Period End Date:</b> <u>12/31/2023</u>
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Do you have analytical results to report for this monitoring period?  YES  NO

Are you reporting maximum pollutant concentrations that are equivalent to the monthly average pollutant concentrations for this compliance monitoring event? [For example, this will be the case if you only collected and analyzed one sample of sewage sludge or biosolids for this compliance monitoring period.]

YES  NO

**Maximum Concentration Data for All Sewage Sludge or Biosolids Applied to Land**

This section summarizes the maximum pollutant concentrations in the biosolids or sewage sludge that was applied to land during the compliance monitoring period for this SSUID. In accordance with 40 CFR 503.13(a) ([http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_113](http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_113)), EPA's regulations prohibit land application of bulk sewage sludge or sewage sludge sold or gave away sewage sludge in a bag or other container when one or more sewage sludge pollutant concentrations in the sewage sludge exceed a land application ceiling pollutant limit (Table 1 of 40 CFR 503.13 ([http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_113](http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_113))). EPA will compare the pollutant concentrations in this section against the ceiling concentration limits in Table 1 of 40 CFR 503.13 ([http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503\\_113](http://www.ecfr.gov/cgi-bin/text-idx?node=pt40.32.503&rgn=div5#se40.32.503_113)) to identify noncompliance events. All pollutant monitoring data should be reported in milligrams per kilogram (mg/kg), dry weight basis.

Please only select a "No Data Indicator Code" if you are reporting no data for the sampling period or particular parameter.

Sewage Sludge or Biosolids Parameter	Value Qualifier	Parameter Concentration (mg/kg, dry-weight basis or Pass/Fail)	If No Data, Select One Of The Following
Arsenic	=	3.21	
Cadmium	=	2.06	
Copper	=	234	
Lead	=	25.8	
Mercury	=	1.79	
Molybdenum	=	4.94	
Nickel	=	18.9	
Selenium	=	3.04	
Zinc	=	1350	

**Pathogen And Vector Attraction Reduction**

Report the pathogen densities in the sewage sludge or biosolids that was applied to land during the reporting year for this SSUID. Please report the maximum pathogen density for Class A sewage sludge or biosolids. When using the Class B – Alternative 1 management option, please report the geometric mean of the density of fecal coliform in Class B sewage sludge or biosolids [see 40 CFR 503.32(b) (2)].

Sewage Sludge or Biosolids Parameter	Pathogen Reduction Selected Alternatives	Value Qualifier	Value	If No Data, Select One Of The Following
Fecal Coliform	Class B-Alternative 1: Fecal Coliform Geometric Mean	=	4890	

**Note:** Pathogenic organisms are disease-causing organisms. These include, but are not limited to, certain bacteria, protozoa, viruses, and viable helminth ova [see 40 CFR 503.31(f) (<https://www.ecfr.gov/current/title-40/chapter-I/subchapter-O/part-503/subpart-D/section->)]

503.31#p-503.31(f)). The following units should be used for pathogen data (see 40 CFR 503.32 (<https://www.ecfr.gov/current/title-40/chapter-I/subchapter-O/part-503/subpart-D/section-503.32>)):

- Density of fecal coliform in the sewage sludge shall be reported as Most Probable Number per gram of total solids (dry weight basis).
  - When using the Class B - Alternative 1 management option, the density of fecal coliform in the sewage sludge shall be reported as Most Probable Number or Colony Forming Units per gram of total solids (dry weight basis) expressed as the geometric mean of the results of seven individual samples of sewage sludge.
- Density of Salmonella sp. bacteria in the sewage sludge shall be reported as Most Probable Number per four grams of total solids (dry weight basis).
- Density of enteric viruses shall be reported as plaque-forming unit per four grams of total solids (dry weight basis).
- Density of Helminth Ova. shall be reported as viable helminth ovum per four grams of total solids (dry weight basis).

**Monthly Average Pollutant Concentration Data for All Sewage Sludge or Biosolids Applied to Land**

This section summarizes the monthly average pollutant concentrations in the biosolids or sewage sludge that was applied to land during the compliance monitoring period for this SSUID. All pollutant monitoring data should be reported in milligrams per kilogram (mg/kg), dry weight basis.

Sewage Sludge or Biosolids Parameter	Value Qualifier	Parameter Concentration (mg/kg, dry-weight basis or Pass/Fail)	If No Data, Select One Of The Following
Arsenic	=	3.21	
Cadmium	=	2.06	
Copper	=	234	
Lead	=	25.8	
Mercury	=	1.79	
Nickel	=	18.9	
Selenium	=	3.04	
Zinc	=	1350	

Report the average concentration (mg/kg, dry weight basis) of Total Nitrogen (TKN plus Nitrate-Nitrite, as N) in the sewage sludge or biosolids that was applied to land during the compliance monitoring period for this SSUID.

Sewage Sludge or Biosolids Parameter	Value Qualifier	Parameter Concentration (mg/kg, dry-weight basis)	If No Data, Select One Of The Following
Total Nitrogen (TKN plus Nitrate-Nitrite)	=	18100	

Sludge Management - Surface Disposal

Sludge Management - Incineration

Sludge Management - Other Management Practice

Additional Information

Please enter any additional information that you would like to provide in the comment box below.

**Additional Attachments**

Name	Created Date	Size

**Certification Information**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I have no personal knowledge that the information submitted is other than



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. Signing an electronic document on behalf of another person is subject to criminal, civil, administrative, or other lawful action.

**Certified By:** John M. Barnes (ARABSEWER)

**Certified On:** 01/19/2024 11:01 AM ET

WASTEWATER SURVEY FOR NON-RESIDENTIAL ESTABLISHMENTS

Section A General Information

A.1 Company name, mailing address and telephone number:

Circulus Holdings, LLC
302 11th Street SW, Arab, AL
Zip: 35016 Telephone ( ) 205-732-0126

A.2 Address of production or manufacturing facility.

302 11th Street SW
Arab, AL
Zip: 35016 Telephone ( ) 205-732-0126

A.3 Name, title and telephone number of person authorized to represent this firm in official dealing with Sewer Authority and/or City:

Cameron Williams, Director of SHE
817-233-1087

A.4 Alternate person to contact concerning information provided herein:

Name Richard Owen Title Plant Manager Telephone ( ) 205-732-0126

A.5 Identify the type of business conducted (auto repair, machine shop, electroplating, warehousing, painting, printing, food processing, etc.)

Low-Density Polyethylene (LDPE) recycling and pellet manufacturing.

Note to Signing Official: In accordance with Title 40 of the Code of Federal Regulations Part 403 Section 403.14, information and data provide in this questionnaire which identifies the nature and frequency of discharging shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed procedures specified in 40 CFR Part 2. Should a discharge permit be required for your facility, the information in this questionnaire may be used to issue the permit.

This is to be signed by an authorized official of your firm after completion of this form and review of the information by the signing official.

I have personally examined and am familiar with the information submitted in this document and attachment. Base upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

4/28/2023
Date

Signature of Official
(Seal is applicable)

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**A.6** Provide a brief narrative description of the manufacturing, production or service activities your firm conducts.

See Attached Process Description.

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**A.7** Standard Industrial Classification Number(S) (SIC CODE) for your industry:

2821 - Plastic Materials, Synthetic Resins, and Nonvulcanizable Elastomers

**A.8** This facility generates the following types of wastes. Please provide gallons per day for all that apply.

		Average gallons per day	estimated	X	measured
a.	<input checked="" type="checkbox"/> Domestic Waste (restrooms, employee showers, etc.)	1000		X	
b.	<input type="checkbox"/> Cooling water, non contact				
c.	<input type="checkbox"/> Boiler/tower blowdown				
d.	<input type="checkbox"/> Cooling water, contact				
e.	<input checked="" type="checkbox"/> Process	109000		X	
f.	<input type="checkbox"/> Equipment/Facility washdown				
g.	<input type="checkbox"/> Air pollution control unit				
h.	<input type="checkbox"/> Storm water runoff to sanitary sewer				
i.	<input type="checkbox"/> Other, describe				

Total A.8.a - A.8.i

**A.9** Wastes are discharged to: (Check all that apply and indicate number of gallons per day)

		Average gallons per day	estimated	X	measured
a.	<input checked="" type="checkbox"/> Sanitary	110000		X	
b.	<input type="checkbox"/> Storm Sewer				
c.	<input type="checkbox"/> Surface				
d.	<input type="checkbox"/> Ground water				
e.	<input type="checkbox"/> Waste haulers				
f.	<input type="checkbox"/> Evaporation				
g.	<input type="checkbox"/> Other, describe				

Total A.9.a - A.9.g

110000

Provide name and address of waste hauler(s), if used,

N/A

**A.10** Is a Spill Prevention Control and Countermeasure Plan prepared for the facility?  
yes  no

**Note:** If you did not check one or more of Lines d, e, f, g, h, or i in Section A.8 above, you are not required to complete the remainder of this Form. Sign and date the Form and return it to the POTW.

Section B Facility operation characteristics

B.1 Number of employee shifts worked per 24-hour day: 2  
Average number of employees per shift: 17

B.2 Starting times of each shift: 1st 0700 am pm 2nd 1900 am pm 3rd          am pm

*Note: The following information in this section must be completed for each product line.*

B.3 Principal product produced: Post consumer resin pellet for plastics production

B.4 Raw products and process additives used:  
FBS 5800 polyacrylamide flocculant, Polyal 600 coagulant Tubifoam KE 300 Defoamer, Tubiwash GFN washing agent, Sodium Hydroxide 50%

B.5 Production is:  
 Batch  Continuous  Both          % Batch 100 % Continuous  
Average Number of batches per 24-hour day         

B.6 Hours of operation:          a.m. to          p.m.  Continuous

B.7 Is production subject to seasonal variation?  yes  no  
If yes, briefly describe seasonal production cycle:  
        

B.8 Are any process changes or expansions planned during the next five years?  yes  no  
If yes, attach a separate sheet to this form describing the nature of planned changes or expansions.

Section C Wastewater Information

**C.1** If your facility performs processes in any of the industrial categories or business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

- I. Industrial Categories:
- |                              |                                      |   |   |
|------------------------------|--------------------------------------|---|---|
| 1. <input type="checkbox"/>  | Adhesives                            | 31. <input type="checkbox"/>            | Metal finishing                                 |
| 2. <input type="checkbox"/>  | Aluminum Forming                     | 32. <input type="checkbox"/>            | Mineral Mining and Processing                   |
| 3. <input type="checkbox"/>  | Asbestos Manufacturing               | 33. <input type="checkbox"/>            | Nonferrous Metals Manufacture                   |
| 4. <input type="checkbox"/>  | Auto & other Laundries               | 34. <input type="checkbox"/>            | Nonferrous Metals, Forming                      |
| 5. <input type="checkbox"/>  | Battery Manufacturing                | 35. <input type="checkbox"/>            | Ore Mining and Dressing                         |
| 6. <input type="checkbox"/>  | Builder's Paper and Board Mills      | 36. <input type="checkbox"/>            | Organic Chemical, Plastic & Synthetic Fibers    |
| 7. <input type="checkbox"/>  | Canmaking                            | 37. <input type="checkbox"/>            | Organic Chemical                                |
| 8. <input type="checkbox"/>  | Carbon Black Manufacturing           | 38. <input type="checkbox"/>            | Paint & ink                                     |
| 9. <input type="checkbox"/>  | Cement Manufacturing                 | 39. <input type="checkbox"/>            | Paving and Roofing Materials                    |
| 10. <input type="checkbox"/> | Coal Mining                          | 40. <input type="checkbox"/>            | Pesticides, Formulating, Packaging, Repackaging |
| 11. <input type="checkbox"/> | Coil Coating                         | 41. <input type="checkbox"/>            | Pesticides, Manufacturing                       |
| 12. <input type="checkbox"/> | Copper Forming                       | 42. <input type="checkbox"/>            | Petroleum Refining                              |
| 13. <input type="checkbox"/> | Dairy Products                       | 43. <input type="checkbox"/>            | Pharmaceuticals                                 |
| 14. <input type="checkbox"/> | Electric & Electronic Components     | 44. <input type="checkbox"/>            | Phosphate Manufacturing                         |
| 15. <input type="checkbox"/> | Electroplating                       | 45. <input type="checkbox"/>            | Photographic Supplies                           |
| 16. <input type="checkbox"/> | Explosives Manufacturing             | 46. <input type="checkbox"/>            | Plastic Molding and Forming                     |
| 17. <input type="checkbox"/> | Feedlots                             | 47. <input checked="" type="checkbox"/> | Plastics Processing                             |
| 18. <input type="checkbox"/> | Ferroalloy Manufacturing             | 48. <input type="checkbox"/>            | Porcelain Enameling                             |
| 19. <input type="checkbox"/> | Fertilizer Manufacturing             | 49. <input type="checkbox"/>            | Printing & Publishing                           |
| 20. <input type="checkbox"/> | Foundries, (metal molding & casting) | 50. <input type="checkbox"/>            | Pulp, Paper and Paperboard                      |
| 21. <input type="checkbox"/> | Fruits and Vegetables Processing     | 51. <input type="checkbox"/>            | Rubber Manufacturing                            |
| 22. <input type="checkbox"/> | Glass Manufacturing                  | 52. <input type="checkbox"/>            | Seafood Processing                              |
| 23. <input type="checkbox"/> | Grain Mills                          | 53. <input type="checkbox"/>            | Soaps & Detergents                              |
| 24. <input type="checkbox"/> | Gum & Wood Chemical                  | 54. <input type="checkbox"/>            | Steam Electric Power Generating                 |
| 25. <input type="checkbox"/> | Hospitals                            | 55. <input type="checkbox"/>            | Sugar Processing                                |
| 26. <input type="checkbox"/> | Inorganic Chemical                   | 56. <input type="checkbox"/>            | Textiles Mills                                  |
| 27. <input type="checkbox"/> | Iron & Steel                         | 57. <input type="checkbox"/>            | Timber  |
| 28. <input type="checkbox"/> | Leather Tanning & Finishing          | 58. <input type="checkbox"/>            | Waste Disposal, Treating, and/or incinerating   |
| 29. <input type="checkbox"/> | Meat Products                        |   |   |
| 30. <input type="checkbox"/> | Mechanical Products                  |   |   |

**C.2** Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Air Flotation                 | <input type="checkbox"/> Chlorination          | <input checked="" type="checkbox"/> Flow Equalization |
| <input type="checkbox"/> Centrifuge                               | <input type="checkbox"/> Cyclone               | <input type="checkbox"/> Grease or Oil Separation     |
| <input type="checkbox"/> Chemical Precipitation                   | <input checked="" type="checkbox"/> Filtration | <input type="checkbox"/> Grease Trap                  |
| <input checked="" type="checkbox"/> Grit Removal                  | <input type="checkbox"/> Ozonation             | <input type="checkbox"/> Sedimentation                |
| <input type="checkbox"/> Ion Exchange                             | <input type="checkbox"/> Reverse Osmosis       | <input type="checkbox"/> Septic Tank                  |
| <input type="checkbox"/> Sump                                     | <input checked="" type="checkbox"/> Screen     | <input type="checkbox"/> Solvent                      |
| <input checked="" type="checkbox"/> Neutralization, pH Correction |  |   |
| <input checked="" type="checkbox"/> Biological Treatment, Type    | Electrolytic Treatment System                  |   |
| <input type="checkbox"/> Rainwater Diversion or Storage           | _____  |   |
| <input type="checkbox"/> Other Chemical Treatment,                | _____  |   |
| <input type="checkbox"/> Other physical Treatment,                | _____  |   |
| <input type="checkbox"/> Other,                                   | _____  |   |
| <input type="checkbox"/> No Pretreatment Provided                 | _____  |   |

**C.3** If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

**C.4 Priority Pollutant Information.**

Please indicate by checking the appropriate box. Indicate the concentration of the compound present in the wastestream, if known.

Chemical compound	Known Present	Suspected Present	Known Absent	Concentration If Known
1. Antimony	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4. Beryllium	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5. Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6. Chromium	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Copper	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
8. Cyanide	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Lead	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Mercury	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Nickel	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. Selenium	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
13. Silver	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
14. Thallium	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
15. Zinc	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
16. Phenol (n)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
17. Phenol 2-chloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
18. Phenol, 2,4-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19. Phenol, 2,4,6-trichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
20. Phenol, pentachloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
21. Phenol, 2-nitro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
22. Phenol, 4-nitro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Chemical compound	Known Present	Suspected Present	Known Absent	Concentration If Known
23. Benzene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
24. Benzene, chloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
25. Benzene, 1,2-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
26. Benzene, 1,3-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
27. Benzene, 1,4-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
28. Benzene, 1,2, 4-trichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
29. Benzene, hexachloro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
30. Benzene, ethyl	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
31. Benzene, nitro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
32. Toluene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
33. Toluene, 2,4 dinitro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
34. Toluene, 2,6-dinitro	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
35. PCB-1016	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
36. PCB-1221	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
37. PCB-1232	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
38. PCB-1242	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
39. PCB-1248	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
40. PCB-1254	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
41. PCB-1260	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
42. 2-Chloronaphthalene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
43. Ether, bis(chloromethyl)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Chemical compound		Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
44.	Phenol, 2, 4-dimethyl	[ ]	[ ]	[ ]	[X]	
45.	Phenol, 2,4-dimethyl	[ ]	[ ]	[ ]	[X]	
46.	m-cresol, p-chloro	[ ]	[ ]	[ ]	[X]	
47.	o-cresol, 4,6-dinitro	[ ]	[ ]	[ ]	[X]	
48.	Nitrosamine, dimethyl	[ ]	[ ]	[ ]	[X]	
49.	Nitrosamine, diphenyl	[ ]	[ ]	[ ]	[X]	
50.	Nitrosamine, di-n-propyl	[ ]	[ ]	[ ]	[X]	
51.	Benzidine	[ ]	[ ]	[ ]	[X]	
52.	Benzidine, 3,3'-dichloro	[ ]	[ ]	[ ]	[X]	
53.	Hydrazine, 1,2-diphenyl	[ ]	[ ]	[ ]	[X]	
54.	Acrlonitrile	[ ]	[ ]	[ ]	[X]	
55.	Methane, bromo	[ ]	[ ]	[ ]	[X]	
56.	Methane, chloro	[ ]	[ ]	[ ]	[X]	
57.	Methane, dichloro	[ ]	[ ]	[ ]	[X]	
58.	Methane, chlorodibromo	[ ]	[ ]	[ ]	[X]	
59.	Methane, dichlorobromo	[ ]	[ ]	[ ]	[X]	
60.	Methane, tribromo	[ ]	[ ]	[ ]	[X]	
61.	Methane, trichloro	[ ]	[ ]	[ ]	[X]	
62.	Methane, tetrachloro	[ ]	[ ]	[ ]	[X]	
63.	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[X]	
64.	Ethane, 1,2-dichloro	[ ]	[ ]	[ ]	[X]	
65.	Ether, bis (2-chloroethyl)	[ ]	[ ]	[ ]	[X]	
66.	Ether, bis (2-chlorosopropyl)	[ ]	[ ]	[ ]	[X]	

Chemical compound		Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
67.	Ether, 2-chloroethyl vinyl	[ ]	[ ]	[ ]	[X]	
68.	Ether, 4- bromophenyl phenyl	[ ]	[ ]	[ ]	[X]	
69.	Ether, 4-chlorophenyl phenyl	[ ]	[ ]	[ ]	[X]	
70.	Bis ( 2-chloroethoxy) methane	[ ]	[ ]	[ ]	[X]	
71.	Phthalate, di-o-methyl	[ ]	[ ]	[ ]	[X]	
72.	Phthalate, di-n-ethyl	[ ]	[ ]	[ ]	[X]	
73.	Phthalate, di-n-butyl	[ ]	[ ]	[ ]	[X]	
74.	Phthalate, di-n-octyl	[ ]	[ ]	[ ]	[X]	
75.	Phthalate, bis(2-ethylhexyl)	[ ]	[ ]	[ ]	[X]	
76.	Phthalate, butyl hexyl	[ ]	[ ]	[ ]	[X]	
77.						
78.	Acenaphthene	[ ]	[ ]	[ ]	[X]	
	Acenaphthylene	[ ]	[ ]	[ ]	[X]	
79.	Anthracene	[ ]	[ ]	[ ]	[X]	
80.	Benzo (a) anthracene	[ ]	[ ]	[ ]	[X]	
81.	Benzo (b) fluoranthene	[ ]	[ ]	[ ]	[X]	
82.	Benzo (k) fluorathlene	[ ]	[ ]	[ ]	[X]	
83.	Benzo (ghi) perylene	[ ]	[ ]	[ ]	[X]	
84.	Benzo (a) pyrene	[ ]	[ ]	[ ]	[X]	
85.	Chrysene	[ ]	[ ]	[ ]	[X]	
86.	Dibenzo (a,n) anthrance	[ ]	[ ]	[ ]	[X]	
87.	Fluorathene	[ ]	[ ]	[ ]	[X]	
88.	Fluorene	[ ]	[ ]	[ ]	[X]	
89.	Indeno (1,2,3-cd) pyrene	[ ]	[ ]	[ ]	[X]	
90.	Ethane, 1,1,1-trichloro	[ ]	[ ]	[ ]	[X]	
91.	Ethane, 1,1,2-trichloro	[ ]	[ ]	[ ]	[X]	



Chemical compound		Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
92	Ethane, 1,1,2,1-tetrachloro	[ ]	[ ]	[ ]	[X]	
93	Ethane, hexachloro	[ ]	[ ]	[ ]	[X]	
94	Ethane, chloro	[ ]	[ ]	[ ]	[X]	
95	Ethane, 1,1-dichloro	[ ]	[ ]	[ ]	[X]	
96	Ethane, trans-dichloro	[ ]	[ ]	[ ]	[X]	
97	Ethane, trichloro	[ ]	[ ]	[ ]	[X]	
98	Ethane, tetrachloro	[ ]	[ ]	[ ]	[X]	
99	Propane, 1,2-dichloro	[ ]	[ ]	[ ]	[X]	
100	Propane, 2,4-dichloro	[ ]	[ ]	[ ]	[X]	
101	Butadiene, Hexachloro	[ ]	[ ]	[ ]	[X]	
102	Cyclopentadiene, hexachloro	[ ]	[ ]	[ ]	[X]	
103	DDT	[ ]	[ ]	[ ]	[X]	
104	Dieldrin	[ ]	[ ]	[ ]	[X]	
105	Endosulfan (alpha)	[ ]	[ ]	[ ]	[X]	
106	Endosulfan (beta)	[ ]	[ ]	[ ]	[X]	
107	Endosulfan Sulfate	[ ]	[ ]	[ ]	[X]	
108	Endrin	[ ]	[ ]	[ ]	[X]	
109	Endrin aldehyde	[ ]	[ ]	[ ]	[X]	
110	Heptachlor	[ ]	[ ]	[ ]	[X]	
111	Heptachlor epoxide	[ ]	[ ]	[ ]	[X]	
112	Isophorone	[ ]	[ ]	[ ]	[X]	
113	TCDD (or Dioxin)	[ ]	[ ]	[ ]	[X]	
114	Toxaphene	[ ]	[ ]	[ ]	[X]	
115	Naphthalene	[ ]	[ ]	[ ]	[X]	
116	Phenathrene	[ ]	[ ]	[ ]	[X]	

Chemical compound		Known Present	Suspected Present	Known Absent	Known Absent	Concentration If Known
117.	Pyrene	[ ]	[ ]	[ ]	[X]	
118.		[ ]	[ ]	[ ]	[X]	
119.	Acrolein	[ ]	[ ]	[ ]	[X]	
	Aldrin	[ ]	[ ]	[ ]	[X]	
120.	BHC (Alpha)	[ ]	[ ]	[ ]	[X]	
121.	BHC (Beta)	[ ]	[ ]	[ ]	[X]	
122.	BHC (Gamma) or Lindane	[ ]	[ ]	[ ]	[X]	
123.	BHC (Delta)	[ ]	[ ]	[ ]	[X]	
124.	Chlordane	[ ]	[ ]	[ ]	[X]	
125.	DDD	[ ]	[ ]	[ ]	[X]	
126.	DDE	[ ]	[ ]	[ ]	[X]	

C.5 If you are unable to identify the chemical make-up of materials that are discharged in your wastewater, attach copies of the material safety data sheets.

Section D Other Wastes

D.1 Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?  
 yes  no

If "no", skip remainder of Section D.  
If "yes", complete remaining items.

D.2 These wastes may best be described as:

	Estimated Gallons or Pounds/Year
<input type="checkbox"/> Acids and Alkalines	_____
<input type="checkbox"/> Heavy Metal Sludges	_____
<input type="checkbox"/> Inks/Dyes	_____
<input type="checkbox"/> Oil and/or grease	_____
<input type="checkbox"/> Organic Compounds	_____
<input type="checkbox"/> Paints	_____
<input type="checkbox"/> Pesticides	_____
<input type="checkbox"/> Plating Wastes	_____
<input checked="" type="checkbox"/> Pretreatment sludges	400 Tons
<input type="checkbox"/> Solvents/Thinners	_____
<input type="checkbox"/> Other Hazardous Wastes, describe:	_____
	_____
<input type="checkbox"/> Other Wastes, (describe),	_____
	_____
	_____

D.3 For the above checked wastes, does your company practice:

- On-site storage
- Off-site storage
- On-site disposal
- Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.

Waste will be disposed of off-site by a reputable waste vendor.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Circulus's mechanical recycling process features a unique sequence of steps to process upwards of 4 tons per hour of low-density polyethylene (LDPE) to create a cleaner, less odorous consumer resin that could be suitable for FDA approval in food packaging.

Circulus's goal is to increase the recycling rate of LDPE in the U.S. and create a resin which will enable this material to go to its highest and best uses. This is accomplished through a unique combination of hot washing, optical sorting, extrusion, and devolatilization to create a material that can go into high-end applications, even as a replacement for virgin resin.

Circulus's process includes:

1. **Infeed & Grinding:** Material is inspected for contaminants and shredded.
  - a. **Pre-Shred process** shreds material to size of 100mm x 150mm
2. **Ferrous Metal Removal & Fines Screening:** Fines are removed through a rotating trommel and metals are removed through a series of rare-earth magnets.
3. **Optical Sorting:** High-speed infrared cameras capture plastics and other materials; segregating them into different streams.
4. **Washing**
  - a. **Cold Wash:** Cold Wash utilizes a combination of sink/float technologies, friction washing, and high-speed agitation to separate dirt and other polymers from LDPE flake
  - b. **Hot Wash:** Hot Wash utilizes high temperature water coupled with high speed agitation and an environmentally safe detergent to further remove dirt, adhesive materials, etc. from the stream.
5. **Granulating:** Remaining contamination removed, and material size reduced to 50mm.
6. **Extrusion/Filtration/Pelletizing:** Material is compacted, melted, filtered, de-gassed, and cut into a resin pellet.
7. **Refresher® Technology:** Heat & pressure are applied to reduce odor and contaminants.
8. **Laboratory:** Resin is tested for density, ash content, moisture, color, dart impact & gels

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## Section 1 - General Provisions

**1.1 Purpose** The purpose of this ordinance is to provide for the maximum possible beneficial public use of the municipal wastewater system through proper regulation of direct and indirect contributors to the municipal wastewater system; to provide for equitable distribution of costs; and to provide procedures for complying with State and Federal requirements.

**1.2 Policy** This ordinance sets forth uniform requirements for direct and indirect contributors to the wastewater collection and treatment system of the City of Arab, Sewer Board, Alabama and enables the City to comply with all applicable State and Federal laws required by the Clean Water Act of 1977 and the General Pretreatment Regulations (40 CFR, Part 403).

This Ordinance provides for the regulation of direct and indirect contributors to the municipal wastewater system through the issuance of permits to certain non-domestic users and through enforcement of general requirements for the other users, authorizes monitoring and enforcement activities, requires user reporting, assumes that existing customer's capacity will not be preempted, and provides for the setting of fees for the equitable distribution of costs resulting from the program established herein.

These regulation shall apply to the City of Arab, Alabama and those users outside the City who are by contract or agreements with The City of Arab, Sewer Board, users of the City's Municipal Wastewater System.

**1.3 Definitions** Unless the context specifically indicates otherwise, the following terms and phrased, as used in this

Ordinance, shall have the meaning hereinafter designated:

(1) Act or "The Act". The Federal Water Pollution Control Act, also known as The Clean Water Act, as amended, 33 U.S.C. 1251, et seq.

(2) Approval Authority. The Director of the State Pretreatment Program. ADEM.

(3) Authorized Representative of Industrial User. An authorized representative of an Industrial User may be: a) A principal executive officer of at least the level of vice-president, if the Industrial User is a corporation; b) A general partner or proprietor if the Industrial User is a partnership or proprietorship, respectively; c) A duly authorized representative of the individual designated above if such representative is responsible for the overall operation of the facilities from which the indirect discharge originates.

(4) Biochemical Oxygen Demand (BOD). The quantity of oxygen utilized in the biochemical oxidation of organic matter under standard laboratory procedure in five (5) days at 20 C, expressed in milligrams per liter.

(5) Building Sewer. A privately owned and maintained sewer conveying wastewater from the premises of a user to the POTW.

(6) Categorical Standards. National Categorical Pretreatment Standards or Pretreatment Standard.

(7) City. The City of Arab, a municipal corporation in Marshall County, Alabama, and specifically the Arab Sewer Board, which Board shall have all administrative powers and responsibilities under all the provisions of this Ordinance.

(8) Consistent Removal. A reduction in the amount of a pollutant or alteration of the nature of the pollutant by the wastewater treatment system to a less toxic or harmless state in

the effluent which is achieved by the system when 95 percent of the samples taken when measured according to the procedures set forth in Section 403.7(c)2 of (Title 40 of the Code of Federal Regulations, Part 403)-"General Pretreatment Regulations for Existing and New Sources of Pollution" promulgated pursuant to the Act.

(9) Cooling Water. The water discharged from any use such as air conditioning, cooling or refrigeration, during which only pollutant added to the water is heat.

(10) Direct Discharge. The discharge of treated or untreated wastewater directly to the waters of the State of Alabama.

(11) Domestic Wastes. Liquid wastes a) from the non-commercial preparation, cooking and handling of food, or b) containing human excrement and similar matter from the sanitary conveniences of dwellings, commercial buildings, industrial facilities, and institutions.

(12) Domestic User. Any user not covered under the definition of "Industrial User".

(13) Environmental Protection Agency (EPA). The United States Environmental Protection Agency, or where appropriate the term may also be used as a designation for the Administrator or other duly authorized official of said agency.

(14) Garbage. The solid wastes from the domestic and commercial preparation, cooking and dispensing of food, and from the handling, storage and sale of produce.

(15) Grab Sample. A sample which is taken from a waste stream, on a one-time basis with no regard to the flow in the waste stream and without consideration of time.

(16) Holding Tank Waste. Any waste from holding tanks such as vessels, chemical toilets, campers, trailers, septic tanks, and vacuum-pump tank trucks.

(17) Indirect Discharge. The discharge or the introduction



of nondomestic pollutants from any source regulated under Section 307(b) or © of the Act, (33 U.S.C. 1317), into the POTW (including holding tank waste discharged into the system).

(18) Industrial User. A source of Indirect Discharge which does not constitute a "Discharge of Pollutants" under regulations issued pursuant to Section 402. of the Act (33 U.S.C. 1342). (*A User that requires a SID Permit & discharges into the Sanitary Sewer System*).

(19) Interference. The inhibition or disruption of the POTW treatment processes or operations which contributes to a violation of any requirement of the City's NPDES Permit. The term includes prevention of sewage sludge use or disposal by the POTW in accordance with 405 of the Act, (33 U.S.C. 1345) or any criteria, guidelines, or regulations developed pursuant to the Solid Waste Disposal Act (SWDA), The Clean Air Act, The Toxic Substances Control Act, or more stringent state criteria (including those contained in any State Sludge Management Plan prepared pursuant to Title IV of SWDA) applicable to the method of disposal or use employed by the POTW.

(20) Lateral Sewer. A sewer that discharges into a collecting sewer or other sewers and has no other common sewer tributary to it.

(21) National Categorical Pretreatment Standard or Pretreatment Standard. Any regulation containing pollutant discharge limits promulgated by the EPA in accordance with Section 307(b) and © of the Act (33 U.S.C 1347) which applies to a specific category of Industrial Users.

(22) National Prohibitive Discharge Standard or Prohibitive Discharge Standard. Any regulation developed under the authority of 307(b) of the Act and 40 CFR, Section 403.5.

(23) National Pollution Discharge Elimination System or NPDES Permit. A permit issued pursuant to Section 402 of the Act

(33 U.S.C 1342).

(24) New Source. Any source, the construction of which is commenced after the publication of proposed regulation prescribing a section 307 © (33 U.S.C 1317) Categorical Pretreatment Standard which will be applicable to such source, if such standard is thereafter promulgated within 120 days of proposal in the Federal Register. Where the standard is promulgated later than 120 days after proposal, a new source means any source, the construction of which is commenced after the date of promulgation of the standard.

(25) Odor. The discharge of any substance from wastewater which results in complaints from surrounding residents or creates a public nuisance.

(26) Person. Any individual, partnership, copartnership, firm, company, corporation, association, joint stock company, trust, estate, governmental entity, or any other legal entity, or their legal representatives, agents or assigns. The masculine gender shall include the feminine, the singular shall include the plural where indicated by the context.

(27) pH. The logarithm (Base 10) of the reciprocal of the concentration of hydrogen ions expressed in gram moles per liter of solution.

(28) Pollution. The man-made or man-induced alteration of the chemical, physical, biological, and radiological integrity of water.

(29) Pollutant. Any dredged spoil, solid waste, incinerator residue, sewage, garbage, sewage sludge, munitions, chemical wastes, biological materials, radio-active materials, heat, wrecked or discharged equipment, rock, sand, cellar dirt and industrial, municipal and agricultural waste discharged into water.

(30) Pretreatment or Treatment. The reduction of the amount

of pollutants, the elimination of pollutants, or the alteration of the nature of pollutant properties in wastewater to a less harmful state prior to or in lieu of discharging or otherwise introducing such pollutants into the City's POTW. The reduction or alteration can be obtained by physical, chemical or biological processes, or process changes by other means, except as prohibited by 40 CFR Section 403.6 (d).

(31) Pretreatment Requirements. Any substantive or procedural requirement related to pretreatment, other than a National Pretreatment Standard imposed on an industrial user.

(32) Publicly Owned Treatment Works (POTW). A treatment works as defined by Section 212 of the Act, (33 U.S.C 1292) which is owned in this instance by the City. This definition includes any publicly owned sewers that convey wastewater to the POTW treatment plant, but does not include building sewers and pipes, sewers or other conveyances not connected to a facility providing treatment. For the purposes of this ordinance, "POTW" shall also include any publicly or privately owned sewers that convey wastewaters to the POTW from persons outside the City who are, by contract or agreement with the City, users of the City's POTW.

(33) POTW Treatment Plant. That portion of the POTW designed to provide treatment to wastewater.

(34) Receiving Waters. A natural water course or body of water into which treated or untreated sewage is discharged.

(35) Shall is mandatory: May is permissive.

(36) Significant User. Any User of the City's POTW who a) has a discharge flow of 25,000 gallons or more per average work day, or b) has a flow greater than 5% of the flow in the City's POTW, or c) contributes toxic pollutants as defined pursuant to Section 307 of the Act of Alabama Statutes and Rules or d) is found by the City, Approval Authority, Alabama Department of Environmental Management, or the United States Environmental

Protection Agency to have significant impact either singly or in combination with other contributing industries, on the Wastewater Treatment System, the quality of sludge, the system's effluent quality, or air emissions generated by the POTW.

(37) Slug. Any discharge of water, sewage or industrial waste which in concentration of any given constituent or in quantity of flow exceeds for any period of duration longer than fifteen (15) minutes more than five (5) times the average twenty-four hour concentration to flow during normal operations, or as defined by limits established in the User's Wastewater Discharge Permit.

(38) Standard Industrial Classification (SIC). A classification pursuant to the Standard Industrial Classification Manual issued by the Executive Office of the President, Office of Management and Budget, 1972.

(39) Standard Methods. "Standard Methods for the Examination of Water and Wastewater" prepared and published jointly by the American Public Health Association, American Water Works Association and the Water Pollution Control Federation, latest edition.

(40) State. State of Alabama.

(41) Storm Water. Any flow occurring during or following any form of natural precipitation and resulting therefrom.

(42) Suspended Solids. The total suspended matter that floats on the surface of, or is suspended in, water, wastewater or other liquids, and which is removable by laboratory filtering.

(43) Surcharge - *Addition charges added to user fees.*

(44) Toxic Pollutant. Any pollutant or combination of pollutants listed as toxic in regulations promulgated by the Administrator of the Environmental Protection Agency under the provision of CWA 307 (a) or other Act.

(45) User. Any person who contributes, causes or permits the

contribution of wastewater into the City's POTW.

(46) Wastewater. The liquid and water-carried industrial or domestic wastes from dwellings, commercial buildings, industrial facilities, and institutions, together with any groundwater, surface water, and storm water that may be present, whether treated or untreated, which is contributed into or permitted to enter the POTW.

(47) Watercourse. A channel in which a flow of water occurs, either continuously or intermittently.

(48) Waters of the State. All streams, lakes, ponds, marshes, watercourses, waterways, wells, springs, reservoirs, aquifers, irrigation systems, drainage systems and all other bodies or accumulations of water, surface or underground, natural or artificial, public or private, which are contained within, flow through, or border upon the State or any portion thereof.

(49) Wastewater Discharge Permit. As set forth in Section Four of this Ordinance.

Terms not otherwise defined herein shall be as adopted in the latest edition of "Standard Methods for the Examination of Water and Wastewater", published by the American Public Health Association, the American Water Works Association and the Water Pollution Control Federation.

**1.4 Abbreviations** The following abbreviations shall have the designated meanings:

ASTM - American Society for Testing and Materials.  
BOD - Biochemical Oxygen Demand.  
CFR - Code of Federal Regulations.  
COD - Chemical Oxygen Demand.  
EPA - United States Environmental Protection Agency.  
l - Liter.  
Mg - Milligrams.  
Mg/l - Milligrams per Liter.  
NPDES - National Pollutant Discharge Elimination System.  
POTW - Publicly Owned Treatment Works.  
PPM - Parts per Million.  
SIC - Standard Industrial Classification.  
SID - State Indirect Discharge Permit.  
SWDA - Solid Waste Disposal Act, 42 U.S.C. 6901 et seq.  
USC - United States Code.  
TSS - Total Suspended Solids.  
WPCF - Water Pollution Control Federation.  
F - Degrees Fahrenheit.  
C - Degrees Celsius.

## Section 2 - Regulations

**2.1 General Discharge Prohibitions** No user shall contribute or cause to be contributed, directly or indirectly, any pollutant or wastewater which will interfere with the operation or performance of the City's POTW. These general prohibitions apply to all such users of the City's POTW whether or not the user is subject to National Categorical Pretreatment Standards or Requirements. A user may not contribute the following substances to the City's POTW:

1) Any wastewater having a temperature which will inhibit biological activity in the POTW treatment plant resulting in interference, or resulting in damages to the POTW collection system but, in n case may a user contribute wastewater with a temperature at the introduction into the POTW which exceeds 65 C (150 F) unless the POTW treatment plant and collection system is designed to accommodate such temperature.

2) Liquids, solids, or gases which by reason of their nature or quantity are, or may be, sufficient either alone or by interaction with other substances to cause fire or explosion or be injurious in any other way to the POTW or to the operation of the POTW. At no time, shall two successive readings on an explosion hazard meter, at the point of discharge into the system, be more than five percent (5%) nor any single reading over ten percent (10%) of the lower explosive limit (LEL) of the meter. Prohibited materials include, but are not limited to, gasoline, kerosene, naphtha, benzene, toluene, xylene, ethers, alcohols, ketones, aldehydes, peroxides, chlorates, per chlorates, bromates, carbides, hydrides, and sulfides and any other substances which the City, the State or EPA has notified

the User is a fire hazard or a hazard to the wastewater collection and treatment system.

3) Solid or viscous substances which may cause obstruction to the flow in a sewer, or other interference with the proper operation of the POTW. Prohibited materials include, but are not limited to: grease, garbage with particles greater than one-half inch ( $\frac{1}{2}$ " ) in any dimension, animal guts or tissues, paunch manure, bones, hair, hides or fleshing, entrails, whole blood, feathers, ashes, cinders, sand, spent lime, stone or marble dust, metal, glass, straw, shavings, grass clippings, rags, spent grains, spent hops, waste paper, wood, plastics, gas, tar, asphalt residues, residues from refining or processing of fuel or lubricating oil, mud, glass grindings and polishing wastes, and similar substances.

4) Any wastewater having a pH less than 5.0, or greater than 9.0, unless the POTW is specifically designed to accommodate such wastewater, or wastewater having any other corrosive property capable of causing damage or hazard to structures, equipment, and/or personnel of the POTW.

5) Any wastewater containing toxic pollutants in sufficient quantity, either singly or by interaction with other pollutants, to injure or interfere with any wastewater treatment process, constitute a hazard to humans or animals, create a toxic effect in the receiving waters of the POTW, or to exceed the limitation set forth in a Categorical Pretreatment Standard.

6) Radioactive wastes or isotopes of such half life or concentration that they do not comply with regulations or orders issued by the appropriate authority or agency having control over their use and which will or may cause damage or hazards to the POTW or the City's personnel.

7) Any wastewater with objectionable color not removed in the treatment process, such as, but not limited to, dye wastes



and vegetable tanning solutions.

8) Any noxious or malodorous liquids, gasses, or solids which, either singly or by interaction with other wastes, are sufficient to create a public nuisance or hazard to life, are sufficient to prevent entry into the sewers for maintenance and repair, or creates a condition deleterious to the POTW.

9) Quantities of flow, concentrations, or both, which constitute a "slug" as defined herein, which a user knows or has reason to know will cause interference to the POTW.

10) Any unpolluted water including, but not limited to, water from cooling systems or of storm water and/or ground-water origin entering the wastewater collection system through improperly installed or maintained lateral sewers, building sewers and/or house connections, which will increase the hydraulic load on the treatment system.

11) Any substance which may cause the POTW's effluent or any other product of the POTW such as residues, sludges, or scums, to be unsuitable for reclamation and reuse or to interfere with the reclamation process. In no case shall a substance discharged to the POTW cause the POTW to be in non-compliance with sludge use or disposal criteria, guidelines or regulations developed under Section 405 of the Act; any criteria, guidelines, or regulations affecting sludge use or disposal developed pursuant to the Solid Waste Disposal Act, the Clean Air Act, the Toxic Substances Control Act, or State Criteria applicable to the sludge management method being used by the POTW.

12) Any substance which will cause the POTW to violate its NPDES and/or State Disposal System Permit or the receiving water quality standards.

13) Any wastewater which causes a hazard to human life or creates a public nuisance.

When the City or Approval Authority determines that a

User(s) is contributing to the POTW any of the above enumerated substances in such amounts as to interfere with the operation of the POTW; the City and/or Approval Authority shall: 1) advise the User(s) of the impact of the contribution of the POTW; and 2) Develop effluent limitation(s) for such User to correct the interference with the POTW.

**2.2 Limited Discharges** No user shall contribute to the POTW, or cause to be contributed to the POTW, directly or indirectly, any of the following described substances, materials, waters, or wastes, if in the opinion of the City and/or Approval Authority, such wastes are likely to interfere with the wastewater treatment plant processes, harm the public wastewater collection system or equipment, have an adverse effect on the receiving stream, or are likely to otherwise endanger life, health or property, or constitute a public nuisance. The City and Approval Authority will formulate an opinion as to the acceptability of these wastes based upon consideration of such factors as: quantities of subject wastes in relation to flows and velocities in the wastewater collection system, materials of which the collection system is constructed, nature of the wastewater treatment process, capacity of the POTW, degree of treatability of wastes in the wastewater treatment plant, and other factors which are pertinent in the opinion of the City and Approval Authority. The limited discharges are as described hereinbelow:

1) Any water or waste containing fats, wax, grease, or oils, whether emulsified or not, in excess of 100 mg/l or containing substances which may solidify or become viscous at temperatures between thirty-two degrees Fahrenheit (32 F) or zero degrees Celsius (0 C) and one hundred fifty degrees Fahrenheit (150 F) or sixty-five degrees Celsius (65 C).

2) Any garbage that has not been properly shredded. The installation and operation of any garbage grinder equipped with a

motor of three-fourths (3/4) horse power (0.76 hp metric) or greater shall be subject to the review and approval of the City.

3) Any waters or wastes containing in excess of the limits established below:

	30-Day Average <u>Concentration, mg/l</u>	Daily Maximum <u>Concentration, mg/l</u>
Aluminum (dissolved)	25.0	50.0
Arsenic	0.1	0.5
Cadmium	0.1	0.2
Cobalt	0.8	1.6
Copper	1.0	2.0
Chromium (Hexavalent)	0.1	0.2
Chromium (Total)	2.5	5.0
Cyanide	0.5	1.0
Iron	10.0	20.0
Lead	0.1	0.2
Mercury	0.01	0.1
Nickel	0.5	1.0
Silver	0.25	0.5
Tin	5.0	10.0
Zinc	1.8	3.6
Total Metals (except Aluminum & Iron)	5.0	10.5

4) Any water or wastes that contain phenolics, or phenolic compounds, in excess of 0.1 parts per million by weight, wastewater from which sulfides in excess of 0.1 mg/l are discharged into the atmosphere, or other taste or odor producing substances in such concentrations exceeding limits established by the City and Approval Authority as defined herein.

5) Wastewaters containing unusual concentrations of BOD which

are defined as concentrations exceeding 250 ppm, chlorine demand exceeding 9.0 ppm or total phosphorus concentrations exceeding 20 ppm (as P).

6) Wastewaters containing unusual concentrations of inorganic suspended solids which are defined as concentrations exceeding 250 ppm or dissolved solids such as, but not limited to, chlorides in concentrations greater than 10,000 ppm or sulfates in concentrations greater than 500 ppm.

7) Wastewaters containing substances which are not amenable to treatment by the wastewater treatment processes employed, or are amenable to treatment only to such degree that the wastewater treatment plant effluent cannot meet the requirements of State, Federal or other agencies having jurisdiction over discharge into the receiving waters.

8) Any wastewater which by interaction with other waters or wastes in the POTW release odors, as defined herein, form suspended solids which interfere with the collection system, or create a condition deleterious to the POTW.

In cases where the effluent characteristics of a user's discharge exceeds the limited discharge requirements described within Section 2.2 hereinabove, the acceptability of such wastewater to the POTW will be left to the judgement of the City and the Approval Authority. If in the judgement of the City and Approval Authority the admission of such wastewaters will not interfere with the proper operation of the City's POTW and does not violate State or Federal requirements, a permit to discharge said wastewater may be granted. However, the City may require the User to pay costs for both capital and operating and maintenance expenses to cover the cost of treatment for wastewater which exceeds the limited discharge requirements described within Section 2.2 hereinabove.

**2.3 Federal Standards** Upon the promulgation of the Federal

Categorical Pretreatment Standards for a particular industrial subcategory, the Federal Standard, if more stringent than limitations imposed under these rules and regulations for sources in that subcategory, shall immediately supersede the limitations imposed herein. The City and/or Approval Authority shall notify all affected users of the applicable reporting requirements under 40 CFR, Section 403.12.

**2.4 Modification of Federal Standards** When the City's POTW achieves consistent removal of pollutants limited by Federal Pretreatment Standards, the City may apply to the Approval Authority for modifications of specific limits in the Federal Pretreatment Standards. The City may modify pollutant discharge limits in the Federal Pretreatment Standards of the requirements contained in 40 CFR, Part 403, Section 403.7 are fulfilled and prior approval from the Approval Authority is obtained.

**2.5 Accidental Discharges** Each User shall provide protection from accidental discharge of prohibited materials or other substances regulated herein. Facilities to prevent accidental discharge of prohibited materials shall be provided and maintained at the Owner or User's own cost and expense. In the case of an accidental discharge, it is the responsibility of the user to immediately telephone and notify the City of the incident. Notification shall include location of discharge, type of waste, concentration and volume, and corrective actions.

Within five (5) days following an accidental discharge, the User shall submit to the City and Approval Authority a detailed written report describing the cause of the discharge and the measures to be taken by the User to prevent similar future occurrences. Such notification shall not relieve the User of any expense, loss, damage, or other liability which may be incurred as a result of damage to the POTW, fish kills, or any other damage to person or property; nor shall such notification relieve

the User of any fines, civil penalties, or other liability which may be imposed by these regulations or other applicable law.

**2.6 Excessive Discharge** No User shall ever increase the use of process water or, in any way, attempt to dilute a discharge as a partial or complete substitute for adequate treatment to achieve compliance with the limitations contained in the National Categorical Pretreatment Standards, or in any other pollutant-specific limitation described within this Ordinance.

**2.7 Discharges From Septic Tank Pump Trucks** Persons owning septic tank pump trucks, or other liquid transport trucks, and desiring to discharge contents of trucks shall comply with all rules and regulations of the City in addition to the requirements herein. The City reserves the right to change and/or modify existing rules and regulations pertaining to septic tank pump truck discharges as deemed necessary.

### Section 3 - Fees

**3.1 Purpose** It is the purpose of this section to provide for the recovery of costs from Users of the City's POTW for implementation of the program established herein. The applicable charges or fees shall be set forth in the City's Schedule of Charges and Fees.

**3.2 Charges and Fees** The City may adopt charges and fees which may include:

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

All fees and charges payable under the provisions of these rules and regulations shall be paid to the City. Unless otherwise provided herein, whenever the fees and charges required by this Ordinance are based on estimated values or estimated quantities the City shall make such determinations in accordance with estimating practices heretofore used by the City.

All fees and charges imposed under the provisions outlines herein, are due and payable upon receipt of the notice of charges. Unpaid fees or charges shall become delinquent 45 days after mailing or delivering the notice of charges. A basic penalty charge of 10 percent of the unpaid amount shall be added

to any fee or charge that becomes delinquent. Additional penalties at the rate of one (1) percent per month shall accrue on the total of all delinquent charges including the 10% penalty charge provided hereinabove.

**3.3 Amounts of Charges and Fees** Charges and Fees adopted to become effective with the effective date of this Ordinance:

- 1) Fee for permit applications - \$50.00



## Section 4 - Administration

**4.1 Wastewater Dischargers** It shall be unlawful to discharge without a Wastewater Discharge Permit to any natural outlet within the City of Arab, or in any area under the jurisdiction of The City of Arab, Alabama and /or to the POTW any wastewater except as authorized by the City and/or Approval Authority in accordance with the provisions of this Ordinance.

### **4.2 Wastewater Discharge Permits**

1) General Permits. All significant users, as defined herein, proposing to connect to or to contribute to the POTW shall obtain a Wastewater Discharge Permit as issued by the City and/or Approval Authority before connecting to or contributing to the POTW. All existing significant users connected to or contributing to the POTW shall obtain a Wastewater Discharge Permit within 180 days after the effective date of this Ordinance.

2) Permit Application. Users required to obtain a Wastewater Discharge Permit shall complete and file with the City and Approval Authority, an application in the form prescribed by the City and Approval Authority and accompanied by a fee of \$50.00. Existing users shall apply for a Wastewater Discharge Permit within 30 days after the effective date of this Ordinance and proposed new users shall apply at least 90 days prior to connecting to or contributing to the POTW. In support of the application, the user shall submit, in units and terms appropriate for evaluation, the following information:

- a) Name, address, and location if different from address;
- b) SIC number according to the Standard Industrial

Classification Manual, Bureau of the Budget, 1972, as amended;

- c) Wastewater constituents and characteristics including but not limited to those mentioned in Section 2 of this Ordinance as determined by a reliable analytical laboratory, acceptable to the City and Approval Authority; sampling and analysis shall be performed in accordance with procedures established by the EPA pursuant to Section 304(g) of the Act and contained in 40 CFR, Part 136, as amended;
- d) Time and duration of wastewater contribution;
- e) Average daily and peak wastewater flow rates, including any daily, monthly, or seasonal variations;
- f) Details locating all sewers, sewer connections, and appurtenances by size, location and elevation, including domestic sewers if separate from industrial sewers;
- g) Description of plant facilities and processes on the premises including all materials which are or could be discharged;
- h) The nature and concentration of any known pollutants in the discharge which are limited by City, State, Federal Pretreatment Standards, and a statement regarding whether or not the pretreatment standards are being met on a consistent basis and if not, whether additional operation and maintenance and/or additional pretreatment is required for the User to meet applicable pretreatment standards;
- I) If additional pretreatment and/or operation and maintenance will be required to meet the Pretreatment Standards; the shortest schedule by which the User will provide such additional pretreatment. The completion date in this schedule shall not be later than the

compliance date established for the applicable Pretreatment Standard. The following conditions shall apply to this schedule:

(1) The schedule shall contain increments of progress in the form of dates for the commencement and completion of major events leading to the construction and operation of additional pretreatment facilities required for the User to meet the applicable Pretreatment Standards.

(2) The User shall submit annual progress reports to the City including, as a minimum, whether or not the User has complied with his proposed schedule; and, if not, the date which it expects to return to the proposed schedule and reasons for delay.

- j) Each product produced by type, amount, process or processes and rate of productions;
- k) Type and amount of raw materials processed (average and maximum per day);
- l) Number and type of employees, and hours of operation of plant, and proposed or actual hours of operation of pretreatment system;
- m) Any other information as may be deemed by the City to be necessary to evaluate the permit application.

The City and Approval Authority will evaluate the data furnished by the User and may require additional information. After evaluation and acceptance of the data furnished by the User, a Wastewater Discharge Permit of Users subject to such standards shall be revised to require compliance with such standard within the time frame prescribed by such standard. Where a User, subject to a National Categorical Pretreatment Standard, has not previously submitted an application for a Wastewater Discharge Permit as required herein, the User shall

apply for a Wastewater Discharge Permit within 180 days after the promulgation of the applicable National Categorical Pretreatment Standard. In addition, the User with an existing Wastewater Discharge Permit shall submit to the City and Approval Authority within 180 days after the promulgation of an applicable Federal Categorical Pretreatment Standard the information required by paragraphs (h) and (I) of Section 4.2, Subsection 2.

4) Permit Conditions. Wastewater Discharge Permits shall be expressly subject to all provisions described herein and all other applicable regulations, User charges, and fees established by the City. Permits may contain the following:

- a) The unit charge or schedule of User charges and fees for the wastewater to be discharged to a sewer;
- b) Limits on the average and maximum wastewater constituents and characteristics;
- c) Limits on average and maximum rate and time of discharge or requirements for flow regulations and equalization.
- d) Requirements for installation and maintenance of inspection and sampling facilities;
- e) Specifications for monitoring programs which may include sampling locations; frequency of sampling, number, types, and standards for tests and reporting;
- f) Compliance schedules;
- g) Requirements for submission of technical reports or discharge reports described herein;
- h) Requirements for maintaining and retaining plant records relating to wastewater discharge as specified by the City, and affording the City access thereto;
- I) Requirements for notification of the City and Approval Authority of any new introduction of wastewater constituents or any substantial change in the volume or character of the wastewater constituents being introduced

into the POTW;

- j) Requirements for notification of slug discharges;
- k) Other conditions as deemed appropriate by the City and/or Approval Authority to ensure compliance with these rules and regulations.

5) Duration of Permits Wastewater Discharge Permits shall be issued for a period of five (5) years. The User shall apply for permit reissuance a minimum of 180 days prior to the expiration of the User's existing permit. Application for permit reissuance shall comply with all requirements of section 4.2.2 of these rules and regulations. The terms and conditions of the permit may be subject to modification by the City or Approval Authority during the term of the permit as limitations or requirements as identified in Section 2 are modified. The User shall be informed of any proposed changes in his permit at least 30 days prior to the effective date of change. Any changes or new conditions in the permit shall include a reasonable time schedule for compliance.

6) Transfer of Permit Wastewater Discharge Permits are issued to specific user for a specific operation. A wastewater discharge permit shall not be reassigned or transferred or sold to a new owner, new User, different premises, or a new or changed operation without the approval of the City and/or Approval Authority. Any succeeding owner or User shall also comply with the terms and conditions of the existing permit.

#### **4.3 Reporting Requirements for Permittee**

1) Compliance Date Report Within 90 days following the date for final compliance with applicable Pretreatment Standards or, in the case of a new source, following commencement of the introduction of wastewater into the POTW, any User subject to Pretreatment Standards shall submit to the City and Approval

Authority a report indicating the nature and concentration of all pollutants in the discharge from the regulated process which are limited by Pretreatment Standards and the average and maximum daily flow for those process units in the User facility which are limited by such Pretreatment Standards are being met on a consistent basis and, if not, what additional operation and maintenance and/or pretreatment is necessary to bring the User into compliance with the applicable Pretreatment Standards. This statement shall be certified by a qualified professional and signed by an authorized representative of the Industrial User.

2) Monthly Compliance Reports

- a) Any User subject to a Pretreatment Standard, after the compliance date of such Pretreatment Standard, or, in the case of a new source, after commencement of the discharge into the POTW, and/or any User required to have a Wastewater Discharge Permit, shall submit to the City and Approval Authority a monthly report indicating the nature and concentration of pollutants in the effluent which are limited by such Pretreatment Standards. In addition, this report shall include a record of all daily flows and pollutant concentrations which during the reporting period exceeded the limits of the average daily flow and pollutant concentrations reported in the Wastewater Discharge Permit. The monthly compliance reports shall be submitted by the 28th of the month following the monthly reporting period.
- b) The City or Approval Authority may impose mass limitations on Users which are using dilution to meet applicable Pretreatment Standards, or, in other cases, where the imposition of mass limitations are appropriate. In such cases, the report required by subparagraph (a) of this paragraph shall indicate the

mass of pollutants regulated by pretreatment standards in the effluent of the User.

Monthly compliance reports shall contain the results of sampling and analysis of the discharge, including the flow and the nature and concentration, or production and mass where requested by the City or Approval Authority, of pollutants contained therein which are limited by the applicable Pretreatment Standards or this Ordinance. The frequency of monitoring shall be prescribed in the applicable Pretreatment Standard, Wastewater Discharge Permit and/or as prescribed by the Approval Authority. All analysis shall be performed in accordance with procedures established by the Approval Authority pursuant to Section 304(g) of the Act and contained in 40 CFR, Part 136 and amendments thereto or with any other test procedures approved by the Approval Authority. Sampling shall be performed in accordance with the techniques approved by the Approval Authority.

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

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

there is a significant difference in wastewater constituents and characteristics produced by different operations of a single user, the City or Approval Authority may require that separate monitoring facilities be installed for each separate discharge.

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

**4.5 Inspection and Sampling** The City and/or Approval Authority shall inspect the facilities of any User to ascertain whether the purpose of these rules and regulations is being met and all requirements are being complied with. Significant industrial users will receive at least one on-site evaluation inspection and at least one compliance sampling inspection by the City and/or the Approval Authority each year. Persons or occupants of premises where wastewater is created or discharged shall allow the City or their representative ready access at all reasonable times to all parts of the premises for the purposes of inspection, sampling, records examination or in the performance of any of their duties. The City, Approval Authority, and EPA shall have the right to set up on the User's property such devices as are necessary to conduct sampling inspection, compliance monitoring and/or metering operations. Where a User has a security measures in force which would require proper identification and clearance before entry into their premises, the User shall make necessary arrangements with their security guards so that upon presentation of suitable identification, personnel from the City, Approval Authority, and EPA will be permitted to enter, without unreasonable delay, for the purposes of performing their specific responsibilities.



**4.6 Pretreatment** Users shall provide necessary treatment as required to comply with these rules and regulations and shall achieve compliance with all National Categorical Pretreatment Standards within the time limitations as specified by the Pretreatment Standards. Any facilities required to pretreat wastewater to a level acceptable to the City and Approval Authority shall be provided, operated, and maintained at the User's expense. Detailed plans showing the pretreatment facilities and operating procedures shall be submitted to the City and Approval Authority for review, and shall be acceptable to the City and Approval Authority before construction of the facility. The review of such plans and operating procedures will be in no way relieve the User from the responsibility of modifying the facility as necessary to produce an effluent acceptable to the City and/or Approval Authority under provisions of this Ordinance.

Any subsequent changes in the pretreatment facilities or method of operation shall be reported to and be acceptable to the City and Approval Authority prior to the User's initiation of the changes.

The City shall annually publish in the local newspaper a notification of significant violators of the requirements of this ordinance within the 12 previous months. A significant violation is defined as a violation of the requirements of this ordinance which remains uncorrected 45 days after notification; is part of a pattern of noncompliance over a twelve month period; involves a failure to accurately report noncompliance; or resulted in the City exercising its emergency authority. The notification shall also summarize any enforcement actions taken against the User(s) during the same 12 months.

All records relating to compliance with Pretreatment Standards shall be made available to officials of the City,

Approval Authority, and EPA upon request.

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

When requested by the person furnishing a report, the portions of a report which might disclose trade secrets or secret processes shall not be made available for inspection by the public but shall be made available upon written request to governmental agencies for uses related to this Ordinance the National Pollutant Discharge Elimination System (NPDES) Permit and State Pretreatment Programs; provided however, that such portions of a report shall be available for use by the State or any state agency in judicial review or enforcement proceedings involving the person furnishing the report. Wastewater constituents and characteristics will not be recognized as confidential information.

Information accepted by the City and Approval Authority as confidential shall not be transmitted to any governmental agency by the City until and unless a fifteen-day notification is given to the User.

**4.8 Use of Sanitary Sewer**

- a) *It is the responsibility of the property owner to install and maintain sewer lateral lines from the Board's mains to the property owner's building. Where laterals have been run from mains through*

contract by the City and assessed to the property owner or where laterals have been installed by developers or builders, the Boards still assumes no maintenance responsibility.

- b) The Board will make necessary repairs to sanitary sewer laterals under the streets and/or on the street side of the curb at no expense to the Owner when it is determined by Board inspection or documented by the owner's plumber that the wye fitting is broken or that the lateral connecting to the main has dropped into the main.
- c) The Board may require a property owner to make repairs to his lateral. Failure or refusal of the owner to make the necessary repairs or to request that the Board make the repairs will be grounds for immediate disconnection of the owner's water and/or sewer service. Failure of a property owner/user to replace a clean-out cap removed or otherwise missing from his lateral is grounds for disconnection of the owner's water and/or sewer service. The Board will replace the owner's missing clean-out cap for a charge to be determined by the Board from time to time.
- d) No person shall discharged any storm water, surface water, ground water, roof run-off, sub-surface drainage, cooling water or unpolluted industrial process waters into any sanitary sewer.
- e) Connections to sanitary Sewer. No unauthorized person(s) shall uncover, make any connections with or opening into, use, alter or disturb any public sewer or appurtenance thereof without first

obtaining a written permit from the Board.

### **Section 5 - Enforcement**

**5.1 Harmful Contributions** The City may suspend the wastewater treatment service and/or Wastewater Discharge Permit when such suspension is necessary, in the opinion of the City and/or Approval Authority in order to stop an actual or threatened discharge which presents or may present an imminent or substantial endangerment to the health or welfare of persons, to the environment, causes interference to the POTW, causes the City to violate any condition of its NPDES Permit, or any discharge in violation of these rules and regulations.

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

**5.2 Revocation of Permit** Any User who violates the following conditions of these rules or applicable state and federal regulations, is subject to having his permit revoked in

accordance with the procedures of Section 5 of this Ordinance:

- a) Failure of a User to factually report the wastewater constituents and characteristics of his discharge to the POTW;
- b) Failure of the User to report significant changes in operations, or wastewater constituents and characteristics;
- c) Refusal of reasonable access to the User's premises for the purpose of inspection or monitoring; or,
- d) Violation of conditions of the Permit.

**5.3 Notification of Violation** Whenever the City or Approval Authority finds that any User has violated or is violating this Ordinance, Wastewater Discharge Permit, or any prohibition, limitation, or requirements contained herein, the City may serve upon such person a written notice stating the nature of the violation. Within 30 days of the date of the notice, a plan for the satisfactory correction thereof shall be submitted to the City by the User.

**5.4 Show Cause Hearing**

1) The City may order any User who causes or allows an unauthorized discharge to enter the POTW to show cause before the City why the proposed enforcement action should not be taken. A notice shall be served on the User specifying the time a place of a hearing to be held by the City regarding the violation, the reason why the action is to taken, the proposed enforcement action, and directing the User to show cause before the City why the proposed enforcement action should not be taken. The notice of the hearing shall be served personally or by certified mail (return receipt requested) at least ten (10) days before the hearing. Service may be made on any agent or officer of a corporation.

2) The City may itself conduct the hearing and take the

evidence, or may designate any officer or employee to:

- a) Issue in the name of the City notices of hearings requesting the attendance and testimony of witnesses and the production of evidence relevant to any matter involved in such hearings;
- b) Take the evidence;
- c) Transmit a report of the evidence and hearing, including transcripts and other evidence, together with recommendations to the City for action thereon.

3) At any hearing held pursuant to this Ordinance, testimony taken must be under oath and recorded stenographically. The transcript, so recorded, will be made available to any member of the public or any party to the hearing upon payment of the usual charges thereof.

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

**5.5 Legal Action** If any person discharges sewage, industrial wastes or other wastes into the City's wastewater disposal system contrary to the provisions of this Ordinance, Federal or State Pretreatment Requirements, or any order of the City; the City Attorney may commence an action for appropriate legal and/or equitable relief in the Circuit Court of this county.

**Section 7 - Severability**

If any provision, paragraph, word, section or article of this Ordinance is invalidated by any court of competent jurisdiction, the remaining provisions, paragraphs, words, sections, and chapters shall not be affected and shall continue in full force and effect.

**Section 9 - Effective Date**

This Ordinance shall be in full force and effect from and after its passage, approval and publication, as provided by law but not before July 1, 1983.

This ordinance was reviewed, Changes were made in italics and approved on 8/12/97 at the regular Sewer Board Meeting.