



Alabama Department of Environmental Management
adem.alabama.gov

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

MARCH 8, 2024

Mr. Mike Ingram, Superintendent
Waterworks and Sewage Board of the City of Dadeville
826 E Columbus Street
Dadeville, AL 36853

RE: Draft Permit
NPDES Permit No. AL0063797
Dadeville WWTP
Tallapoosa County, Alabama

Dear Mr. Ingram:

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. 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 Shanda Torbert at storbert@adem.alabama.gov or (334) 271-7800.

Sincerely,



Shanda Torbert
Municipal Section
Water Division

Enclosure

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



NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: WATERWORKS AND SEWAGE BOARD OF THE CITY OF DADEVILLE
826 E COLUMBUS STREET
DADEVILLE, AL 36853

FACILITY LOCATION: DADEVILLE WWTP (0.750 MGD)
475 BUCK STREET
DADEVILLE, ALABAMA
TALLAPOOSA COUNTY

PERMIT NUMBER: AL0063797

RECEIVING WATERS: CHATTASOFKA 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

Alabama Department of Environmental Management

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PART I: DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS**A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS****1. DSN 0012: Treated Domestic 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)
	Monthly Average	Weekly Average		Minimum Daily	Maximum Daily	Weekly Average				
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	187 Monthly Average	281 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	43.7 Monthly Average	65.6 Weekly Average	lbs/day	****	7.0 Monthly Average	10.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	11.8 Monthly Average	17.8 Weekly Average	lbs/day	****	1.9 Monthly Average	2.8 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	S
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	S
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	S

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

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

(2) S = Summer (April – October)

W = Winter (November - March)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

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

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

DSN 0012 (Continued): Treated Domestic 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	****	****	****	****	0.025 Monthly Average	0.044 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	156 Monthly Average	234 Weekly Average	lbs/day	****	25.0 Monthly Average	37.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	62.5 Monthly Average	93.8 Weekly Average	lbs/day	****	10.0 Monthly Average	15.0 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 Remvi (80091) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (April – October)
W = Winter (November - March)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
- (3) See Part IV.C. for Total Residual Chlorine (TRC). Monitoring for TRC is applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR.
- (4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “*B” on the monthly DMR.

2. DSN 001Q: Quarterly

Outfall 001Q represents the same physical outfall as Outfall 0012. The Department uses the 001Q designation for all samples collected and analyzed for Quarterly testing. 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)	
Zinc Total Recoverable (01094) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	ug/l	Quarterly	Grab	Not Seasonal
Copper Total Recoverable (01119) Effluent Gross Value	*****	*****	*****	*****	19.5 Monthly Average	22.7 Maximum Daily	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
- (2) S = Summer (April – October)
W = Winter (November - March)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)

B. DISCHARGE MONITORING AND RECORD KEEPING REQUIREMENTS

1. Representative Sampling

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

2. Measurement Frequency

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

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

3. Test Procedures

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

- a. For parameters with an EPA established Minimum Level (ML), report the measured value if the analytical result is at or above the ML and report "0" or "*B" for values below the ML. Test procedures for the analysis of pollutants shall conform to 40 CFR Part 136 and guidelines published pursuant to Section 304(h) of the FWPCA, 33 U.S.C. Section 1314(h). If more than one method for analysis of a substance is approved for use, a method having a minimum level lower than the permit limit shall be used. If the minimum level of all methods is higher than the permit limit, the method having the lowest minimum level shall be used and a report of less than the minimum level shall be reported as zero and will constitute compliance, however should EPA approve a method with a lower minimum level during the term of this permit the permittee shall use the newly approved method.
- b. For pollutants parameters without an established ML, an interim ML may be utilized. The interim ML shall be calculated as 3.18 times the Method Detection Level (MDL) calculated pursuant to 40 CFR Part 136, Appendix B.

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

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

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

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

4. **Recording of Results**

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

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

5. **Records Retention and Production**

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

6. **Reduction, Suspension or Termination of Monitoring and/or Reporting**

- a. The Director may, with respect to any point source identified in Provision I.A. of this permit, authorize the permittee to reduce, suspend or terminate the monitoring and/or reporting required by this permit upon the submission of a written request for such reduction, suspension or termination by the permittee, supported by sufficient data which demonstrates to the satisfaction of the Director that the discharge from such point source will continuously meet the discharge limitations specified in Provision I.A. of this permit.
- b. It remains the responsibility of the permittee to comply with the monitoring and reporting requirements of this permit until written authorization to reduce, suspend or terminate such monitoring and/or reporting is received by the permittee from the Director.

7. **Monitoring Equipment and Instrumentation**

All equipment and instrumentation used to determine compliance with the requirements of this permit shall be installed, maintained, and calibrated in accordance with the manufacturer's instructions or, in the absence of manufacturer's instructions, in accordance with accepted practices. At a minimum, flow measurement devices shall be calibrated at least once every 12 months.

C. DISCHARGE REPORTING REQUIREMENTS

1. **Reporting of Monitoring Requirements**

- a. The permittee shall conduct the required monitoring in accordance with the following schedule:
 - (1) **MONITORING REQUIRED MORE FREQUENTLY THAN MONTHLY AND MONTHLY** shall be conducted during the first full month following the effective date of coverage under this permit and every month thereafter.
 - (2) **QUARTERLY MONITORING** shall be conducted at least once during each calendar quarter. Calendar quarters are the periods of January through March, April through June, July through September, and October through December. The permittee shall conduct the quarterly monitoring during the first complete calendar quarter following the effective date of this permit and is then required to monitor once during each quarter thereafter. Quarterly monitoring should be reported on the last DMR due for the quarter (i.e., March, June, September and December DMRs).

- (3) **SEMIANNUAL MONITORING** shall be conducted at least once during the period of January through June and at least once during the period of July through December. The permittee shall conduct the semiannual monitoring during the first complete calendar semiannual period following the effective date of this permit and is then required to monitor once during each semiannual period thereafter. Semiannual monitoring may be done anytime during the semiannual period, unless restricted elsewhere in this permit, but it should be reported on the last DMR due for the month of the semiannual period (i.e., June and December DMRs).
 - (4) **ANNUAL MONITORING** shall be conducted at least once during the period of January through December. The permittee shall conduct the annual monitoring during the first complete calendar annual period following the effective date of this permit and is then required to monitor once during each annual period thereafter. Annual monitoring may be done anytime during the year, unless restricted elsewhere in this permit, but it should be reported on the December DMR.
- b. The permittee shall submit discharge monitoring reports (DMRs) in accordance with the following schedule:
- (1) **REPORTS OF MORE FREQUENTLY THAN MONTHLY AND MONTHLY TESTING** shall be submitted on a monthly basis. The first report is due on the 28th day of the month following the month the permit becomes effective. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.
 - (2) **REPORTS OF QUARTERLY TESTING** shall be submitted on a quarterly basis. The first report is due on the 28th day of the month following the first complete calendar quarter the permit becomes effective. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.
 - (3) **REPORTS OF SEMIANNUAL TESTING** shall be submitted on a semiannual basis. The reports are due on the 28th day of JANUARY and the 28th day of JULY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.
 - (4) **REPORTS OF ANNUAL TESTING** shall be submitted on an annual basis. Unless specified elsewhere in the permit, the first report is due on the 28th day of JANUARY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.
- c. Except as allowed by Provision I.C.1.c.(1) or (2), the permittee shall submit all Discharge Monitoring Reports (DMRs) required by Provision I.C.1.b. electronically.
- (1) If the permittee is unable to complete the electronic submittal of DMR data due to technical problems originating with the Department's electronic system (this could include entry/submittal issues with an entire set of DMRs or individual parameters), the permittee is not relieved of their obligation to submit DMR data to the Department by the date specified in Provision I.C.1.b., unless otherwise directed by the Department.

If the Department's electronic system is down on the 28th day of the month in which the DMR is due or is down for an extended period of time, as determined by the Department, when a DMR is required to be submitted, the permittee may submit the data in an alternate manner and format acceptable to the Department. Preapproved alternate acceptable methods include faxing, e-mailing, mailing, or hand-delivery of data such that they are received by the required reporting date. Within five calendar days of the Department's electronic system resuming operation, the permittee shall enter the data into the Department's electronic system, unless an alternate timeframe is approved by the Department. A comment should be included on the electronic DMR submittal verifying the original submittal date (date of the fax, copy of dated e-mail, or hand-delivery stamped date), if applicable.
 - (2) The permittee may submit a request to the Department for a temporary electronic reporting waiver for DMR submittals. The waiver request should include the permit number; permittee name; facility/site name; facility address; name, address, and contact information for the responsible official or duly authorized representative; a detailed statement regarding the basis for requesting such a waiver; and the duration for which the waiver is requested. Approved electronic reporting waivers are not transferrable.
 - (3) A permittee with an approved electronic reporting waiver for DMRs may submit hard copy DMRs for the period that the approved electronic reporting waiver request is effective. The permittee shall submit the Department-approved DMR forms to the address listed in Provision I.C.1.e.

- (4) If a permittee is allowed to submit a hard copy DMR, the DMR must be legible and bear an original signature. Photo and electronic copies of the signature are not acceptable and shall not satisfy the reporting requirements of this permit.
 - (5) If the permittee, using approved analytical methods as specified in Provision I.B.2, monitors any discharge from a point source for a limited substance identified in Provision I.A. of this permit more frequently than required by this permit, the results of such monitoring shall be included in the calculation and reporting of values on the DMR and the increased frequency shall be indicated on the DMR.
 - (6) In the event no discharge from a point source identified in Provision I.A. of this permit and described more fully in the permittee's application occurs during a monitoring period, the permittee shall report "No Discharge" for such period on the appropriate DMR.
- d. All reports and forms required to be submitted by this permit, the AWPCA and the Department's Rules and Regulations, shall be electronically signed (or, if allowed by the Department, traditionally signed) by a "responsible official" of the permittee as defined in ADEM Administrative Code Rule 335-6-6-.09 or a "duly authorized representative" of such official as defined in ADEM Administrative Code Rule 335-6-6-.09 and shall bear the following certification:

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

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

**Alabama Department of Environmental Management
Office of Water Services, Water Division
Post Office Box 301463
Montgomery, Alabama 36130-1463**

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

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

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

**Alabama Department of Environmental Management
Municipal Section, Water Division
Post Office Box 301463
Montgomery, Alabama 36130-1463**

Certified and Registered Mail shall be addressed to:

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

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

2. Noncompliance Notifications and Reports

- a. The Permittee shall notify the Department if, for any reason, the Permittee's discharge:
 - (1) Does not comply with any daily minimum or maximum discharge limitation for an effluent characteristic specified in Provision I.A. of this permit which is denoted by an "(X)";
 - (2) Potentially threatens human health or welfare;

- (3) Threatens fish or aquatic life;
- (4) Causes an in-stream water quality criterion to be exceeded;
- (5) Does not comply with an applicable toxic pollutant effluent standard or prohibition established under Section 307(a) of the FWPCA, 33 U.S.C. Section 1317(a);
- (6) Contains a quantity of a hazardous substance that may be harmful to public health or welfare under Section 311(b)(4) of the FWPCA, 33 U.S.C. Section 1321(b)(4);
- (7) Exceeds any discharge limitation for an effluent parameter listed in Part I.A. as a result of an unanticipated bypass or upset; or
- (8) Is an unpermitted direct or indirect discharge of a pollutant to a water of the state. (Note that unpermitted discharges properly reported to the Department under any other requirement are not required to be reported under this provision.)

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

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

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

- e. The Department is utilizing an electronic system for notification and submittal of SSO reports. Except as noted below, the Permittee must submit all SSO reports electronically in the Department's electronic system. If requested, waivers from utilization of the electronic system shall be submitted in accordance with ADEM Admin. Code 335-6-1-.04(6). The Department's electronic reporting system shall be utilized unless a written waiver has been granted. A waiver is not effective until receipt of written approval from the Department. Utilization of verbal notifications and hard copy SSO report submittals is allowed only if approved in writing by the Department. The Permittee shall include in the SSO reports the information requested by ADEM Form 415. In addition, the Permittee shall include the latitude and longitude of the SSO in the report except when the SSO is a result of an extreme weather event (e.g., hurricane). To participate in the electronic system for SSO reports, an account may be created at <https://aepacs.adem.alabama.gov/nviro/ncore/external/home>. If the electronic system is down (i.e., electronic submittal of SSO data cannot be completed due to technical problems originating with the Department's system), the Permittee is not relieved of its obligation to notify the Department or submit SSO reports to the Department by the required submittal date, and the Permittee shall submit the data in an alternate manner and format acceptable to the Department. Preapproved alternate acceptable methods include verbal reports, reports submitted via the SSO hotline, or reports submitted via fax, e-mail, mail, or hand-delivery such that they are

received by the required reporting date. Within five calendar days of the electronic system resuming operation, the Permittee shall enter the data into the electronic system, unless an alternate timeframe is approved by the Department. For any alternate notification, records of the date, time, notification method, and person submitting the notification should be maintained by the Permittee. If a Permittee is allowed to submit SSO reports via an alternate method, the SSO report must be in a format approved by the Department and must be legible.

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

D. OTHER REPORTING AND NOTIFICATION REQUIREMENTS

1. Anticipated Noncompliance

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

2. Termination of Discharge

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

3. Updating Information

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

4. Duty to Provide Information

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

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

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

COMPLIANCE SHALL BE ATTAINED ON THE EFFECTIVE DATE OF THIS PERMIT

2. Schedule

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

PART II: OTHER REQUIREMENTS, RESPONSIBILITIES, AND DUTIES

A. OPERATIONAL AND MANAGEMENT REQUIREMENTS

1. Facilities Operation and Maintenance

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

2. Best Management Practices

- 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 TESTING REOPENER

Upon notification under Part II.G. of any newly introduced toxic industrial wastewaters, the Director may reopen the permit to include effluent toxicity limitations and testing requirements.

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 chlorine is not detected prior to actual discharge to the receiving stream using one of these methods (i.e., the analytical result is less than the detection level), the Permittee shall report on the DMR form "*B" or "0". The Permittee shall then be considered to be in compliance with the daily maximum concentration limit for TRC.
3. This permit contains a maximum allowable TRC level in the effluent. The Permittee is responsible for determining the minimum TRC level needed in the chlorine contact chamber to comply with E.coli limits. The effluent shall be dechlorinated if necessary to meet the maximum allowable effluent TRC level.

4. The sample collection point for effluent TRC shall be at a point downstream of the chlorine contact chamber (downstream of dechlorination, if applicable). The exact location is to be approved by the Director.

D. PLANT CLASSIFICATION

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

E. SANITARY SEWER OVERFLOW RESPONSE PLAN

1. SSO Response Plan

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

a. General Information

- (1) Approximate population of City/Town, if applicable
- (2) Approximate number of customers served by the Permittee
- (3) Identification of any subbasins designated by the Permittee, if applicable
- (4) Identification of estimated linear feet of sanitary sewers
- (5) Number of Pump/Lift Stations in the collection system

b. Responsibility Information

- (1) The title(s) and contact information of key position(s) who will coordinate the SSO response, including information for a backup coordinator in the event that the primary SSO coordinator is unavailable. The SSO coordinator is the person responsible for assessing the SSO and initiating a series of response actions based on the type, severity, and destination of the SSO, except for routine SSOs for which the coordinator may pre-approve written procedures. Routine SSOs are those for which the corrective action procedures are generally consistent.
- (2) The title(s), and contact information of key position(s) who will respond to SSOs, including information for backup responder(s) in the event the primary responder(s) are unavailable (i.e., position(s) who provide notification to the Department, the public, the county health department, and other affected entities such as public water systems; position(s) responsible for organizing crews for response; position(s) responsible for addressing public inquiries)

c. SSO and Surface Water Assessment

- (1) Identification of locations within the collection system at which an SSO is likely to occur (e.g., based upon historical SSOs, lift stations where electricity may be lost, etc.)
- (2) A map of the general collection system area, including identification of surface waterbodies and the location(s) of public drinking water source(s). Mapping of all collection system piping, pump stations, etc. is not required; however, if this information is already available, it should be included.
- (3) Identification of surface waterbodies within the collection system area which are classified as Swimming according to ADEM Admin. Code chap. 335-6-11. References available to assist in this requirement include the following: <http://adem.alabama.gov/alEnviroRegLaws/files/Division6Vol11.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.

Because this is a minor facility (design capacity less than 1 MGD) treating only domestic wastewater with no industrial wastewater contributions, no potential toxicity concerns are anticipated, and thus there is no need to impose chronic and acute bioassay testing under this permit. The Department completed a numerical Reasonable Potential Analysis (RPA) of the wastewater data submitted in Table C of the Permittee's application (i.e., per 40 CFR Par 122 Appendix J – Table 2) and data from the Permittee's Discharge Monitoring Report. The RPA indicated whether any pollutants in the treated effluent have the potential to contribute to excursions of Alabama's in-stream water quality standards. The RPA was based on a 7Q10 of 1.52 cfs, a mean annual flow of 72.11 cfs, and a hardness of 31 mg/L and background data from monitoring station CHFT-1 provided by the Department's Water Quality Branch. For this discharge, the RPA indicates that the pollutants in the treated effluent may contribute to excursions of Alabama's in-stream water quality standards for the following parameters: Copper (Cu) and Zinc (Zn). Total Recoverable Copper will have monthly average and daily maximum limits of 19.5 ug/L and 22.7 ug/L, while Total Recoverable Zinc will be monitored. Total Recoverable Mercury is not included in this permit based on the Reasonable Potential reassessment using the effluent DMR data for Mercury showing no reasonable potential. Removing Mercury is not backsliding because it is consistent with the Department's anti-degradation policy and water quality standards are being attained.

The receiving stream is Chattasofka Creek, and it is a Tier I stream. The stream is not on the current 303(d) list and there is not currently a State of Alabama Total Maximum Daily Load (TMDL) for this receiving stream.

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

The imposed E. coli limits were determined based on the water-use classification of the receiving stream. Since Chattasofka Creek is classified as Fish & Wildlife, the E. coli limits for summer (May through October) are 126 col/100 mL (monthly average) and 298 col/100 mL (daily maximum), while the limits for the winter (November through April) are 548 col/ 100 mL (monthly average) and 2507 col/100 mL (daily maximum).

Although the permit application stated ultraviolet is used as disinfection, Total Residual Chlorine (TRC) limits are included in the permit in case chlorine is utilized for disinfection purposes. Monthly average and daily maximum limits of 0.025 mg/L and 0.044 mg/L, respectively, for Total Residual Chlorine (TRC) are being imposed in this permit. The TRC limits were developed based on EPA suggested Water Quality (WQ) criteria and on the current Toxicity Rationale, which considers the available dilution in the receiving stream. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR. In accordance with a letter date August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes.

The monitoring frequency for most parameters is three times per week. The monitoring frequency for nutrient-related parameters is once per month during the summer season (April – October). The flow will be monitored continuously. The reporting frequency for percent removals of TSS and CBOD₅ are to be calculated monthly, while metals are to be monitored quarterly.

ADEM Administrative Rule 335-6-10-.12 requires applicants to new or expanded discharges to Tier II waters demonstrate that the proposed discharge is necessary for important economic or social development in the area in which the waters are located. The application submitted by the facility is not for a new or expanded discharge to a Tier II waterbody, so the applicant is not required to demonstrate that the discharge is necessary for economic and social development.

Prepared by: Torbert

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	Dadeville WWTP	
NPDES Permit Number:	AL0063797	
Receiving Stream:	Chattasofka Creek	
Facility Design Flow (Qw):	0.750 MGD	
Receiving Stream 7Q10:	1.520 cfs	
Receiving Stream 1Q10:	1.140 cfs	(Estimated at 0.75 * 7Q10)
Winter Headwater Flow (WHF):	8.78 cfs	
Summer Temperature for CCC:	30 deg. Celsius	
Winter Temperature for CCC:	20 deg. Celsius	
Headwater Background NH3-N Level:	0.11 mg/l	
Receiving Stream pH:	7.0 s.u.	
Headwater Background FC Level (summer):	N/A.	(Only applicable for facilities with diffusers.)
(winter):	N/A.	

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

$$\text{Stream Dilution Ration (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 43.29\%$$

AMMONIA TOXICITY LIMITATIONS

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

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

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

$$\text{Limiting Dilution} = \frac{Q_w}{7Q_{10} + Q_w} = 43.29\% \quad \text{Effluent-Dominated, CCC Applies}$$

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

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

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

$$\text{Summer NH3-N Toxicity Limit} = \frac{[(\text{Allowable Instream NH3-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH3-N}) * (7Q_{10})]}{Q_w} = 4.9 \text{ mg/l NH3-N at 7Q10}$$

$$\text{Winter NH3-N Toxicity Limit} = \frac{[(\text{Allowable Instream NH3-N}) * (WHF + Q_w)] - [(\text{Headwater NH3-N}) * (WHF)]}{Q_w} = 34.8 \text{ mg/l NH3-N at Winter Flow}$$

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

	<u>DO-based NH3-N limit</u>	<u>Toxicity-based NH3-N limit</u>
Summer	1.90 mg/l NH3-N	4.90 mg/l NH3-N
Winter	7.00 mg/l NH3-N	34.80 mg/l NH3-N

Summer: The DO based limit of 1.90 mg/l NH3-N applies.

Winter: The DO based limit of 7.00 mg/l NH3-N applies.

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

The following factors trigger toxicity testing requirements:

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

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

This is a minor facility (Qw < 1.0 MGD) with no SID permits. No toxicity testing is required.

Instream Waste Concentration (IWC) = $\frac{Q_w}{7Q_{10} + Q_w} = 43.29\%$ 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: **Ultraviolet**

Limit calculation method: **Limits based on meeting stream standards at the point of discharge.**

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

MAXIMUM ALLOWABLE CHLORINATION LIMITS

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

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

Maximum allowable TRC in effluent:	0.025 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.044 mg/l (acute)	(0.019)/(SDR)

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

Prepared By: Shanda Torbert Date: 10/5/2023

Waste Load Allocation Summary

Page 1

REQUEST INFORMATION

Request Number: 3401

From:	Shanda Torbert	In Branch/Section	Municipal		
Date Submitted	2/17/2017	Date Required	3/19/2017	FUND Code	605
Receiving Waterbody	Chattasofka Creek	Date Permit application received by NPDES program	2/2/2017		
Previous Stream Name					
Facility Name	Dadeville WWTP	(Name of Discharger-WQ will use to file)			
		Previous Discharger Name			
River Basin	Tallapoosa	Outfall Latitude	32.81575 (decimal degrees)		
*County	Tallapoosa	Outfall Longitude	-85.75953 (decimal degrees)		
Permit Number	AL0063797	Permit Type	Permit Reissuance		
		Permit Status	Active		
		Type of Discharger	MUNICIPAL		

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

If yes, impacting dischargers names.

Impacting dischargers permit numbers.

Existing Discharge Design Flow	0.75	MGD	Note: The flow rates given should be those requested for modeling.
Proposed Discharge Design Flow	0.75	MGD	

Comments included Yes No

Information Verified By: JMD
Year File Was Created:
Response ID Number: 1603

Lat/Long Method: Municipal/Industrial

12 Digit HUC Code	031501090502
Use Classification	F&W
Site Visit Completed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Waterbody Impaired?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Antidegradation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Waterbody Tier Level	Tier I
Use Support Category	3

Date of Site Visit	2/27/2017
Date of WLA Response	4/19/2017
Approved TMDL?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Approval Date of TMDL	

Waste Load Allocation Information

Modeled Reach Length	3.29	Miles	Date of Allocation	4/12/2017
Name of Model Used	SWQM		Allocation Type	2 Seasons
Model Completed by	Jessica Delgado		Type of Model Used	Desk-top
Allocation Developed by	Water Quality Branch			

Waste Load Allocation Summary

Annual Effluent Limits	Conventional Parameters				Other Parameters							
	Qw	0.75	MGD		Qw	0.75	MGD		Qw	MGD	Qw	MGD
	Season	Summer		Season	Winter		Season			Season		
	From	May		From	Dec		From			From		
	Through	Nov		Through	Apr		Through			Through		
CBOD5	CBOD5	10	mg/L	CBOD5	25	mg/L	TP			TP		
NH3-N	NH3-N	1.9	mg/L	NH3-N	7	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	Monthly (Apr-Oct)		
		NO2+NO3-N	Monthly (Apr-Oct)		
		TP	Monthly (Apr-Oct)		

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	30	°C	20	°C	
pH	7	su	7	su	

Hydrology at Discharge Location

Drainage Area Qualifier	Drainage Area	53.02	sq mi	Method Used to Calculate
Estimated	Stream 7Q10	1.52	cfs	ADEM Estimate w/USGS Gage Data
	Stream 1Q10	1.14	cfs	75% of 7Q10
	Stream 7Q2	8.78	cfs	ADEM Estimate w/USGS Gage Data
	Annual Average	72.11	cfs	ADEM Estimate w/USGS Gage Data

Comments and/or Notations - Dadeville WWTP currently discharges to Chattasofka Creek UT. This WLA request and response is for a proposed discharge to Chattasofka Creek.
 - NH3-N is water quality based

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$						Enter Max Daily Discharge as Reported by Applicant (C _d) Max	Enter Avg Daily Discharge by Applicant (C _d) Avg	Partition Coefficient (Stream / Lake)
ID	Pollutant	Carcinogen? Yes	Type	Background from upstream source (C _{d2}) Daily Max	Background from upstream source (C _{d2}) Monthly Avg	Background Instream (C _s) Daily Max	Background Instream (C _s) Monthly Avg	
1	Atrinyon		Metals	0	0	0	0	0.4
2	Arsenic**	YES	Metals	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0
4	Cadmium**		Metals	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	0
7	Copper**		Metals	0	0	0	0	21.5
8	Lead**		Metals	0	0	0	0	11,094.2
9	Mercury**		Metals	0	0	0	0	0.206
10	Nickel**		Metals	0	0	0	0	0.0122
11	Selenium		Metals	0	0	1.379	0.9925	0.0637
12	Silver		Metals	0	0	0	0	0
13	Thallium		Metals	0	0	0	0	0
14	Zinc**		Metals	0	0	0	0	116
15	Cyanide		Metals	0	0	0	0	50.4
16	Total Phenolic Compounds		Metals	0	0	0	0	0.330
17	Hardness (As CaCO3)		Metals	0	0	0	0	51000
18	Acrolein		VOC	0	0	0	0	38100
19	Acrylonitrile*	YES	VOC	0	0	0	0	0
20	Aldrin	YES	VOC	0	0	0	0	0
21	Benzene*	YES	VOC	0	0	0	0	0
22	Bromoform*	YES	VOC	0	0	0	0	0
23	Carbon Tetrachloride*	YES	VOC	0	0	0	0	0
24	Chlordane	YES	VOC	0	0	0	0	0
25	Chlorobenzene		VOC	0	0	0	0	0
26	Chlorobromo-Methane*	YES	VOC	0	0	0	0	0
27	Chloroethane		VOC	0	0	0	0	0
28	1,2-Dichloro-Ethyl Ether		VOC	0	0	0	0	0
29	ChloroForm*	YES	VOC	0	0	0	0	0
30	4,4'-DDD	YES	VOC	0	0	0	0	0
31	4,4'-DDE	YES	VOC	0	0	0	0	0
32	4,4'-DDT	YES	VOC	0	0	0	0	0
33	Dichlorobromo-Methane*	YES	VOC	0	0	0	0	0
34	1,1-Dichloroethane		VOC	0	0	0	0	0
35	1,2-Dichloroethane*	YES	VOC	0	0	0	0	0
36	Trans-1,2-Dichloro-Ethylene		VOC	0	0	0	0	0
37	1,1-Dichloroethylene*	YES	VOC	0	0	0	0	0
38	1,2-Dichloropropane		VOC	0	0	0	0	0
39	1,3-Dichloro-Propylene		VOC	0	0	0	0	0
40	Dieldrin	YES	VOC	0	0	0	0	0
41	Ethylbenzene		VOC	0	0	0	0	0
42	Methyl Bromide		VOC	0	0	0	0	0
43	Methyl Chloride		VOC	0	0	0	0	0
44	Methylene Chloride*	YES	VOC	0	0	0	0	0
45	1,1,1,2-Tetrachloro-Ethane*	YES	VOC	0	0	0	0	0
46	Tetrachloro-Ethylene*	YES	VOC	0	0	0	0	0
47	Toluene		VOC	0	0	0	0	0
48	Toxaphene	YES	VOC	0	0	0	0	0
49	Tributyltin (TBT)	YES	VOC	0	0	0	0	0
50	1,1,1-Trichloroethane		VOC	0	0	0	0	0
51	1,1,2-Trichloroethane*	YES	VOC	0	0	0	0	0
52	Trichloroethylene*	YES	VOC	0	0	0	0	0
53	Vinyl Chloride*	YES	VOC	0	0	0	0	0
54	p-Chloro-M-Cresol		Acids	0	0	0	0	0
55	2-Chlorophenol		Acids	0	0	0	0	0
56	2,4-Dichlorophenol		Acids	0	0	0	0	0
57	2,4-Dimethylphenol		Acids	0	0	0	0	0
58	6-Dinitro-C-Cresol		Acids	0	0	0	0	0
59	2,4-Dinitrophenol		Acids	0	0	0	0	0
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0
62	2-Nitrophenol		Acids	0	0	0	0	0
63	4-Nitrophenol		Acids	0	0	0	0	0
64	Pentachlorophenol*	YES	Acids	0	0	0	0	0
65	Phenol		Acids	0	0	0	0	0
66	2,4,6-Trichlorophenol*	YES	Acids	0	0	0	0	0
67	Acenaphthene		Bases	0	0	0	0	0
68	Acenaphthylene		Bases	0	0	0	0	0
69	Anthracene		Bases	0	0	0	0	0
70	Benzo(a)anthracene*	YES	Bases	0	0	0	0	0
71	Benzo(a)fluoranthene*	YES	Bases	0	0	0	0	0
72	Benzo(a)pyrene*	YES	Bases	0	0	0	0	0
73	3,4-Benzo-Fluoranthene		Bases	0	0	0	0	0
74	Benzo(ghi)perylene		Bases	0	0	0	0	0
75	Benzo(k)fluoranthene		Bases	0	0	0	0	0
76	Bis (2-Chlorophenoxy) Methane		Bases	0	0	0	0	0
77	Bis (2-Chloroethyl) Ether*	YES	Bases	0	0	0	0	0
78	Bis (2-Chloroisopropyl) Ether		Bases	0	0	0	0	0
79	Bis (2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	0
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0
82	2-Chloroaniline		Bases	0	0	0	0	0
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0
84	Chrysene*	YES	Bases	0	0	0	0	0
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0
87	Dibenzo(a,h)Anthracene*	YES	Bases	0	0	0	0	0
88	1,2-Dichlorobenzene		Bases	0	0	0	0	0
89	1,3-Dichlorobenzene		Bases	0	0	0	0	0
90	1,4-Dichlorobenzene		Bases	0	0	0	0	0
91	3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	0
92	Diethyl Phthalate		Bases	0	0	0	0	0
93	Dimethyl Phthalate		Bases	0	0	0	0	0
94	2,4-Dinitrotoluene*	YES	Bases	0	0	0	0	0
95	2,6-Dinitrotoluene		Bases	0	0	0	0	0
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0
97	Endosulfan (alpha)	YES	Bases	0	0	0	0	0
98	Endosulfan (beta)	YES	Bases	0	0	0	0	0
99	Endosulfan sulfate	YES	Bases	0	0	0	0	0
100	Endrin	YES	Bases	0	0	0	0	0
101	Endrin Aldehyde	YES	Bases	0	0	0	0	0
102	Fluoranthene		Bases	0	0	0	0	0
103	Fluorene		Bases	0	0	0	0	0
104	Heptachlor	YES	Bases	0	0	0	0	0
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0
106	Hexachlorobenzene*	YES	Bases	0	0	0	0	0
107	Hexachlorobutadiene*	YES	Bases	0	0	0	0	0
108	Hexachlorocyclohexane (alpha)	YES	Bases	0	0	0	0	0
109	Hexachlorocyclohexane (beta)	YES	Bases	0	0	0	0	0
110	Hexachlorocyclohexane (gamma)	YES	Bases	0	0	0	0	0
111	Hexachlorocyclopentadiene		Bases	0	0	0	0	0
112	Hexachloroethane		Bases	0	0	0	0	0
113	Indeno(1,2,3-cg)Pyrene*	YES	Bases	0	0	0	0	0
114	Isothiazole		Bases	0	0	0	0	0
115	Naphthalene		Bases	0	0	0	0	0
116	Nitrobenzene		Bases	0	0	0	0	0
117	N-Nitrosodi-N-Propylamine*	YES	Bases	0	0	0	0	0
118	N-Nitrosodi-N-Methylamine*	YES	Bases	0	0	0	0	0
119	N-Nitrosodi-N-Phenylamine*	YES	Bases	0	0	0	0	0
120	PCB-1016	YES	Bases	0	0	0	0	0
121	PCB-1221	YES	Bases	0	0	0	0	0
122	PCB-1232	YES	Bases	0	0	0	0	0
123	PCB-1242	YES	Bases	0	0	0	0	0
124	PCB-1248	YES	Bases	0	0	0	0	0
125	PCB-1254	YES	Bases	0	0	0	0	0
126	PCB-1260	YES	Bases	0	0	0	0	0
127	Phenanthrene		Bases	0	0	0	0	0
128	Pyrene		Bases	0	0	0	0	0
129	1,2,4-Trichlorobenzene		Bases	0	0	0	0	0

0.75	Enter Q _d = wastewater discharge flow from facility (MGD)
1.16042175	Q _d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q _{d2} = background stream flow in MGD above point of discharge
0	Q _{d2} = background stream flow from upstream source (cfs)
1.52	Enter 7Q10, Q _s = background stream flow in cfs above point of discharge
1.14	Enter or estimated, 1Q10, Q _s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
72.11	Enter Mean Annual Flow, Q _s = background stream flow in cfs above point of discharge
8.78	Enter 7Q2, Q _s = background stream flow in cfs above point of discharge (For LWF class streams)
Enter to Left	Enter C _s = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q _d + Q _{d2} + Q _s	Q _s = resultant in-stream flow, after discharge
Calculated on other	C _s = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
31	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

January 23, 2024

Freshwater F&W classification				Freshwater Acute (µg/l) C ₀ = 10D10				Freshwater Chronic (µg/l) C ₀ = 7Q10				Human Health Consumption Fish only (µg/l)							
ID	Pollutant	RP7	Carcinogen yes	Background from upstream source (C ₀) Daily Max	Max Daily Discharge as reported by Applicant (C _{max})	Water Quality Criteria (C ₀)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP7	Background from upstream source (C ₀) Monthly Ave	Avg Daily Discharge as reported by Applicant (C _{avg})	Water Quality Criteria (C ₀)	Draft Permit Limit (C _{avg})	20% of Draft Permit Limit	RP7	Water Quality Criteria (C ₀)	Draft Permit Limit (C _{avg})	20% of Draft Permit Limit	RP7
1	Antimony		YES	0	0.4	562.334	1174.245	234.849	No	0	0.4	261.324	603.624	120.725	No	3.73E+02	8.62E+02	1.72E+02	No
2	Arsenic		YES	0	0	18.000	31.718	6.344	No	0	0	11.000	25.409	5.082	No	3.03E-01	1.91E+01	3.83E+00	No
3	Beryllium			0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
4	Cadmium			0	0	2.723	5.410	1.082	No	0	0	0.481	1.066	0.213	No	0	0	0	No
5	Chromium Chromium III			0	0	1039.682	2051.067	412.213	No	0	0	189.241	312.390	62.476	No	0	0	0	No
6	Chromium Chromium VI			0	0	18.000	31.718	6.344	No	0	0	11.000	25.409	5.082	No	0	0	0	No
7	Copper	YES		0	21.5	11.489	22.777	4.555	Yes	0	11.0042	8.485	19.599	3.920	Yes	0	0	0	No
8	Lead			0	0	85.620	170.129	34.026	No	0	0	3.344	7.725	1.545	No	0	0	0	No
9	Mercury			0	0.0122	2.400	4.756	0.952	No	0	0.0037	0.012	0.028	0.006	No	4.24E-02	9.60E-02	1.96E-02	No
10	Nickel			0	0	344.243	682.428	136.486	No	0	0	38.235	88.317	17.663	No	9.93E+02	2.29E+03	4.59E+02	No
11	Selenium			0	0	20.000	38.293	7.659	No	0	0	5.000	10.904	2.181	No	2.43E+03	5.61E+03	1.12E+03	No
12	Silver			0	0	0.429	0.851	0.170	No	0	0	0	0	0	No	0	0	0	No
13	Thallium			0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
14	Zinc	YES		0	116	131.635	260.954	52.191	Yes	0	50.4	132.712	306.547	61.309	No	1.49E+04	3.44E+04	6.88E+03	No
15	Cyanide			0	0	22.000	43.613	8.723	No	0	0	5.200	12.011	2.402	No	6.33E+03	2.16E+04	4.31E+03	No
16	Total Phenolic Compounds			0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
17	Hardness (As CaCO3)			0	51000	0	0	0	No	0	36100	0	0	0	No	0	0	0	No
18	Acrolein			0	0	0	0	0	No	0	0	0	0	0	No	5.43E+00	1.25E+01	2.51E+00	No
19	Acrylonitrile			0	0	0	0	0	No	0	0	0	0	0	No	1.44E-01	9.09E+00	1.82E+00	No
20	Aldrin	YES		0	0	13.000	9.947	1.189	No	0	0	0	0	0	No	2.04E-05	1.89E-03	3.71E-04	No
21	Benzene	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.65E-01	1.77E+01	3.55E+00	No
22	Bromobenzene	YES		0	0	0	0	0	No	0	0	0	0	0	No	7.88E+00	4.97E+03	9.95E+02	No
23	Carbon Tetrachloride	YES		0	0	0	0	0	No	0	0	0	0	0	No	9.07E-01	8.04E+01	1.21E+01	No
24	Chlordane	YES		0	0	7.400	4.758	0.952	No	0	0	0.0643	0.010	0.002	No	1.75E-04	2.99E-02	5.97E-03	No
25	Chlorobenzene	YES		0	0	0	0	0	No	0	0	0	0	0	No	9.06E+02	2.09E+03	4.19E+02	No
26	Chlorobromo-Methane	YES		0	0	0	0	0	No	0	0	0	0	0	No	7.41E+00	4.68E+02	9.35E+01	No
27	Chloroethane	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
28	Chloro-Ethylvinyl Ether	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
29	Chloroform	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.02E+02	6.44E+03	1.29E+03	No
30	4,4'-DDD	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.31E+01	1.15E+02	2.29E+03	No
31	4,4'-DDE	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.26E-04	8.08E-03	1.62E-03	No
32	4,4'-DDT	YES		0	0	1.100	2.181	0.436	No	0	0	0.001	0.002	0.000	No	1.2E-04	8.08E-03	1.62E-03	No
33	Dichlorobromo-Methane	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.00E+01	6.34E+02	1.27E+02	No
34	1,1-Dichloroethane	YES		0	0	0	0	0	No	0	0	0	0	0	No	2.14E+01	1.35E+03	2.70E+02	No
35	1,2-Dichloroethane	YES		0	0	0	0	0	No	0	0	0	0	0	No	5.91E+03	1.36E+04	2.73E+03	No
36	Trans-1,2-Dichloro-Ethylene	YES		0	0	0	0	0	No	0	0	0	0	0	No	8.17E+03	2.63E+05	5.26E+04	No
37	1,1-Dichloroethylene	YES		0	0	0	0	0	No	0	0	0	0	0	No	8.48E+03	1.96E+01	3.92E+00	No
38	1,2-Dichloropropane	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.23E+01	2.84E+01	5.67E+00	No
39	1,3-Dichloro-Propylene	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
40	Dieldrin	YES		0	0	0.240	0.476	0.095	No	0	0	0.056	0.129	0.026	No	3.12E-03	1.97E+03	3.94E+04	No
41	Ethylbenzene	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.24E+03	2.87E+03	5.75E+02	No
42	Methyl Bromide	YES		0	0	0	0	0	No	0	0	0	0	0	No	8.71E+02	2.01E+03	4.02E+02	No
43	Methyl Chloride	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
44	Methylene Chloride	YES		0	0	0	0	0	No	0	0	0	0	0	No	3.46E+02	2.18E+04	4.37E+03	No
45	1,1,2,2-Tetrachloro-Ethane	YES		0	0	0	0	0	No	0	0	0	0	0	No	2.33E+00	1.47E+02	2.95E+01	No
46	Tetrachloro-Ethylene	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.92E+03	1.21E+01	2.42E+01	No
47	Toluene	YES		0	0	0	0	0	No	0	0	8.72E+03	2.01E+04	4.03E+03	No	0	0	0	No
48	Tosaphene	YES		0	0	0.730	1.447	0.289	No	0	0	0.0602	0.000	0.000	No	1.82E-04	1.02E-02	2.04E-03	No
49	Tributyltin (TBT)	YES		0	0	0.460	0.912	0.182	No	0	0	0.072	0.166	0.033	No	0	0	0	No
50	1,1,1-Trichloroethane	YES		0	0	0	0	0	No	0	0	0	0	0	No	9.10E+00	5.74E+02	1.15E+02	No
51	1,1,2-Trichloroethane	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.75E+01	1.10E+03	2.21E+02	No
52	Trichloroethylene	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.47E+00	8.96E+01	1.80E+01	No
53	Vinyl Chloride	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
54	p-Chloro-m-Cresol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
55	2-Chlorophenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
56	2,4-Dichlorophenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
57	2,4-Dimethylphenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
58	4,6-Dinitro-o-Cresol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
59	2,4-Dinitrophenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
60	4,6-Dinitro-2-methylphenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
61	Dioxin (2,3,7,8-TCDD)	YES		0	0	0	0	0	No	0	0	0	0	0	No	2.67E-08	1.69E-06	3.37E-07	No
62	2-Nitrophenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
63	4-Nitrophenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
64	Pentachlorophenol	YES		0	0	0.722	17.293	3.459	No	0	0	6.693	15.459	3.092	No	1.77E+00	1.12E+02	2.23E+01	No
65	Phenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	3.00E+05	1.15E+06	2.31E+05	No
66	2,4,6-Trichlorophenol	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.91E+00	8.93E+01	1.79E+01	No
67	Acenaphthene	YES		0	0	0	0	0	No	0	0	0	0	0	No	5.78E+02	1.34E+03	2.67E+02	No
68	Acenaphthylene	YES		0	0	0	0	0	No	0	0	0	0	0	No	0	0	0	No
69	Anthracene	YES		0	0	0	0	0	No	0	0	0	0	0	No	2.33E+04	5.39E+04	1.08E+04	No
70	Benzo(a)Anthracene	YES		0	0	0	0	0	No	0	0	0	0	0	No	1.16E-04	2.68E-04	5.3	

Permit Number: AL0063797

Monitoring Point: 001Q

Stage: Effluent Gross Value

Parameter Name: Total Recoverable Zinc

Parameter Code: 01094

Monitoring Period	Monthly Average	Daily Maximum	Conc. Unit
October 2018 - December 2018	116	116	µg/L
January 2019- March 2019	31.6	31.6	µg/L
April 2019 - June 2019	60.9	60.9	µg/L
July 2019 - September 2019	43.7	43.7	µg/L
October 2019 - December 2019	22.7	22.7	µg/L
January 2020 - March 2020	55.1	55.1	µg/L
April 2020 - June 2020	45.5	45.5	µg/L
July 2020 - September 2020	61.4	61.4	µg/L
October 2020 - December 2020	23.1	23.1	µg/L
January 2021 - March 2021	35.5	35.5	µg/L
April 2021- June 2021	43.8	43.8	µg/L
July 2021 - September 2021	41.5	41.5	µg/L
October 2021 - December 2021	73.7	73.7	µg/L
January 2022 - March 2022	51.2	51.2	µg/L
April 2022- June 2022	54.2	54.2	µg/L
July 2022 - September 2022	50.6	50.6	µg/L
October 2022 - December 2022	49.5	49.5	µg/L
January 2023 - March 2023	43.4	43.4	µg/L
April 2023- June 2023	35.4	35.4	µg/L
July 2023 - September 2023	50.9	50.9	µg/L
October 2023 - December 2023	45.2	45.2	µg/L
Application	58.2	69.8	µg/L
Application	58.2		µg/L
Application	58.2		µg/L
<i>Average</i>	50.3958		µg/L
<i>Maximum</i>		116	µg/L

Permit Number: AL0063797

Monitoring Point: 001Q

Stage: Effluent Gross Value

Parameter Name: Total Recoverable Copper

Parameter Code: 01119

Monitoring Period	Monthly Average	Daily Maximum	Conc. Unit
October 2018 - December 2018	18.8	18.8	µg/L
January 2019- March 2019	8.8	8.8	µg/L
April 2019 - June 2019	10.4	10.4	µg/L
July 2019 - September 2019	18.1	18.1	µg/L
October 2019 - December 2019	17	17	µg/L
January 2020 - March 2020	14.5	14.5	µg/L
April 2020 - June 2020	5.7	5.7	µg/L
July 2020 - September 2020	19.4	19.4	µg/L
October 2020 - December 2020	13.3	13.3	µg/L
January 2021 - March 2021	9.2	9.2	µg/L
April 2021- June 2021	3.8	3.8	µg/L
July 2021 - September 2021	10	10	µg/L
October 2021 - December 2021	11.8	11.8	µg/L
January 2022 - March 2022	12.9	12.9	µg/L
April 2022- June 2022	6.4	6.4	µg/L
July 2022 - September 2022	5.3	5.3	µg/L
October 2022 - December 2022	14.1	14.1	µg/L
January 2023 - March 2023	8.1	8.1	µg/L
April 2023- June 2023	5.5	5.5	µg/L
July 2023 - September 2023	0	0	µg/L
October 2023 - December 2023	4.8	4.8	µg/L
Application	15.4	21.5	µg/L
Application	15.4		µg/L
Application	15.4		µg/L
<i>Average</i>	11.0042		µg/L
<i>Maximum</i>		21.5	µg/L

Permit Number: AL0063797

Monitoring Point: 001Q

Stage: Effluent Gross Value

Parameter Name: Total Recoverable Mercury

Parameter Code: 71901

Monitoring Period	Monthly Average	Daily Maximum	Conc. Unit
October 2018 - December 2018	0.00374	0.00374	µg/L
January 2019- March 2019	0.00895	0.00895	µg/L
April 2019 - June 2019	0.00225	0.00225	µg/L
July 2019 - September 2019	0.00292	0.00292	µg/L
October 2019 - December 2019	0.0122	0.0122	µg/L
January 2020 - March 2020	0.00548	0.00548	µg/L
April 2020 - June 2020	0.00197	0.00197	µg/L
July 2020 - September 2020	0.00225	0.00225	µg/L
October 2020 - December 2020	0.00475	0.00475	µg/L
January 2021 - March 2021	0.00159	0.00159	µg/L
April 2021- June 2021	0.00124	0.00124	µg/L
July 2021 - September 2021	0.00108	0.00108	µg/L
October 2021 - December 2021	0.00281	0.00281	µg/L
January 2022 - March 2022	0.00338	0.00338	µg/L
April 2022- June 2022	0	0	µg/L
July 2022 - September 2022	0.00091	0.00091	µg/L
October 2022 - December 2022	0.00144	0.00144	µg/L
January 2023 - March 2023	0.00166	0.00166	µg/L
April 2023- June 2023	0.00175	0.00175	µg/L
July 2023 - September 2023	0.00112	0.00112	µg/L
October 2023 - December 2023	0.0014	0.0014	µg/L
Application	0.00873	0.0104	µg/L
Application	0.00873	0.0104	µg/L
Application	0.00873	0.0104	µg/L
<i>Average</i>	0.0037		µg/L
<i>Maximum</i>		0.0122	µg/L

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

version 1.10

(Submission #: HPH-YCRK-J0KSC, version 1)

Digitally signed by:
AEPACS
Date: 2023.03.01 07:36:46-06:00
Reason: Copy Of Record
Location: State of Alabama

Details

Submission ID HPH-YCRK-J0KSC

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

AL0063797

Current Permittee Name

City of Dadeville

Permittee

Permittee Name

Waterworks and Sewage Board of the City of Dadeville

Mailing Address

826 E COLUMBUS ST

DADEVILLE, AL 36853

Is the Operator the same as the Permittee?

Yes

Has the Operator's scope of responsibility changed?

No

Responsible Official

Prefix

Mr.

First Name

Mike

Last Name

Ingram

Title

Superintendent/Registered Agent

Organization Name

Waterworks and Sewage Board of the City of Dadeville

Phone Type

Number

Extension

Business

256-825-5004

Mobile

256-596-0212

Other

256-825-5001

Email

mayor.ingram@gmail.com

Mailing Address

826 East Columbus Street

Dadeville, AL 36853

Existing Permit Contacts

Affiliation Type	Contact Information	Remove?
Permittee	City of Dadeville	Remove

Affiliation Type	Contact Information	Remove?
Emergency Contact,DMR Contact	Jason Buivids, City of Dadeville	NONE PROVIDED
Responsible Official,Notification Recipient	Mike Ingram, City of Dadeville	Remove

Facility/Site Information

Facility/Site Name

Dadeville 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

475 BUCK ST

Dadeville Wastewater Treatment Plant

DADEVILLE, AL 36853

Facility/Site County

Tallapoosa

Facility/Site Contact

Prefix

Mr.

First Name

Victor Jason

Last Name

Buivids

Title

Superintendent

Organization Name

Dadeville WWTP for Waterworks and Sewage Board of the City of Dadeville

Phone Type

Business

Number

256-825-7355

Extension

Mobile

256-750-0935

Email

wwtpjason@gmail.com.

Note

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

Detailed Directions to the Facility/Site

Turn off of Hwy. 280 onto North Broadnax Street go 0.6 miles, turn left onto East South Street go 0.4 miles, turn right onto Herren Street go 0.5 miles, and turn right onto Buck Street go 0.3 miles to the Dadeville WWTP.

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

[Map Instruction Help](#)

Facility/Site Front Gate Latitude and Longitude

32.81695000000000,-85.76004399999999

Primary SIC Code

4952-Sewerage Systems

Primary NAICS Code

221320-Sewage Treatment Facilities

Emergency Contact

Prefix

Mr.

First Name Last Name

Jeffrey Williams

Title

Operator Intern

Phone Type Number Extension

Business 256-825-7355

Mobile 256-307-3224

Email

wwtpjefftw@gmail.com

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?

No

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?

0.750

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

0.327

Process Flow Schematic

[CCF_000084.pdf - 06/07/2022 12:25 PM](#)

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	N/A
Automatic Sampling Equipment	N/A

Schematic Diagram

[CCF_000085.pdf - 06/07/2022 12:50 PM](#)

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

Ultraviolet Light Disinfection

Chlorination

Please select all POTW Treatment Categories that apply.

Activated Sludge Process & Modifications

Aeration

Clarification

Disinfection

Dechlorination

Nitrogen Control (Biological)

Nitrogen Removal (Biological)

Nitrogen Removal (Physical)

Sedimentation

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

Activated Sludge, Conventional

Activated Sludge, Extended Aeration

Please select all unit operations that apply for Aeration:

Aeration (general)

Aeration (pre-treatment)

Aeration (post-treatment)

Please select all unit operations that apply for Clarification:

Clarification, Secondary

Please select all unit operations that apply for Disinfection:

Disinfection, Ultraviolet

Disinfection, Chlorination

Please select all unit operations that apply for Nitrogen Control (Biological):

Nitrification, Biological (Combined and BOD Reduction)

Please select all unit operations that apply for Preliminary Treatment:

Aerated Grit Chambers

Grit Removal

Scum Removal

Screen, Mechanical Bar

Please select all unit operations that apply for Sedimentation:

Sediment Basins

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?

Yes

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

Description of Waste	Description of Storage Location	Disposal Location
Dried Sludge	Dried Sludge Storage Bin. This Storage Bin is walled on three sides and covered. This is for temporary storage of the dried sludge until it is hauled off for land application.	On-site

Collection System Information

Collection Systems

Collection System ID	Collection System Name	Owner Type of Collection System	Population of Collection System
Dadeville WSB	Dadeville WSB	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).	850

Industrial Indirect Discharge Contributors

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

No

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?

Yes

Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced above?

Yes

Does the facility discharge to a Tier II waterbody as defined in ADEM Code r. 335-6-10-.12(4)?

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

[CCF_EPA FORM 2A NPDES.pdf - 02/28/2023 12:39 PM](#)

[CCF_WWTP TOPO.pdf - 03/01/2023 06:45 AM](#)

[CCF_PR Winter.pdf - 03/01/2023 07:16 AM](#)

[CCF_PR Summer.pdf - 03/01/2023 07:16 AM](#)

[CCF_PR Spring.pdf - 03/01/2023 07:16 AM](#)

Comment

NONE PROVIDED

EPA form 2S

[CCF_2022 Beneficial Use Packet Due 2023.pdf - 02/28/2023 02:18 PM](#)

[2022 DSR.pdf - 02/28/2023 03:13 PM](#)

[CCF_000167.pdf - 02/28/2023 03:27 PM](#)

[CCF_WWTP TOPO.pdf - 03/01/2023 06:46 AM](#)

[CCF_BenLandTOPO.pdf - 03/01/2023 06:47 AM](#)

[CCF_Sludge BMP.pdf - 03/01/2023 07:23 AM](#)

[CCF_2021 ERA.pdf - 03/01/2023 07:31 AM](#)

Comment

NONE PROVIDED

Other attachments (as needed)

[PLANT DIAGRAM.pdf - 09/13/2022 01:44 PM](#)

Comment

NONE PROVIDED

Topographic Map

Attach topographic map here.

[TOPO MAP.pdf - 09/13/2022 12:55 PM](#)

Comment

NONE PROVIDED

Engineering Report/BMP Plan Requirements

Engineering Report/BMP Plan Requirements

NONE PROVIDED

Comment

NONE PROVIDED

Outfalls (1 of 3)

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)?

0.327

Receiving Water
Chattasofka 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
32.81575000000000, -85.75953000000000

[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

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

Outfalls (2 of 3)

Outfall: 002

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

Please explain why you're requesting to remove this outfall:
Entered in Error

Outfall Identifier
002

Outfalls (3 of 3)

Outfall: 003

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

Please explain why you're requesting to remove this outfall:
Entered in Error

Outfall Identifier

003

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

Mr.

First Name Last Name

Victor Buivids

Title

Superintendent

Organization Name

Dadeville WWTP

Phone Type Number Extension

Business 256-825-7355

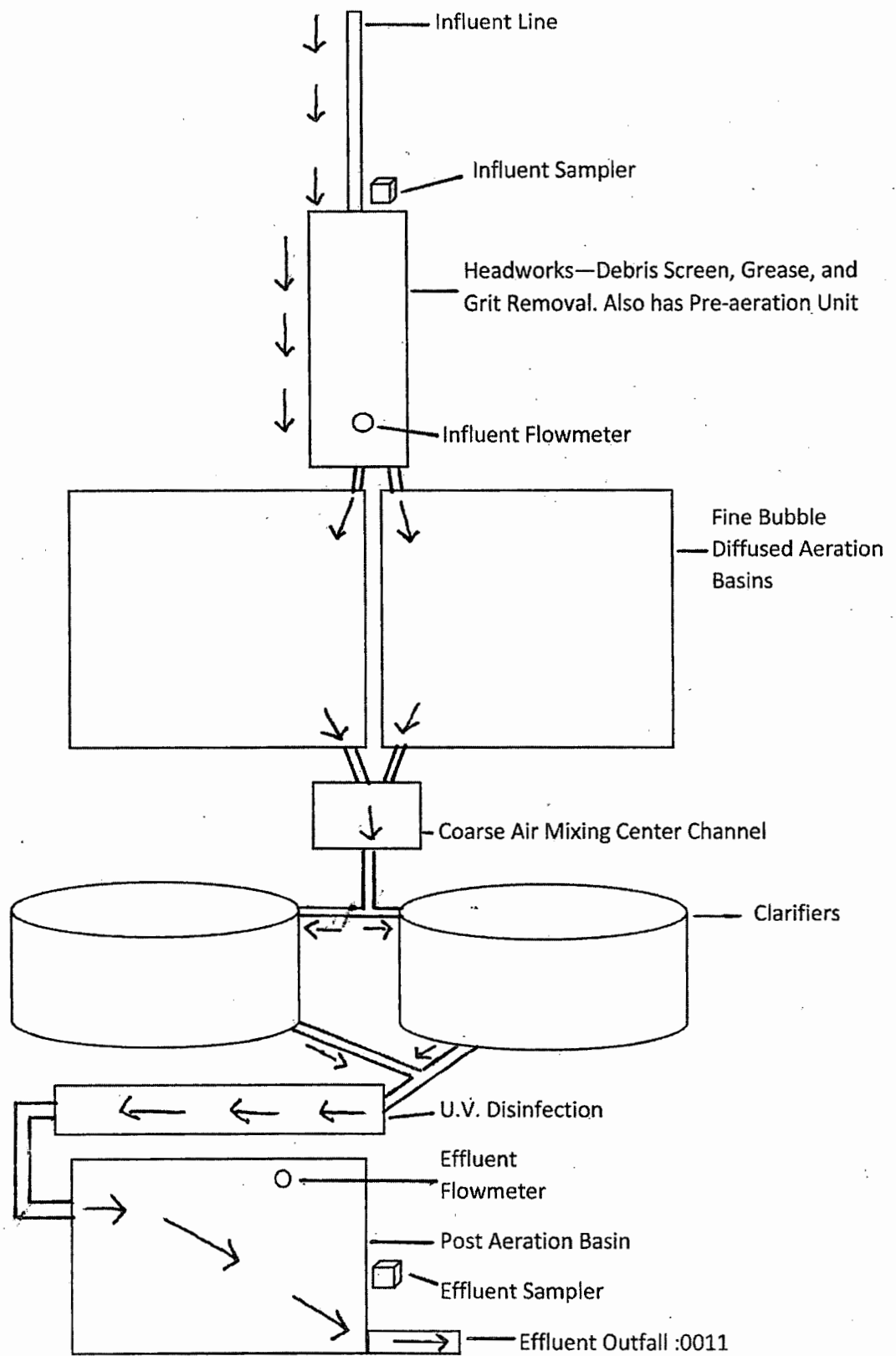
Email

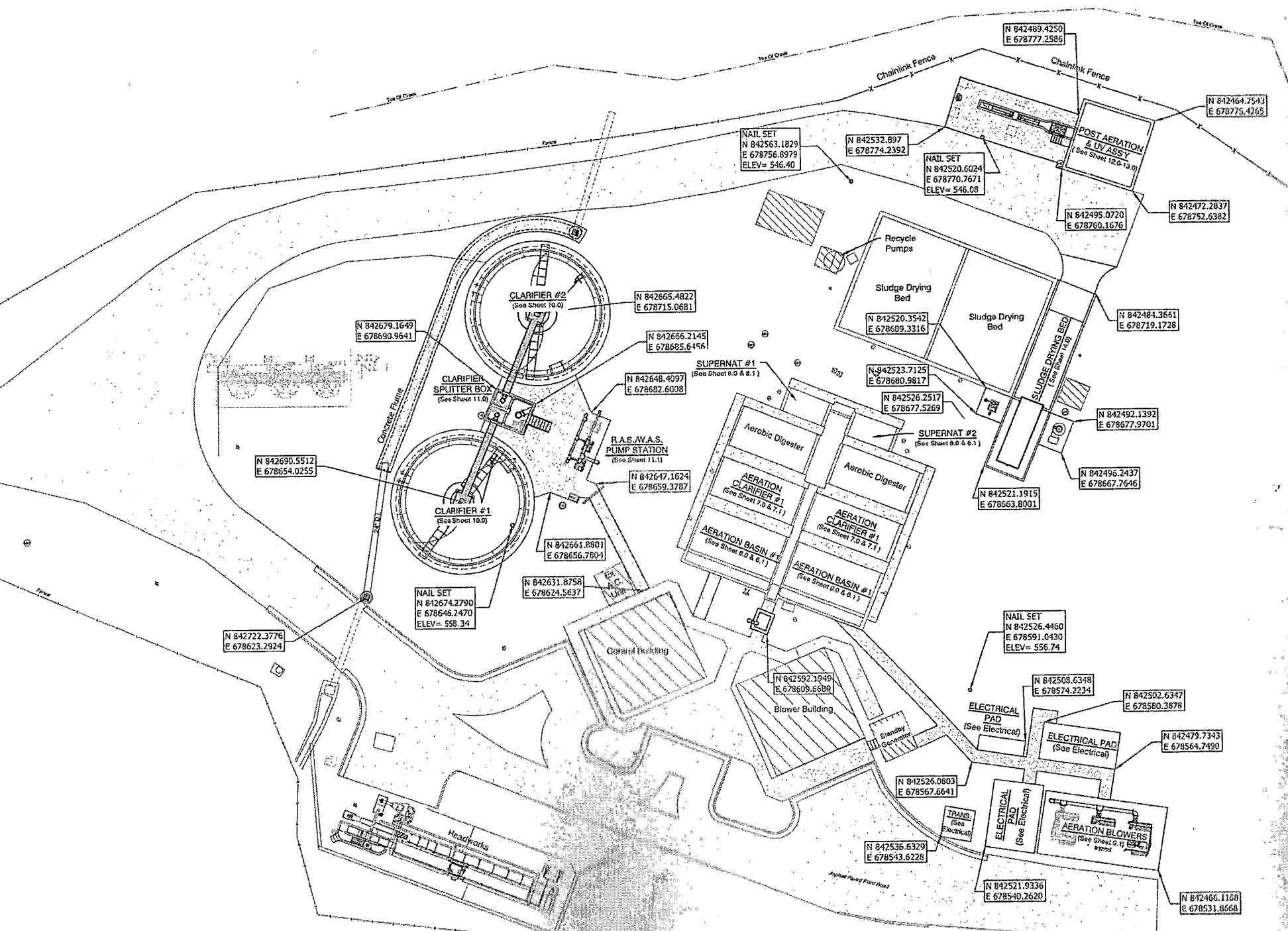
wwtpjason@gmail.com

Address

475 BUCK ST

DADEVILLE, AL 36853





N 842690.5512
E 678654.0255

N 842679.1649
E 678690.9641

NAIL SET
N 842674.2790
E 678646.2470
ELEV= 558.34

N 842661.8901
E 678656.7801

N 842647.1624
E 678659.3787

N 842646.4037
E 678682.6008

N 842665.2145
E 678685.6456

N 842665.4822
E 678715.0681

NAIL SET
N 842563.1829
E 678756.8979
ELEV= 546.40

N 842532.897
E 678774.2392

NAIL SET
N 842520.6024
E 678770.7671
ELEV= 546.08

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E 678680.9817

N 842526.2517
E 678677.5269

N 842521.1915
E 678663.8001

N 842492.1392
E 678677.9701

N 842496.2437
E 678667.7646

NAIL SET
N 842526.4460
E 678591.0430
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N 842508.6348
E 678574.2234

N 842502.6347
E 678580.2678

N 842479.7343
E 678564.7490

N 842526.0803
E 678567.6641

N 842536.6379
E 678543.6228

ELECTRICAL PAD
(See Electrical)

ELECTRICAL PAD
(See Electrical)

ELECTRICAL PAD
(See Electrical)

N 842521.9336
E 678540.2620

N 842466.1169
E 678531.8668

N 842489.4250
E 678777.2586

N 842464.2543
E 678775.4265

N 842495.0720
E 678760.1676

N 842472.2837
E 678752.6382

N 842484.3561
E 678719.1728

POST AERATION & UV ASSY
(See Sheet 12.0-13.0)

N 842520.3542
E 678689.3316

SUPERNAT #2
(See Sheet 8.0 & 6.1)

Recycle Pumps

Sludge Drying Bed

Sludge Drying Bed

SLUDGE DRYING BED
(See Sheet 8.0)

Aerobic Digester

AERATION CLARIFIER #1
(See Sheet 7.0 & 7.1)

AERATION BASIN #1
(See Sheet 6.0 & 6.1)

AERATION CLARIFIER #1
(See Sheet 7.0 & 7.1)

AERATION BASIN #1
(See Sheet 6.0 & 6.1)

SUPERNAT #1
(See Sheet 8.0 & 8.1)

Aerobic Digester

AERATION CLARIFIER #1
(See Sheet 7.0 & 7.1)

AERATION BASIN #1
(See Sheet 6.0 & 6.1)

Control Building

Blower Building

Standy Generator

CLARIFIER SPLITTER BOX
(See Sheet 11.0)

CLARIFIER #1
(See Sheet 10.0)

CLARIFIER #2
(See Sheet 10.0)

Headworks

Concrete Flume

TRANS.
(See Electrical)

ELECTRICAL PAD
(See Electrical)

AERATION BLOWERS
(See Sheet 6.1)

Asphalt Paved Plant Road

Tie to Dam

Tie to Dam

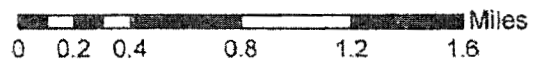
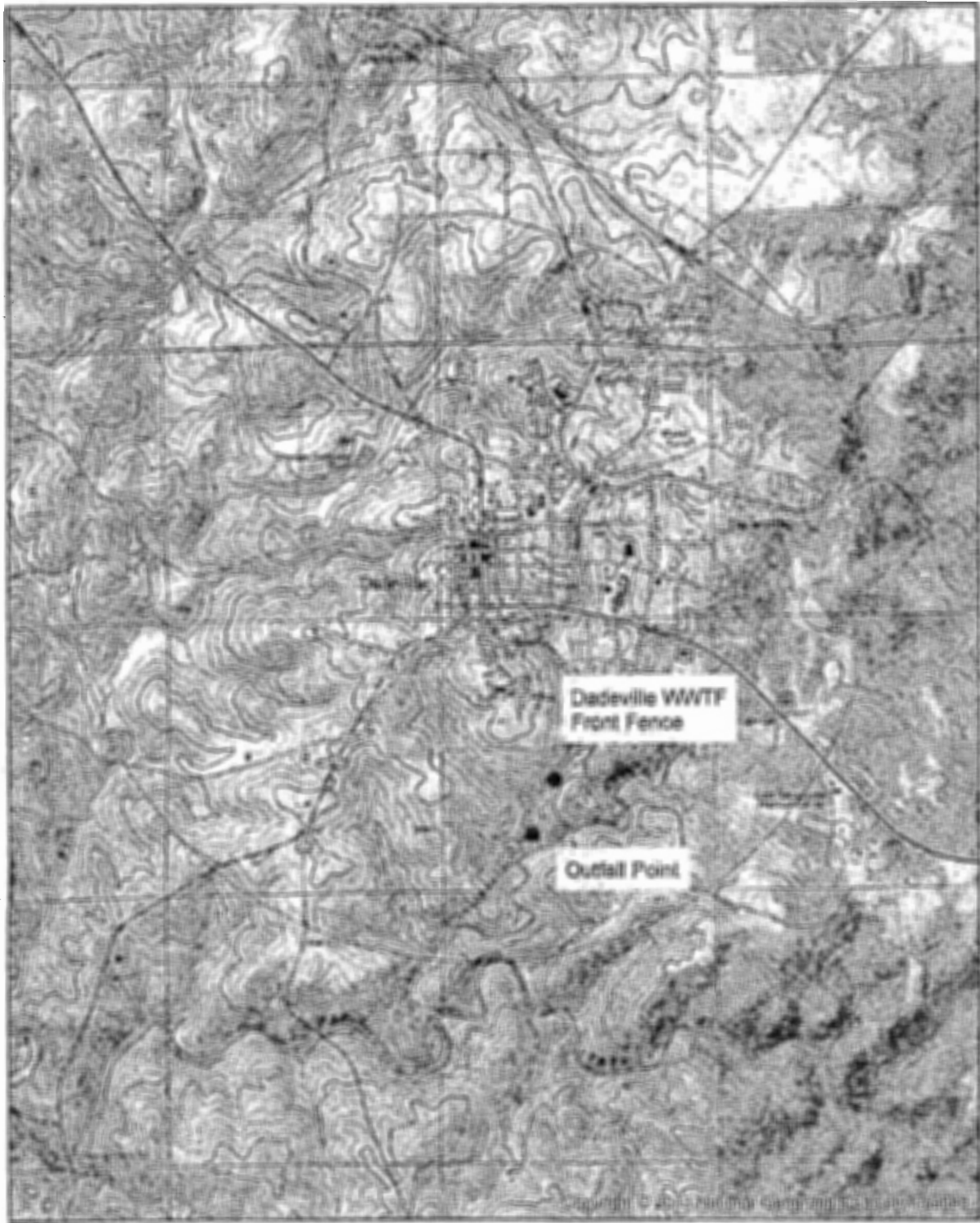
Tie to Dam

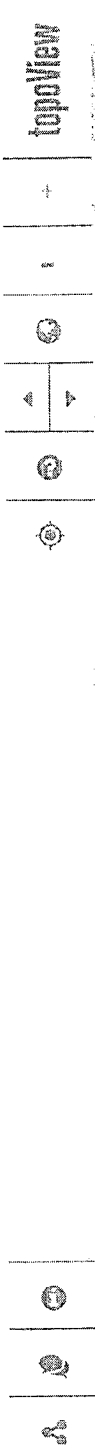
Fence

Chainlink Fence

Chainlink Fence

Dadeville Wastewater Treatment Facility





Location | Map Name

475 Buck St, Dadeville, AL 36...

2023

All 100 500 1000 All

0 records here. Try clearing the time and/or scale filters.

Elevation @ 32.816, -85.76 is 536 ft (163 m)

DADEVILLE WWT P

Lat: 32° 48' 48" N Long: 85° 45' 04" W

DMS DD MGR UTM

Scale 1:12,055

Map Records 0

Partly dig three chance streams and the main stream, 79° near Dadeville, AL.

ALOO63797 DADEVILLE WWTP EFFLUENT DISCHARGE LOCATION: CHATTASOFKA CREEK
Latitude: 32.815556 Longitude: 85.759444



Degrees Minutes Seconds to Decimal Degrees

Enter Degrees Minutes Seconds latitude:

Enter Degrees Minutes Seconds longitude:

Results: Latitude: Longitude:

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Dadeville WWTP Solids Retention Time Averages

****For the year of 2022**

Average lbs. Suspended Solids in System: 15,068 lbs. per day

Average lbs. Wasted Suspended Solids: 1,037 lbs. per day

Average lbs. Suspended Solids in Effluent: 5.05 lbs. per day

15,068 lbs. per day Suspended Solids in System
1037 lbs. per day Wasted + 5.05 lbs. per day in Effluent

15,068 lbs. per day
1042.5 lbs. per day
=
14.5 days Solids Retention Time

****For the year of 2021**

Average lbs. Suspended Solids in System: 13,682 lbs. per day

Average lbs. Wasted Suspended Solids: 1,122 lbs. per day

Average lbs. Suspended Solids in Effluent: 7.43 lbs. per day

13,682 lbs. per day Suspended Solids in System
1122 lbs. per day Wasted + 7.43 lbs. per day in Effluent

13,682 lbs. per day
1129.43 lbs. per day
=
12.1 days Solids Retention Time

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Dadeville WWTP Design Criteria & Loading Information

<u>Design Criteria</u>	<u>Average Design Flow</u>	<u>Average Design CBOD5 Loading (lbs./day)</u>
100%	0.750 MGD	1,251 lbs./day
90%	0.675 MGD	1,126 lbs./day
80%	0.600 MGD	1,001 lbs./day
70%	0.525 MGD	876 lbs./day
60%	0.450 MGD	751 lbs./day
50%	0.375 MGD	626 lbs./day
40%	0.300 MGD	500 lbs./day
30%	0.225 MGD	375 lbs./day

**For the year of 2022

The Dadeville WWTP had an Annual Average Flow of 0.292 MGD

The Dadeville WWTP had an Annual Average Loading CBOD5 of 432 lbs./day Influent

The Dadeville WWTP had an Annual Average Loading CBOD5 of 5.50 lbs./day Effluent

The Dadeville WWTP had an Annual Average T.S.S. of 5.50 lbs./day Effluent

**For the year of 2021

The Dadeville WWTP had an Annual Average Flow of 0.302 MGD

The Dadeville WWTP had an Annual Average Loading CBOD5 of 533 lbs./day Influent

The Dadeville WWTP had an Annual Average Loading CBOD5 of 7.58 lbs./day Effluent

The Dadeville WWTP had an Annual Average T.S.S. of 7.43 lbs./day Effluent

Dadeville WWTP
Aeration Detention Time
By Flow Rate

Aeration Volume: 210,083 Gallons or .210 mg

Flow in MGD	Detention Time
.200	25.20 HOURS
.250	20.16 HOURS
.300	16.80 HOURS
.350	14.40 HOURS
.400	12.60 HOURS
.450	11.20 HOURS
.500	10.08 HOURS
.550	09.16 HOURS
.600	08.40 HOURS
.650	07.75 HOURS
.700	07.20 HOURS
.750	06.72 HOURS
.800	06.30 HOURS

Dadeville WWTP Plant Volume

AERATION BASIN # 1A—51,183 gallons

AERATION BASIN # 2A—51,183 gallons

AERATION BASIN # 1B—45,836 gallons

AERATION BASIN # 2B—45,836 gallons

CENTER CHANNEL-----16,044 gallons

TOTAL: 210,083 gallons

CLARIFIER # 1 -----93,508.5 gallons

CLARIFIER # 2 -----93,508.5 gallons

TOTAL: 187,017 gallons

DIGESTER BASIN # 1A---46,974 gallons

DIGESTER BASIN # 2A---46,974 gallons

DIGESTER BASIN # 1B---12,080 gallons

DIGESTER BASIN # 2B---12,080 gallons

TOTAL: 118,017 gallons

CLARIFIER # 1 WEIR LENGTH: 104 Feet

CLARIFIER # 2 WEIR LENGTH: 104 Feet

TOTAL WEIR: 208 FEET

CLARIFIER # 1 SURFACE AREA: 855 sq ft

CLARIFIER # 2 SURFACE AREA: 855 sq ft

TOTAL IN SQUARE FEET: 1710

CLARIFIER # 1 WEIR LENGTH: 104 Feet

CLARIFIER # 2 WEIR LENGTH: 104 Feet

TOTAL WEIR: 208 FEET

CLARIFIER # 1 SURFACE AREA: 855 sq ft

CLARIFIER # 2 SURFACE AREA: 855 sq ft

TOTAL IN SQUARE FEET: 1710

EPA Identification Number

NPDES Permit Number

Facility Name

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

AL0063797

Dadeville WWTP

Form
2A
NPDESU.S. Environmental Protection Agency
Application for NPDES Permit to Discharge Wastewater
NEW AND EXISTING PUBLICLY OWNED TREATMENT WORKS

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

Facility Information	1.1	Facility name Dadeville WWTP		
		Mailing address (street or P.O. box) 475 Buck Street		
		City or town Dadeville	State Alabama	ZIP code 36853
		Contact name (first and last) Victor Buivids	Title Superintendent	Phone number (256) 825-7355
		Email address wwtpjason@gmail.com		
		Location address (street, route number, or other specific identifier) <input checked="" type="checkbox"/> Same as mailing address		
		City or town	State	ZIP code
	1.2	Is this application for a facility that has yet to commence discharge? <input type="checkbox"/> Yes → See instructions on data submission requirements for new dischargers. <input checked="" type="checkbox"/> No		
Applicant Information	1.3	Is applicant different from entity listed under Item 1.1 above? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 1.4.		
		Applicant name Waterworks and Sewage Board of the City of Dadeville		
		Applicant address (street or P.O. box) 826 East Columbus Street		
		City or town Dadeville	State Alabama	ZIP code 36853
		Contact name (first and last) Mike Ingram	Title WSB Superintendent	Phone number (256) 825-5004
	Email address mayor.Ingram@gmail.com			
	1.4	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Both		
	1.5	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input checked="" type="checkbox"/> Facility <input type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)		
Existing Environmental Permits	1.6	Indicate below any existing environmental permits. (Check all that apply and print or type the corresponding permit number for each.)		
		Existing Environmental Permits		
		<input checked="" type="checkbox"/> NPDES (discharges to surface water) AL0063797	<input type="checkbox"/> RCRA (hazardous waste)	<input type="checkbox"/> UIC (underground injection control)
		<input type="checkbox"/> PSD (air emissions)	<input type="checkbox"/> Nonattainment program (CAA)	<input type="checkbox"/> NESHAPs (CAA)
	<input type="checkbox"/> Ocean dumping (MPRSA)	<input type="checkbox"/> Dredge or fill (CWA Section 404)	<input type="checkbox"/> Other (specify)	

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Collection System and Population Served	1.7	Provide the collection system information requested below for the treatment works.				
	Municipality Served	Population Served	Collection System Type (indicate percentage)		Ownership Status	
	3,100	850	<u>100</u> <u>0</u> <input type="checkbox"/> Unknown	% separate sanitary sewer % combined storm and sanitary sewer	<input checked="" type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input checked="" type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
			_____ _____ <input type="checkbox"/> Unknown	% separate sanitary sewer % combined storm and sanitary sewer	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
			_____ _____ <input type="checkbox"/> Unknown	% separate sanitary sewer % combined storm and sanitary sewer	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
			_____ _____ <input type="checkbox"/> Unknown	% separate sanitary sewer % combined storm and sanitary sewer	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain
	Total Population Served	850				
			Separate Sanitary Sewer System		Combined Storm and Sanitary Sewer	
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.			Design Flow Rate	0.750 mgd
		Annual Average Flow Rates (Actual)				
		Two Years Ago	Last Year		This Year	
		0.351 mgd	0.302 mgd		0.292 mgd	
		Maximum Daily Flow Rates (Actual)				
		Two Years Ago	Last Year		This Year	
1.278 mgd	0.783 mgd		0.769 mgd			
Discharge Points by Type	1.11	Provide the total number of effluent discharge points to waters of the United States by type.				
		Total Number of Effluent Discharge Points by Type				
		Treated Effluent	Untreated Effluent	Combined Sewer Overflows	Bypasses	Constructed Emergency Overflows
001						

Outfalls Other Than to Waters of the United States

Outfalls and Other Discharge or Disposal Methods

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

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

Surface Impoundment Location and Discharge Data

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

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

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

Land Application Site and Discharge Data

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

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

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

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

1.19 Provide information on the transporter below.

Transporter Data

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

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

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

Design Flow	Outfalls to Waters of the United States						
	2.1	Does the treatment works have a design flow greater than or equal to 0.1 mgd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ⇒ SKIP to Section 3.					
Inflow and Infiltration	2.2	Provide the treatment works' current average daily volume of inflow and infiltration.			Average Daily Volume of Inflow and Infiltration 20,000 gpd		
	Indicate the steps the facility is taking to minimize inflow and infiltration. Still rehabilitating the collection system, using video equipment, and smoke testing. Two of the lift stations have been up-graded.						
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.						
Scheduled Improvements and Schedules of Implementation	2.6	Provide scheduled or actual dates of completion for improvements.					
	Scheduled or Actual Dates of Completion for Improvements						
		Scheduled Improvement (from above)	Affected Outfalls (list outfall number)	Begin Construction (MM/DD/YYYY)	End Construction (MM/DD/YYYY)	Begin Discharge (MM/DD/YYYY)	Attainment of Operational Level (MM/DD/YYYY)
		1.					
		2.					
		3.					
	4.						
Scheduled Improvements and Schedules of Implementation	2.7	Have appropriate permits/clearances concerning other federal/state requirements been obtained? Briefly explain your response. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> None required or applicable					
	Explanation:						

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

Description of Outfalls	3.1	Provide the following information for each outfall. (Attach additional sheets if you have more than three outfalls.)		
		Outfall Number 0012	Outfall Number _____	Outfall Number _____
	State	Alabama		
	County	Tallapoosa		
	City or town	Dadeville		
	Distance from shore	25 ft.	ft.	ft.
	Depth below surface	1 ft.	ft.	ft.
	Average daily flow rate	0.315 mgd	mgd	mgd
	Latitude	32° 48' 56"	° ' "	° ' "
	Longitude	-85° 45' 34"	° ' "	° ' "
Seasonal or Periodic Discharge Data	3.2	Do any of the outfalls described under Item 3.1 have seasonal or periodic discharges? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.4.		
	3.3	If so, provide the following information for each applicable outfall.		
		Outfall Number _____	Outfall Number _____	Outfall Number _____
	Number of times per year discharge occurs			
	Average duration of each discharge (specify units)			
	Average flow of each discharge	mgd	mgd	mgd
Months in which discharge occurs				
Diffuser Type	3.4	Are any of the outfalls listed under Item 3.1 equipped with a diffuser? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.6.		
	3.5	Briefly describe the diffuser type at each applicable outfall.		
		Outfall Number _____	Outfall Number _____	Outfall Number _____
Waters of the U.S.	3.6	Does the treatment works discharge or plan to discharge wastewater to waters of the United States from one or more discharge points? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.		

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Receiving Water Description	3.7	Provide the receiving water and related information (if known) for each outfall.		
		Outfall Number <u>0012</u>	Outfall Number _____	Outfall Number _____
	Receiving water name	Chattasofka Creek		
	Name of watershed, river, or stream system	Chattasofka Creek		
	U.S. Soil Conservation Service 14-digit watershed code	AL031501090502		
	Name of state management/river basin	Tallapoosa River/Lake Martin		
	U.S. Geological Survey 8-digit hydrologic cataloging unit code	03150109		
	Critical low flow (acute)	cfs	cfs	cfs
	Critical low flow (chronic)	cfs	cfs	cfs
Total hardness at critical low flow	mg/L of CaCO ₃	mg/L of CaCO ₃	mg/L of CaCO ₃	
Treatment Description	3.8	Provide the following information describing the treatment provided for discharges from each outfall.		
		Outfall Number <u>0012</u>	Outfall Number _____	Outfall Number _____
	Highest Level of Treatment (check all that apply per outfall)	<input type="checkbox"/> Primary <input checked="" 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	<u>0012</u>		
	BOD ₅ or CBOD ₅	>85.0 %	%	%
	TSS	>85.0 %	%	%
	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 type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	<input type="checkbox"/> Not applicable %	

Treatment Description Continued

3.9 Describe the type of disinfection used for the effluent from each outfall in the table below. If disinfection varies by season, describe below.
Ultra Violet Light Disinfection is the main disinfection process used for the Dadeville WWTP Effluent. We still have chlorine tablets and de-chlor tablets on-hand that can be used in case of an emergency.

	Outfall Number 0012	Outfall Number _____	Outfall Number _____
Disinfection type	Ultra Violet Light Disinfection		
Seasons used	Spring/Summer/Fall/Winter		
Dechlorination used?	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not applicable <input type="checkbox"/> Yes <input type="checkbox"/> No

Effluent Testing Data

3.10 Have you completed monitoring for all Table A parameters and attached the results to the application package?
 Yes 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?
 Yes 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
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?
 Yes 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?
 Yes → Complete Table B, including chlorine. 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?
 Yes No

3.16 Does one or more of the following conditions apply?

- The facility has a design flow greater than or equal to 1 mgd.
- The POTW has an approved pretreatment program or is required to develop such a program.
- The NPDES permitting authority has informed the POTW that it must sample for the parameters in Table C, must sample other additional parameters (Table D), or submit the results of WET tests for acute or chronic toxicity for each of its discharge outfalls (Table E).

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

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Industrial Discharges and Hazardous Wastes Continued

4.7	Does the POTW receive, or has it been notified that it will receive, by truck, rail, or dedicated pipe, any wastes that are regulated as RCRA hazardous wastes pursuant to 40 CFR 261? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 4.9.				
4.8	If yes, provide the following information:				
	Hazardous Waste Number	Waste Transport Method (check all that apply)		Annual Amount of Waste Received	Units
		<input type="checkbox"/> Truck	<input type="checkbox"/> Rail		
		<input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Other (specify) _____		
	<input type="checkbox"/> Truck	<input type="checkbox"/> Rail			
	<input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Other (specify) _____			
	<input type="checkbox"/> Truck	<input type="checkbox"/> Rail			
	<input type="checkbox"/> Dedicated pipe	<input type="checkbox"/> Other (specify) _____			
4.9	Does the POTW receive, or has it been notified that it will receive, wastewaters that originate from remedial activities, including those undertaken pursuant to CERCLA and Sections 3004(7) or 3008(h) of RCRA? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 5.				
4.10	Does the POTW receive (or expect to receive) less than 15 kilograms per month of non-acute hazardous wastes as specified in 40 CFR 261.30(d) and 261.33(e)? <input type="checkbox"/> Yes → SKIP to Section 5. <input type="checkbox"/> No				
4.11	Have you reported the following information in an attachment to this application: identification and description of the site(s) or facility(ies) at which the wastewater originates; the identities of the wastewater's hazardous constituents; and the extent of treatment, if any, the wastewater receives or will receive before entering the POTW? <input type="checkbox"/> Yes <input type="checkbox"/> No				

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

CSO Map and Diagram

5.1	Does the treatment works have a combined sewer system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 6.			
5.2	Have you attached a CSO system map to this application? (See instructions for map requirements.) <input type="checkbox"/> Yes <input type="checkbox"/> No			
5.3	Have you attached a CSO system diagram to this application? (See instructions for diagram requirements.) <input type="checkbox"/> Yes <input type="checkbox"/> No			

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

CSO Receiving Waters

5.7	Provide the information in the table below for each of your CSO outfalls.		
		CSO Outfall Number	CSO Outfall Number
	Receiving water name		
	Name of watershed/ stream system		DEC 12 2023
	U.S. Soil Conservation Service 14-digit watershed code (if known)	<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
	Description of known water quality impacts on receiving stream by CSO (see instructions for examples)		

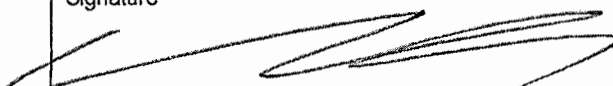
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SECTION 6. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement

6.1	In Column 1 below, mark the sections of Form 2A that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.		
	Column 1	Column 2	
	<input checked="" type="checkbox"/> Section 1: Basic Application Information for All Applicants	<input type="checkbox"/> w/ variance request(s)	<input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/> Section 2: Additional Information	<input checked="" type="checkbox"/> w/ topographic map <input checked="" 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 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		

6.2	Certification Statement	
	<i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
	Name (print or type first and last name) Mike Ingram	Official title Superintendent/Registered Agent
Signature 	Date signed 11/13/2023	

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TABLE A: EFFLUENT PARAMETERS FOR ALL POTWS							
Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Biochemical oxygen demand <input type="checkbox"/> BOD ₅ or <input type="checkbox"/> CBOD ₅ (report one)	15 W/37.5 W	mg/L	3.00	mg/L	3 days per week	5210 B	2.00 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fecal coliform	298 S/2507 W	MPN/100m	12	MPN/100m	3 days per week	9223 B	10 MPN/100m <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Design flow rate	0.750	MGD	0.315	MGD	7 days per week		
pH (minimum)	6.0	S.U.					
pH (maximum)	8.5	S.U.					
Temperature (winter)	N/A	N/A	N/A	N/A	N/A		
Temperature (summer)	N/A	N/A	N/A	N/A	N/A		
Total suspended solids (TSS)	45.0	mg/L	2.75	mg/L	3 days per week	2540 D	2.70 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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

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TABLE B. EFFLUENT PARAMETERS FOR ALL POINTS WITH A FLOW EQUAL TO OR GREATER THAN 0.1 MGD.

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Ammonia (as N)	10.5 W/2.8 S	mg/L	0.225	mg/L	3 days per week	350.1	0.054 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorine (total residual, TRC) ²	0.044	mg/L	N/A	mg/L	3 days per week	500601	N/A <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dissolved oxygen	N/A	mg/L	8.00	mg/L	3 days per week	4500-0-G	N/A <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nitrate/nitrite	Report Only	mg/L	0.750	mg/L	1-day per mo S	353.2	0.0350 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Kjeldahl nitrogen	Report Only	mg/L	1.74	mg/L	1-day per mo S	351.2	0.682 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Oil and grease	N/A	N/A	N/A	N/A	N/A	N/A	N/A <input type="checkbox"/> ML <input type="checkbox"/> MDL
Phosphorus	Report Only	mg/L	1.22	mg/L	1-day per mo S	365.4	0.232 <input type="checkbox"/> ML <input type="checkbox"/> MDL
Total dissolved solids	N/A	N/A	N/A	N/A	N/A	N/A	N/A <input type="checkbox"/> ML <input type="checkbox"/> MDL

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

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

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Metals, Cyanide, and Total Phenols							
Hardness (as CaCO ₃)	51.0	mg/L	38.1	mg/L	3	2340C	5 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Antimony, total recoverable	0.40	ug/L	0.40	ug/L	3	200.7	20 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Arsenic, total recoverable	<0.64	ug/L	<0.64	ug/L	3	200.7	0.64 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Beryllium, total recoverable	<4.0	ug/L	<4.0	ug/L	3	200.7	4.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Cadmium, total recoverable	<4.0	ug/L	<4.0	ug/L	3	200.7	4.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chromium, total recoverable	<7.0	ug/L	<7.0	ug/L	3	200.7	7.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Copper, total recoverable	21.5	ug/L	15.4	ug/L	3	200.7	5.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Lead, total recoverable	<26.0	ug/L	<26.0	ug/L	3	200.8	26.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Mercury, total recoverable	10.4	ng/L	8.73	ng/L	3	1631E	0.19 ng/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nickel, total recoverable	<8.0	ug/L	<8.0	ug/L	3	200.8	8.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Selenium, total recoverable	<26.0	ug/L	<26.0	ug/L	3	200.7	26.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Silver, total recoverable	<8.0	ug/L	<8.0	ug/L	3	200.8	8.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Thallium, total recoverable	<34.0	ug/L	<34.0	ug/L	3	200.7	34.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Zinc, total recoverable	69.8	ug/L	58.2	ug/L	3	200.7	0.9 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Cyanide	<0.004	mg/L	<0.004	mg/L	3	335.4	.004mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Total phenolic compounds	<0.0250	mg/L	<0.0250	mg/L	3	420.1	.0250 mg/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Volatile Organic Compounds							
Acrolein	BMDL	ug/L	BMDL	ug/L	3	624.1	16.1 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Acrylonitrile	BMDL	ug/L	BMDL	ug/L	3	624.1	25.5 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzene	BMDL	ug/L	BMDL	ug/L	3	624.1	1.85 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bromoform	BMDL	ug/L	BMDL	ug/L	3	624.1	3.05 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Carbon tetrachloride	BMDL	ug/L	BMDL	ug/L	3	624.1	2.16 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorobenzene	BMDL	ug/L	BMDL	ug/L	3	624.1	0.7 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorodibromomethane	BMDL	ug/L	BMDL	ug/L	3	624.1	1.8 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chloroethane	BMDL	ug/L	BMDL	ug/L	3	624.1	2.39 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-chloroethylvinyl ether	BMDL	ug/L	BMDL	ug/L	3	624.1	5.09 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chloroform	BMDL	ug/L	BMDL	ug/L	3	624.1	1.59 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dichlorobromomethane	BMDL	ug/L	BMDL	ug/L	3	624.1	0.68 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1-dichloroethane	BMDL	ug/L	BMDL	ug/L	3	624.1	1.94 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2-dichloroethane	BMDL	ug/L	BMDL	ug/L	3	624.1	1.27 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
trans-1,2-dichloroethylene	BMDL	ug/L	BMDL	ug/L	3	624.1	1.17 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1-dichloroethylene	BMDL	ug/L	BMDL	ug/L	3	624.1	0.68 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2-dichloropropane	BMDL	ug/L	BMDL	ug/L	3	624.1	1.8 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,3-dichloropropylene	BMDL	ug/L	BMDL	ug/L	3	624.1	1.05 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Ethylbenzene	BMDL	ug/L	BMDL	ug/L	3	624.1	2.06 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Methyl bromide	No Results	No Results	No Results	No Results	No Results	No Results	No Results <input type="checkbox"/> ML <input type="checkbox"/> MDL
Methyl chloride	BMDL	ug/L	BMDL	ug/L	3	624.1	1.88 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Methylene chloride	BMDL	ug/L	BMDL	ug/L	3	624.1	0.66 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1,2,2-tetrachloroethane	BMDL	ug/L	BMDL	ug/L	3	624.1	0.94 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Tetrachloroethylene	BMDL	ug/L	BMDL	ug/L	3	624.1	0.82 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Toluene	BMDL	ug/L	BMDL	ug/L	3	624.1	1.26 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1,1-trichloroethane	BMDL	ug/L	BMDL	ug/L	3	624.1	2.18 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1,2-trichloroethane	BMDL	ug/L	BMDL	ug/L	3	624.1	0.98 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Trichloroethylene	BMDL	ug/L	BMDL	ug/L	3	624.1	1.5 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Vinyl chloride	BMDL	ug/L	BMDL	ug/L	3	624.1	2.09 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Acid-Extractable Compounds							
p-chloro-m-cresol	No Results	No Results	No Results	No Results	No Results	No Results	No Results <input type="checkbox"/> ML <input type="checkbox"/> MDL
2-chlorophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	8.47 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dichlorophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	9.84 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dimethylphenol	BMDL	ug/L	BMDL	ug/L	3	625.1	9.61 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4,6-dinitro-o-cresol	No Results	No Results	No Results	No Results	No Results	No Results	No Results <input type="checkbox"/> ML <input type="checkbox"/> MDL
2,4-dinitrophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	8.79 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-nitrophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	12.3 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4-nitrophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	8.29 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Pentachlorophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	10.6 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Phenol	BMDL	ug/L	BMDL	ug/L	3	625.1	9.39 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4,6-trichlorophenol	BMDL	ug/L	BMDL	ug/L	3	625.1	8.73 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Base-Neutral Compounds							
Acenaphthene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.79 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Acenaphthylene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.12 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Anthracene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.05 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzidine	BMDL	ug/L	BMDL	ug/L	3	625.1	15.1 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzo(a)anthracene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.81 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzo(a)pyrene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.45 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
3,4-benzofluoranthene	No Results	No Results	No Results	No Results	No Results	No Results	No Results <input type="checkbox"/> ML <input type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POINTS							
Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.45 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzo(k)fluoranthene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.22 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-chloroethoxy) methane	BMDL	ug/L	BMDL	ug/L	3	625.1	6.66 ug/L <input type="checkbox"/> ML <input type="checkbox"/> MDL
Bis (2-chloroethyl) ether	BMDL	ug/L	BMDL	ug/L	3	625.1	8.22 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-chloroisopropyl) ether	BMDL	ug/L	BMDL	ug/L	3	625.1	7.09 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-ethylhexyl) phthalate	BMDL	ug/L	BMDL	ug/L	3	625.1	6.84 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4-bromophenyl phenyl ether	BMDL	ug/L	BMDL	ug/L	3	625.1	9.12 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Butyl benzyl phthalate	BMDL	ug/L	BMDL	ug/L	3	625.1	9.96 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-chloronaphthalene	BMDL	ug/L	BMDL	ug/L	3	625.1	7.80 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4-chlorophenyl phenyl ether	BMDL	ug/L	BMDL	ug/L	3	625.1	9.93 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chrysene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.7 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
di-n-butyl phthalate	BMDL	ug/L	BMDL	ug/L	3	625.1	8.46 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
di-n-octyl phthalate	BMDL	ug/L	BMDL	ug/L	3	625.1	9.50 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dibenzo(a,h)anthracene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.11 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2-dichlorobenzene	BMDL	ug/L	BMDL	ug/L	3	625.1	7.33 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,3-dichlorobenzene	BMDL	ug/L	BMDL	ug/L	3	625.1	7.61 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,4-dichlorobenzene	BMDL	ug/L	BMDL	ug/L	3	625.1	7.58 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
3,3-dichlorobenzidine	BMDL	ug/L	BMDL	ug/L	3	625.1	11.5 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Diethyl phthalate	BMDL	ug/L	BMDL	ug/L	3	625.1	8.92 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dimethyl phthalate	BMDL	ug/L	BMDL	ug/L	3	625.1	10.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dinitrotoluene	BMDL	ug/L	BMDL	ug/L	3	625.1	10.0 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,6-dinitrotoluene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.07 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Outfall Number
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Form Approved 03/05/19
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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	BMDL	ug/L	BMDL	ug/L	3	625.1	8.47 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fluoranthene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.60 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fluorene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.91 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachlorobenzene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.43 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachlorobutadiene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.29 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachlorocyclo-pentadiene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.73 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachloroethane	BMDL	ug/L	BMDL	ug/L	3	625.1	8.89 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Indeno(1,2,3-cd)pyrene	BMDL	ug/L	BMDL	ug/L	3	625.1	7.46 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Isophorone	BMDL	ug/L	BMDL	ug/L	3	625.1	7.93 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Naphthalene	BMDL	ug/L	BMDL	ug/L	3	625.1	8.76 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nitrobenzene	BMDL	ug/L	BMDL	ug/L	3	625.1	7.07 ug/L <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodi-n-propylamine	BMDL	ug/L	BMDL	ug/L	3	625.1	8.89 ug/L <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodimethylamine	BMDL	ug/L	BMDL	ug/L	3	625.1	9.79 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodiphenylamine	BMDL	ug/L	BMDL	ug/L	3	625.1	8.10 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Phenanthrene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.42 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Pyrene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.62 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2,4-trichlorobenzene	BMDL	ug/L	BMDL	ug/L	3	625.1	9.33 ug/L <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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

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EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Outfall Number
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TABLE D. ADDITIONAL POLLUTANTS AS REQUIRED BY NPDES PERMITTING AUTHORITY

Pollutant (list)	Maximum Daily Discharge		Average Daily Discharge		Number of Samples	Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units			
<input checked="" type="checkbox"/> No additional sampling is required by NPDES permitting authority.							
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL
							<input type="checkbox"/> ML <input type="checkbox"/> MDL

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

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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY

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

Test Information			
	Test Number _____	Test Number _____	Test Number _____
Test species			
Age at initiation of test			
Outfall number			
Date sample collected			
Date test started			
Duration			
Toxicity Test Methods			
Test method number			
Manual title			
Edition number and year of publication			
Page number(s)			
Sample Type			
Check one:	<input type="checkbox"/> Grab <input type="checkbox"/> 24-hour composite	<input type="checkbox"/> Grab <input type="checkbox"/> 24-hour composite	<input type="checkbox"/> Grab <input type="checkbox"/> 24-hour composite
Sample Location			
Check one:	<input type="checkbox"/> Before Disinfection <input type="checkbox"/> After Disinfection <input type="checkbox"/> After Dechlorination	<input type="checkbox"/> Before Disinfection <input type="checkbox"/> After Disinfection <input type="checkbox"/> After Dechlorination	<input type="checkbox"/> Before disinfection <input type="checkbox"/> After disinfection <input type="checkbox"/> After dechlorination
Point in Treatment Process			
Describe the point in the treatment process at which the sample was collected for each test.			
Toxicity Type			
Indicate for each test whether the test was performed to assess acute or chronic toxicity, or both. (Check one response.)	<input type="checkbox"/> Acute <input type="checkbox"/> Chronic <input type="checkbox"/> Both	<input type="checkbox"/> Acute <input type="checkbox"/> Chronic <input type="checkbox"/> Both	<input type="checkbox"/> Acute <input type="checkbox"/> Chronic <input type="checkbox"/> Both

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Outfall Number
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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY

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

	Test Number _____	Test Number _____	Test Number _____
Test Type			
Indicate the type of test performed. (Check one response.)	<input type="checkbox"/> Static <input type="checkbox"/> Static-renewal <input type="checkbox"/> Flow-through	<input type="checkbox"/> Static <input type="checkbox"/> Static-renewal <input type="checkbox"/> Flow-through	<input type="checkbox"/> Static <input type="checkbox"/> Static-renewal <input type="checkbox"/> Flow-through
Source of Dilution Water			
Indicate the source of dilution water. (Check one response.)	<input type="checkbox"/> Laboratory water <input type="checkbox"/> Receiving water	<input type="checkbox"/> Laboratory water <input type="checkbox"/> Receiving water	<input type="checkbox"/> Laboratory water <input type="checkbox"/> Receiving water
If laboratory water, specify type.			
If receiving water, specify source.			
Type of Dilution Water			
Indicate the type of dilution water. If salt water, specify "natural" or type of artificial sea salts or brine used.	<input type="checkbox"/> Fresh water <input type="checkbox"/> Salt water (specify)	<input type="checkbox"/> Fresh water <input type="checkbox"/> Salt water (specify)	<input type="checkbox"/> Fresh water <input type="checkbox"/> Salt water (specify)
Percentage Effluent Used			
Specify the percentage effluent used for all concentrations in the test series.			
Parameters Tested			
Check the parameters tested.	<input type="checkbox"/> pH <input type="checkbox"/> Salinity <input type="checkbox"/> Temperature	<input type="checkbox"/> Ammonia <input type="checkbox"/> Dissolved oxygen	<input type="checkbox"/> pH <input type="checkbox"/> Salinity <input type="checkbox"/> Temperature
		<input type="checkbox"/> Ammonia <input type="checkbox"/> Dissolved oxygen	<input type="checkbox"/> pH <input type="checkbox"/> Salinity <input type="checkbox"/> Temperature
Acute Test Results			
Percent survival in 100% effluent	%	%	%
LC ₅₀			
95% confidence interval	%	%	%
Control percent survival	%	%	%

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Outfall Number
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Form Approved 03/05/19
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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY

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

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

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EPA Identification Number

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Facility Name

Form Approved 03/05/19

AL0063797

Dadeville WWTP

OMB No. 2040-0004

TABLE F: INDUSTRIAL DISCHARGE INFORMATION

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

	SIU _____	SIU _____	SIU _____
Name of SIU			
Mailing address (street or P.O. box)			
City, state, and ZIP code			
Description of all industrial processes that affect or contribute to the discharge.			
List the principal products and raw materials that affect or contribute to the SIU's discharge.			
Indicate the average daily volume of wastewater discharged by the SIU.	gpd	gpd	gpd
How much of the average daily volume is attributable to process flow?	gpd	gpd	gpd
How much of the average daily volume is attributable to non-process flow?	gpd	gpd	gpd
Is the SIU subject to local limits?	<input 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 type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

EPA Identification Number

NPDES Permit Number

Facility Name

Form Approved 03/05/19

AL0063797

Dadeville WWTP

OMB No. 2040-0004

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU _____	SIU _____	SIU _____
Under what categories and subcategories is the SIU subject?			
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 type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe.			



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
 Jason Buivids
 475 Buck St.
 Dadeville, AL 36853

Project: 25-0319
 Date Received: 3/6/2019

Sample Number: 188324-01	Collection Date: 03/06/2019 8:00
Description: grab	Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Cyanide	<0.0040	mg/L		0.004	0.01	EPA 335.4	03/06/19 08:00	03/13/19 15:46	JA
Oil & Grease	<4.56	mg/L		4.56	5	EPA 1664A	03/06/19 08:00	03/08/19 09:00	BG
Total Phenols	<0.015	mg/L		0.015	0.05	EPA 420.1	03/06/19 08:00	03/28/19 09:30	JA

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
2-Chloroethylvinyl ether								
2-Chloroethylvinyl ether	EPA 624.1	BMDL	ug/L	5.09	10	03/16/19 13:51	NG	

Surrogate	Recovery %	Target Range
4-Bromofluorobenzene	103	90-110
toluene-d8	99.1	90-110
1,2-Dichloroethane-d4	97.2	88-119

624.1 WWVOC

Compound	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
Benzene	EPA 624.1	BMDL	ug/L	1.85	5	03/16/19 12:29	NG	
Bromodichloromethane	EPA 624.1	BMDL	ug/L	1.54	5	03/16/19 12:29	NG	
Bromoform	EPA 624.1	BMDL	ug/L	3.05	5	03/16/19 12:29	NG	
Bromomethane	EPA 624.1	BMDL	ug/L	4.76	5	03/16/19 12:29	NG	
Carbon Tetrachloride	EPA 624.1	BMDL	ug/L	0.59	5	03/16/19 12:29	NG	
Chlorobenzene	EPA 624.1	BMDL	ug/L	0.755	5	03/16/19 12:29	NG	
Chloroethane	EPA 624.1	BMDL	ug/L	1.46	5	03/16/19 12:29	NG	
Chloroform	EPA 624.1	BMDL	ug/L	1.73	5	03/16/19 12:29	NG	
Chloromethane	EPA 624.1	BMDL	ug/L	1.8	5	03/16/19 12:29	NG	
Dibromochloromethane	EPA 624.1	BMDL	ug/L	0.68	5	03/16/19 12:29	NG	
1,2-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.915	5	03/16/19 12:29	NG	
1,3-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.626	5	03/16/19 12:29	NG	
1,4-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.745	5	03/16/19 12:29	NG	
1,1-Dichloroethane	EPA 624.1	BMDL	ug/L	1.94	5	03/16/19 12:29	NG	
1,2-Dichloroethane	EPA 624.1	BMDL	ug/L	1.27	5	03/16/19 12:29	NG	
1,1-Dichloroethene	EPA 624.1	BMDL	ug/L	1	5	03/16/19 12:29	NG	

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ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
Jason Buivids
475 Buck St.
Dadeville, AL 36853

Project: 25-0319
Date Received: 3/6/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
Trans-1,2-Dichloroethene	EPA 624.1	BMDL	ug/L	1.17	5	03/16/19 12:29	NG	
1,2-Dichloropropane	EPA 624.1	BMDL	ug/L	1.8	5	03/16/19 12:29	NG	
Cis-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.81	5	03/16/19 12:29	NG	
Trans-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.629	5	03/16/19 12:29	NG	
Ethylbenzene	EPA 624.1	BMDL	ug/L	0.57	5	03/16/19 12:29	NG	
Methylene Chloride	EPA 624.1	BMDL	ug/L	1.88	5	03/16/19 12:29	NG	
1,1,2,2-Tetrachloroethane	EPA 624.1	BMDL	ug/L	0.94	5	03/16/19 12:29	NG	
Tetrachloroethene	EPA 624.1	BMDL	ug/L	0.82	5	03/16/19 12:29	NG	O32
Toluene	EPA 624.1	BMDL	ug/L	0.67	5	03/16/19 12:29	NG	
1,1,1-Trichloroethane	EPA 624.1	BMDL	ug/L	0.69	5	03/16/19 12:29	NG	
1,1,2-Trichloroethane	EPA 624.1	BMDL	ug/L	0.766	5	03/16/19 12:29	NG	
Trichloroethene	EPA 624.1	BMDL	ug/L	1.5	5	03/16/19 12:29	NG	
Trichlorofluoromethane	EPA 624.1	BMDL	ug/L	0.753	5	03/16/19 12:29	NG	
Vinyl Chloride	EPA 624.1	BMDL	ug/L	2.09	5	03/16/19 12:29	NG	
Xylenes, total	EPA 624.1	BMDL	ug/L	4.61	5	03/16/19 12:29	NG	

Surrogate	Recovery %	Target Range
1,2-Dichloroethane-d4	103	
Toluene-d8	98.9	
4-Bromofluorobenzene	97.3	

625.1 SVOC WW

1,2,4-Trichlorobenzene	EPA 625.1	BMDL	ug/L	9.33	10	04/12/19 23:49	NG
1,2-Dichlorobenzene	EPA 625.1	BMDL	ug/L	7.33	10	04/12/19 23:49	NG
1,3-Dichlorobenzene	EPA 625.1	BMDL	ug/L	7.61	10	04/12/19 23:49	NG
1,4-Dichlorobenzene	EPA 625.1	BMDL	ug/L	7.58	10	04/12/19 23:49	NG
1,2-Diphenylhydrazine	EPA 625.1	BMDL	ug/L	8.47	10	04/12/19 23:49	NG
2-Chloronaphthalene	EPA 625.1	BMDL	ug/L	7.8	10	04/12/19 23:49	NG
2-Chlorophenol	EPA 625.1	BMDL	ug/L	8.47	10	04/12/19 23:49	NG
2-Nitrophenol	EPA 625.1	BMDL	ug/L	12.3	20	04/12/19 23:49	NG
2,4-Dichlorophenol	EPA 625.1	BMDL	ug/L	9.84	10	04/12/19 23:49	NG
2,4-Dimethylphenol	EPA 625.1	BMDL	ug/L	9.61	10	04/12/19 23:49	NG



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Results of Analysis For: City of Dadeville
Jason Buivids
475 Buck St.
Dadeville, AL 36853

Project: 25-0319
Date Received: 3/6/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
2,4-Dinitrophenol	EPA 625.1	BMDL	ug/L	8.79	10	04/12/19 23:49	NG	
2,4-Dinitrotoluene	EPA 625.1	BMDL	ug/L	10	20	04/12/19 23:49	NG	
2,6-Dinitrotoluene	EPA 625.1	BMDL	ug/L	8.07	10	04/12/19 23:49	NG	
2,4,6-Trichlorophenol	EPA 625.1	BMDL	ug/L	8.73	10	04/12/19 23:49	NG	
3,3-Dichlorobenzidine	EPA 625.1	BMDL	ug/L	11.5	20	04/12/19 23:49	NG	
4-Bromophenyl-phenyl ether	EPA 625.1	BMDL	ug/L	9.12	10	04/12/19 23:49	NG	
4-Chlorophenyl-phenyl ether	EPA 625.1	BMDL	ug/L	9.93	10	04/12/19 23:49	NG	
4-Chloro-3-methylphenol	EPA 625.1	BMDL	ug/L	9.95	10	04/12/19 23:49	NG	
4-Nitrophenol	EPA 625.1	BMDL	ug/L	8.29	10	04/12/19 23:49	NG	
4,6-Dinitro-2-Methylphenol	EPA 625.1	BMDL	ug/L	8.04	10	04/12/19 23:49	NG	
Acenaphthene	EPA 625.1	BMDL	ug/L	8.79	10	04/12/19 23:49	NG	
Acenaphthylene	EPA 625.1	BMDL	ug/L	9.12	10	04/12/19 23:49	NG	
Anthracene	EPA 625.1	BMDL	ug/L	9.05	10	04/12/19 23:49	NG	
Benzdine	EPA 625.1	BMDL	ug/L	15.1	20	04/12/19 23:49	NG	
Benzo(a)pyrene	EPA 625.1	BMDL	ug/L	9.92	10	04/12/19 23:49	NG	
Benzo(a)anthracene	EPA 625.1	BMDL	ug/L	8.81	10	04/12/19 23:49	NG	
Benzo(b)fluoranthene	EPA 625.1	BMDL	ug/L	10	10	04/12/19 23:49	NG	
Benzo(g,h,i)perylene	EPA 625.1	BMDL	ug/L	9.45	10	04/12/19 23:49	NG	
Benzo(k)fluoranthene	EPA 625.1	BMDL	ug/L	9.22	10	04/12/19 23:49	NG	
Bis(2-chloroethoxy)methane	EPA 625.1	BMDL	ug/L	6.66	10	04/12/19 23:49	NG	
Bis(2-chloroethyl)ether	EPA 625.1	BMDL	ug/L	8.22	10	04/12/19 23:49	NG	
Bis(2-chloroisopropyl)ether	EPA 625.1	BMDL	ug/L	7.09	10	04/12/19 23:49	NG	
Bis(2-Ethylhexyl) phthalate	EPA 625.1	BMDL	ug/L	6.84	10	04/12/19 23:49	NG	
Butylbenzyl phthalate	EPA 625.1	BMDL	ug/L	9.96	10	04/12/19 23:49	NG	
Chrysene	EPA 625.1	BMDL	ug/L	8.7	10	04/12/19 23:49	NG	
Dibenz(a,h)anthracene	EPA 625.1	BMDL	ug/L	8.11	10	04/12/19 23:49	NG	
Diethyl phthalate	EPA 625.1	BMDL	ug/L	8.92	10	04/12/19 23:49	NG	
Dimethyl phthalate	EPA 625.1	BMDL	ug/L	10	10	04/12/19 23:49	NG	
Di-n-butyl phthalate	EPA 625.1	BMDL	ug/L	8.46	10	04/12/19 23:49	NG	
Di-n-octyl phthalate	EPA 625.1	BMDL	ug/L	9.5	10	04/12/19 23:49	NG	
n-Nitrosodimethylamine	EPA 625.1	BMDL	ug/L	9.79	10	04/12/19 23:49	NG	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
Jason Buivids
475 Buck St.
Dadeville, AL 36853

Project: 25-0319
Date Received: 3/6/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
Fluoranthene	EPA 625.1	BMDL	ug/L	8.6	10	04/12/19 23:49	NG	
Fluorene	EPA 625.1	BMDL	ug/L	8.91	10	04/12/19 23:49	NG	
Hexachlorobenzene	EPA 625.1	BMDL	ug/L	9.43	10	04/12/19 23:49	NG	
Hexachlorobutadiene	EPA 625.1	BMDL	ug/L	9.29	10	04/12/19 23:49	NG	
Hexachlorocyclopentadiene	EPA 625.1	BMDL	ug/L	8.73	10	04/12/19 23:49	NG	
Hexachloroethane	EPA 625.1	BMDL	ug/L	8.89	10	04/12/19 23:49	NG	
Indeno(1,2,3-cd)pyrene	EPA 625.1	BMDL	ug/L	7.46	10	04/12/19 23:49	NG	
Isophorone	EPA 625.1	BMDL	ug/L	7.93	10	04/12/19 23:49	NG	
Naphthalene	EPA 625.1	BMDL	ug/L	8.76	10	04/12/19 23:49	NG	
Nitrobenzene	EPA 625.1	BMDL	ug/L	7.07	10	04/12/19 23:49	NG	
n-Nitrosodi-n-propylamine	EPA 625.1	BMDL	ug/L	8.89	10	04/12/19 23:49	NG	
n-Nitrosodiphenylamine	EPA 625.1	BMDL	ug/L	8.1	10	04/12/19 23:49	NG	
Pentachlorophenol	EPA 625.1	BMDL	ug/L	10.6	20	04/12/19 23:49	NG	
Phenanthrene	EPA 625.1	BMDL	ug/L	9.42	10	04/12/19 23:49	NG	
Phenol	EPA 625.1	BMDL	ug/L	9.39	10	04/12/19 23:49	NG	
Pyrene	EPA 625.1	BMDL	ug/L	9.62	10	04/12/19 23:49	NG	

Surrogate	Recovery %	Target Range
2-Fluorophenol	8.5	
Phenol-d5	4.9	
Nitrobenzene-d5	28.4	
2-Fluorobiphenyl	29.6	
2,4,6-Tribromophenol	23.6	
p-Terphenyl-d14	34.0	

Acrolein/Acrylonitrile

Acrolein	EPA 624.1	BMDL	ug/L	30.8	50	03/16/19 13:10	NG
Acrylonitrile	EPA 624.1	BMDL	ug/L	25.5	50	03/16/19 13:10	NG

Surrogate	Recovery %	Target Range
4-Bromofluorobenzene	103	90-110
toluene-d8	98.2	90-110
1,2-Dichloroethane-d4	96.7	88-119



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
 Jason Buivids
 475 Buck St.
 Dadeville, AL 36853

Project: 25-0319
 Date Received: 3/6/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
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Sample Number: 188324-02	Collection Date: 03/06/2019 7:25
Description: comp	Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia	<0.200	mg N/L		0.2	0.2	EPA 350.1(1993)	03/06/19 07:25	03/07/19 11:19	JA
Antimony	<20.0	ug/L		20	50	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Arsenic	<22.0	ug/L		22	50	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Beryllium	<4.0	ug/L		4	5	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Cadmium	<4.0	ug/L		4	10	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Chromium	<7.0	ug/L		7	25	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Copper	10.9	ug/L		5	10	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Hardness	31.7	mg/L CaCO3 (EDTA)		5	5	SM 2340C-2011	03/06/19 07:25	03/14/19 15:00	BU
Lead	<26.0	ug/L		26	50	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Nickel	<8.0	ug/L		8	10	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
NO2-/NO3	10.7	mg N/L		0.035	0.1	EPA 353.2	03/06/19 07:25	03/14/19 11:07	JA
Selenium	<26.0	ug/L		26	50	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
Silver	<8.0	ug/L		8	10	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
TDS	174	mg/L(Dry)		2.5	2.5	SM 2540C-2011	03/06/19 07:25	03/08/19 16:45	BEH
Thallium	<34.0	ug/L		34	50	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO
TKN	1.37	mg N/L	N10	0.474	1.25	EPA 351.2	03/06/19 07:25	03/12/19 13:56	EC
Total Phosphorus	1.37	mg P/L		0.1	1	EPA 365.4	03/06/19 07:25	03/12/19 13:56	EC
Zinc	61.0	ug/L		10	25	EPA 200.7	03/06/19 07:25	03/15/19 14:29	AO



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Results of Analysis For: City of Dadeville
Jason Buivids
475 Buck St.
Dadeville, AL 36853

Project: 25-0319
Date Received: 3/6/2019

Sample Number: 188324-03
Description: grab

Collection Date: 02/26/2019 14:35
Location: trip blank voc

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
Acrolein	EPA 624.1	BMDL	ug/L	14.8	10	03/16/19 14:31	NG	
Acrylonitrile	EPA 624.1	BMDL	ug/L	25.5	50	03/16/19 14:31	NG	
Benzene	EPA 624.1	BMDL	ug/L	1.85	5	03/16/19 14:31	NG	
Bromodichloromethane	EPA 624.1	BMDL	ug/L	1.54	5	03/16/19 14:31	NG	
Bromoform	EPA 624.1	BMDL	ug/L	3.05	5	03/16/19 14:31	NG	
Bromomethane	EPA 624.1	BMDL	ug/L	4.76	5	03/16/19 14:31	NG	
Carbon Tetrachloride	EPA 624.1	BMDL	ug/L	0.59	5	03/16/19 14:31	NG	
Chlorobenzene	EPA 624.1	BMDL	ug/L	0.755	5	03/16/19 14:31	NG	
Chloroethane	EPA 624.1	BMDL	ug/L	1.46	5	03/16/19 14:31	NG	
2-Chloroethylvinyl Ether	EPA 624.1	BMDL	ug/L	4.36	5	03/16/19 14:31	NG	
Chloroform	EPA 624.1	BMDL	ug/L	1.73	5	03/16/19 14:31	NG	
Chloromethane	EPA 624.1	BMDL	ug/L	1.8	5	03/16/19 14:31	NG	
Dibromochloromethane	EPA 624.1	BMDL	ug/L	0.68	5	03/16/19 14:31	NG	
1,2-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.915	5	03/16/19 14:31	NG	
1,3-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.626	5	03/16/19 14:31	NG	
1,4-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.745	5	03/16/19 14:31	NG	
1,1-Dichloroethane	EPA 624.1	BMDL	ug/L	1.94	5	03/16/19 14:31	NG	
1,2-Dichloroethane	EPA 624.1	BMDL	ug/L	1.27	5	03/16/19 14:31	NG	
1,1-Dichloroethene	EPA 624.1	BMDL	ug/L	1	5	03/16/19 14:31	NG	
Trans-1,2-Dichloroethene	EPA 624.1	BMDL	ug/L	1.17	5	03/16/19 14:31	NG	
1,2-Dichloropropane	EPA 624.1	BMDL	ug/L	1.8	5	03/16/19 14:31	NG	
Cis-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.81	5	03/16/19 14:31	NG	
Trans-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.629	5	03/16/19 14:31	NG	
Ethylbenzene	EPA 624.1	BMDL	ug/L	0.57	5	03/16/19 14:31	NG	
Methylene Chloride	EPA 624.1	BMDL	ug/L	1.88	5	03/16/19 14:31	NG	
1,1,2,2-Tetrachloroethane	EPA 624.1	BMDL	ug/L	0.94	5	03/16/19 14:31	NG	
Tetrachloroethene	EPA 624.1	BMDL	ug/L	0.82	5	03/16/19 14:31	NG	O32
Toluene	EPA 624.1	BMDL	ug/L	0.67	5	03/16/19 14:31	NG	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
Jason Buivids
475 Buck St.
Dadeville, AL 36853

Project: 25-0319
Date Received: 3/6/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
1,1,1-Trichloroethane	EPA 624.1	BMDL	ug/L	0.69	5	03/16/19 14:31	NG	
1,1,2-Trichloroethane	EPA 624.1	BMDL	ug/L	0.766	5	03/16/19 14:31	NG	
Trichloroethene	EPA 624.1	BMDL	ug/L	1.5	5	03/16/19 14:31	NG	
Trichlorofluoromethane	EPA 624.1	BMDL	ug/L	0.753	5	03/16/19 14:31	NG	
Vinyl Chloride	EPA 624.1	BMDL	ug/L	2.09	5	03/16/19 14:31	NG	
Xylenes, total	EPA 624.1	BMDL	ug/L	4.61	5	03/16/19 14:31	NG	

Surrogate	Recovery %	Target Range
1,2-Dichloroethane-d4	104	
Toluene-d8	98.3	
4-Bromofluorobenzene	96.1	

Sample Number: 188324-04

Description: grab

Collection Date: 03/06/2019 8:00

Location: Field Blank LLHg



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
Jason Buivids
475 Buck St.
Dadeville, AL 36853

Project: 25-0319
Date Received: 3/6/2019

Analytes - NOT NELAC Certified

1,2-Dichloroethane-d4	1,2-Diphenylhydrazine	2,4,6-Tribromophenol	2-Chloroethylvinyl ether
2-Fluorobiphenyl	2-Fluorophenol	4-Bromofluorobenzene	Methylene Chloride
Nitrobenzene-d5	Phenol-d5	p-Terphenyl-d14	Subcontract - LL Hg
toluene-d8	Xylenes, total		

MDL: Method Detection Limit
PQL: Practical Quantitation Limit

04/16/2019

Erin Consuegra, QA/QC Manager

Date

This person may be contacted for questions at the number listed above.

"Methods for Chemical Analysis of Water and Wastes" EPA, EMSL-CI, EPA 600/4-79-020, Rev. March 1979 & 1983.

BMDL = Below Method Detection Limit

COD: EPA approved methods in "HACH Water Analysis Handbook", 2nd Ed.

EPA- Methods for Chemical Analysis of Water and Wastes, 1994.

For EPA 625.1 - The surrogate values were all low

Oil & Grease: EPA-821-R-98-002, February 1999.

State of Florida, NELAC Certification #E87542

Std. Methods for the Exam. Of Water and Wastewater, 20th Ed.

The results shown relate only to these samples.

These results meet all of the requirements of the NELAC standard.

Qualifiers

- N10 = The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit and should only be relied upon as an estimate.
- O32 = This CCC compound was not within its target range of <20% drift of RF from the compound at initial calibration.



Pace Analytical Services, LLC
110 South Bayview Blvd.
Oldsmar, FL 34677
(813)881-9401

ANALYTICAL RESULTS

Project: Dadeville WWTP 25-0319

Pace Project No.: 35454792

Sample: 188324-01 Lab ID: 35454792001 Collected: 03/06/19 08:00 Received: 03/18/19 12:15 Matrix: Water

Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level Tampa	Analytical Method: EPA 1631E Preparation Method: EPA 1631E								
Mercury	13.3	ng/L	0.50	0.20	1	03/22/19 16:15	03/23/19 11:53	7439-97-6	

REPORT OF LABORATORY ANALYSIS

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ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

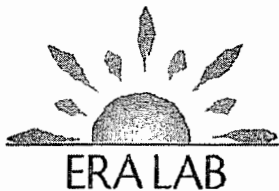
Project: 25-0720
Date Received: 7/15/2020

Sample Number: 206711-01	Collection Date: 07/15/2020 8:10
Description: grab	Location: effluent PR*

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Cyanide	<0.004	mg/L		0.004	0.01	EPA 335.4	07/15/20 08:10	07/21/20 14:12	JA
Oil & Grease	<4.56	mg/L		4.56	5	EPA 1664A	07/15/20 08:10	07/20/20 08:15	TH
Total Phenols	<0.0250	mg/L		0.025	0.05	EPA 420.1	07/15/20 08:10	07/27/20 09:00	BG

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
Acrolein	EPA 624.1	BMDL	ug/L	16.1	20	07/16/20 18:40	NG	
Acrylonitrile	EPA 624.1	BMDL	ug/L	10.1	20	07/16/20 18:40	NG	
Benzene	EPA 624.1	BMDL	ug/L	1	5	07/16/20 18:40	NG	
Bromodichloromethane	EPA 624.1	BMDL	ug/L	0.8	5	07/16/20 18:40	NG	
Bromoform	EPA 624.1	BMDL	ug/L	0.89	5	07/16/20 18:40	NG	
Bromomethane	EPA 624.1	BMDL	ug/L	1.81	5	07/16/20 18:40	NG	
Carbon Tetrachloride	EPA 624.1	BMDL	ug/L	2.16	5	07/16/20 18:40	NG	
Chlorobenzene	EPA 624.1	BMDL	ug/L	0.7	5	07/16/20 18:40	NG	
Chloroethane	EPA 624.1	BMDL	ug/L	2.39	5	07/16/20 18:40	NG	
2-Chloroethylvinyl Ether	EPA 624.1	BMDL	ug/L	3.6	5	07/16/20 18:40	NG	
Chloroform	EPA 624.1	BMDL	ug/L	1.59	5	07/16/20 18:40	NG	
Chloromethane	EPA 624.1	BMDL	ug/L	1.63	5	07/16/20 18:40	NG	
Dibromochloromethane	EPA 624.1	BMDL	ug/L	0.82	5	07/16/20 18:40	NG	
1,2-Dichlorobenzene	EPA 624.1	BMDL	ug/L	1.16	5	07/16/20 18:40	NG	
1,3-Dichlorobenzene	EPA 624.1	BMDL	ug/L	1.05	5	07/16/20 18:40	NG	
1,4-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.66	5	07/16/20 18:40	NG	
1,1-Dichloroethane	EPA 624.1	BMDL	ug/L	0.34	5	07/16/20 18:40	NG	
1,2-Dichloroethane	EPA 624.1	BMDL	ug/L	0.57	5	07/16/20 18:40	NG	
1,1-Dichloroethene	EPA 624.1	BMDL	ug/L	0.81	5	07/16/20 18:40	NG	
Trans-1,2-Dichloroethene	EPA 624.1	BMDL	ug/L	0.65	5	07/16/20 18:40	NG	
1,2-Dichloropropane	EPA 624.1	BMDL	ug/L	0.8	5	07/16/20 18:40	NG	
Cis-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.89	5	07/16/20 18:40	NG	
Trans-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.87	5	07/16/20 18:40	NG	



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Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-0720

Date Received: 7/15/2020

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
Ethylbenzene	EPA 624.1	BMDL	ug/L	2.06	5	07/16/20 18:40	NG	
Methylene Chloride	EPA 624.1	BMDL	ug/L	0.66	5	07/16/20 18:40	NG	
1,1,2,2-Tetrachloroethane	EPA 624.1	BMDL	ug/L	0.82	5	07/16/20 18:40	NG	
Tetrachloroethene	EPA 624.1	BMDL	ug/L	0.98	5	07/16/20 18:40	NG	
Toluene	EPA 624.1	BMDL	ug/L	1.26	5	07/16/20 18:40	NG	
1,1,1-Trichloroethane	EPA 624.1	BMDL	ug/L	2.18	5	07/16/20 18:40	NG	
1,1,2-Trichloroethane	EPA 624.1	BMDL	ug/L	0.78	5	07/16/20 18:40	NG	
Trichloroethene	EPA 624.1	BMDL	ug/L	0.98	5	07/16/20 18:40	NG	
Trichlorofluoromethane	EPA 624.1	BMDL	ug/L	0.9	5	07/16/20 18:40	NG	
Vinyl Chloride	EPA 624.1	BMDL	ug/L	0.77	5	07/16/20 18:40	NG	
Xylenes, total	EPA 624.1	BMDL	ug/L	4.01	5	07/16/20 18:40	NG	

Surrogate	Recovery %	Target Range
1,2-Dichloroethane-d4	103	
Toluene-d8	98.3	
4-Bromofluorobenzene	92.8	

625.1 SVOC WW

1,2,4-Trichlorobenzene	EPA 625.1	<0.568	ug/L	0.568	5	08/04/20 19:34	NG	O95
1,2-Diphenylhydrazine	EPA 625.1	<5.70	ug/L	5.7	10	08/04/20 19:34	NG	
2-Chloronaphthalene	EPA 625.1	<1.21	ug/L	1.21	5	08/04/20 19:34	NG	
2-Chlorophenol	EPA 625.1	<1.33	ug/L	1.33	5	08/04/20 19:34	NG	
2-Nitrophenol	EPA 625.1	<1.62	ug/L	1.62	5	08/04/20 19:34	NG	M1
2,4-Dichlorophenol	EPA 625.1	<1.40	ug/L	1.4	5	08/04/20 19:34	NG	
2,4-Dimethylphenol	EPA 625.1	<2.02	ug/L	2.02	5	08/04/20 19:34	NG	M1
2,4-Dinitrophenol	EPA 625.1	<2.52	ug/L	2.52	5	08/04/20 19:34	NG	
2,4-Dinitrotoluene	EPA 625.1	<3.01	ug/L	3.01	5	08/04/20 19:34	NG	
2,6-Dinitrotoluene	EPA 625.1	<1.38	ug/L	1.38	5	08/04/20 19:34	NG	
2,4,6-Trichlorophenol	EPA 625.1	<0.633	ug/L	0.633	5	08/04/20 19:34	NG	
3,3-Dichlorobenzidine	EPA 625.1	<1.15	ug/L	1.15	5	08/04/20 19:34	NG	O95,
4-Bromophenyl-phenyl ether	EPA 625.1	<1.39	ug/L	1.39	5	08/04/20 19:34	NG	
4-Chlorophenyl-phenyl ether	EPA 625.1	<0.583	ug/L	0.583	5	08/04/20 19:34	NG	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-0720

Date Received: 7/15/2020

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
4-Chloro-3-methylphenol	EPA 625.1	<1.67	ug/L	1.67	5	08/04/20 19:34	NG	
4-Nitrophenol	EPA 625.1	<6.39	ug/L	6.39	10	08/04/20 19:34	NG	O95
4,6-Dinitro-2-Methylphenol	EPA 625.1	<2.08	ug/L	2.08	5	08/04/20 19:34	NG	
Acenaphthene	EPA 625.1	<1.91	ug/L	1.91	5	08/04/20 19:34	NG	
Acenaphthylene	EPA 625.1	<1.62	ug/L	1.62	5	08/04/20 19:34	NG	
Anthracene	EPA 625.1	<2.18	ug/L	2.18	5	08/04/20 19:34	NG	
Benzidine	EPA 625.1	<5.82	ug/L	5.82	20	08/04/20 19:34	NG	O95,
Benzo(a)pyrene	EPA 625.1	<2.08	ug/L	2.08	5	08/04/20 19:34	NG	
Benzo(a)anthracene	EPA 625.1	<1.73	ug/L	1.73	5	08/04/20 19:34	NG	
Benzo(b)fluoranthene	EPA 625.1	<2.38	ug/L	2.38	5	08/04/20 19:34	NG	
Benzo(g,h,i)perylene	EPA 625.1	<2.01	ug/L	2.01	5	08/04/20 19:34	NG	
Benzo(k)fluoranthene	EPA 625.1	<9.22	ug/L	9.22	10	08/04/20 19:34	NG	
Bis(2-chloroethoxy)methane	EPA 625.1	<3.30	ug/L	3.3	5	08/04/20 19:34	NG	
Bis(2-chloroethyl)ether	EPA 625.1	<3.49	ug/L	3.49	5	08/04/20 19:34	NG	
Bis(2-chloroisopropyl)ether	EPA 625.1	<5.70	ug/L	5.7	10	08/04/20 19:34	NG	O95
Bis(2-Ethylhexyl) phthalate	EPA 625.1	<1.44	ug/L	1.44	5	08/04/20 19:34	NG	
Butylbenzyl phthalate	EPA 625.1	<1.22	ug/L	1.22	5	08/04/20 19:34	NG	
Chrysene	EPA 625.1	<2.59	ug/L	2.59	5	08/04/20 19:34	NG	
Dibenz(a,h)anthracene	EPA 625.1	<1.46	ug/L	1.46	5	08/04/20 19:34	NG	
Diethyl phthalate	EPA 625.1	<2.35	ug/L	2.35	5	08/04/20 19:34	NG	
Dimethyl phthalate	EPA 625.1	<2.01	ug/L	2.01	5	08/04/20 19:34	NG	
Di-n-butyl phthalate	EPA 625.1	<3.85	ug/L	3.85	5	08/04/20 19:34	NG	
Di-n-octyl phthalate	EPA 625.1	<1.36	ug/L	1.36	5	08/04/20 19:34	NG	
n-Nitrosodimethylamine	EPA 625.1	<4.89	ug/L	4.89	5	08/04/20 19:34	NG	O95,
Fluoranthene	EPA 625.1	<1.96	ug/L	1.96	5	08/04/20 19:34	NG	
Fluorene	EPA 625.1	<1.80	ug/L	1.8	5	08/04/20 19:34	NG	
Hexachlorobenzene	EPA 625.1	<1.59	ug/L	1.59	5	08/04/20 19:34	NG	
Hexachlorobutadiene	EPA 625.1	<1.12	ug/L	1.12	5	08/04/20 19:34	NG	M1
Hexachlorocyclopentadiene	EPA 625.1	<2.91	ug/L	2.91	5	08/04/20 19:34	NG	
Hexachloroethane	EPA 625.1	<2.71	ug/L	2.71	5	08/04/20 19:34	NG	O95
Indeno(1,2,3-cd)pyrene	EPA 625.1	<1.55	ug/L	1.55	5	08/04/20 19:34	NG	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
 475 Buck St.
 Dadeville, AL 36853

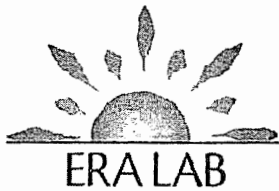
Project: 25-0720

Date Received: 7/15/2020

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
Isophorone	EPA 625.1	<3.50	ug/L	3.5	5	08/04/20 19:34	NG	
Naphthalene	EPA 625.1	<2.31	ug/L	2.31	5	08/04/20 19:34	NG	
Nitrobenzene	EPA 625.1	<1.60	ug/L	1.6	5	08/04/20 19:34	NG	M1
n-Nitrosodi-n-propylamine	EPA 625.1	<4.84	ug/L	4.84	5	08/04/20 19:34	NG	
n-Nitrosodiphenylamine	EPA 625.1	<2.98	ug/L	2.98	5	08/04/20 19:34	NG	
Pentachlorophenol	EPA 625.1	<5.58	ug/L	5.58	10	08/04/20 19:34	NG	
Phenanthrene	EPA 625.1	<1.92	ug/L	1.92	5	08/04/20 19:34	NG	
Phenol	EPA 625.1	<3.04	ug/L	3.04	5	08/04/20 19:34	NG	O95,
Pyrene	EPA 625.1	<2.18	ug/L	2.18	5	08/04/20 19:34	NG	

Surrogate	Recovery %	Target Range
2-Fluorophenol	18.6	
Phenol-d5	11.2	
Nitrobenzene-d5	46.8	
2-Fluorobiphenyl	45.0	
2,4,6-Tribromophenol	62.5	
p-Terphenyl-d14	89.7	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-0720
Date Received: 7/15/2020

Sample Number: 206711-02	Collection Date: 07/15/2020 7:30
Description: comp	Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia	<0.200	mg N/L		0.2	0.2	EPA 350.1(1993)	07/15/20 07:30	07/16/20 14:17	JA
Antimony	0.40	ug/L	N10	0.23	1	EPA 200.3	07/15/20 07:30	08/03/20 15:49	AO
Arsenic	<0.64	ug/L		0.64	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Beryllium	<0.15	ug/L		0.15	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Cadmium	<0.24	ug/L		0.24	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Chromium	<1.5	ug/L		1.5	5	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Copper	21.5	ug/L		0.37	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Hardness	51.0	mg/L CaCO3 (EDTA)		5	5	SM 2340C-2011	07/15/20 07:30	07/23/20 22:20	DS
Lead	<0.28	ug/L		0.28	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Nickel	3.3	ug/L		0.76	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
NO2-/NO3	18.0	mg N/L		0.07	0.2	EPA 353.2	07/15/20 07:30	07/22/20 12:42	JA
Selenium	<0.41	ug/L		0.41	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
Silver	<0.25	ug/L		0.25	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
TDS	412	mg/L(Dry)		2.5	2.5	SM 2540C-2011	07/15/20 07:30	07/17/20 14:10	BG
Thallium	<0.60	ug/L		0.6	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO
TKN	<0.843	mg N/L		0.843	1.25	EPA 351.2	07/15/20 07:30	07/23/20 14:25	JA
Total Phosphorus	3.52	mg P/L		0.1	0.5	EPA 365.4	07/15/20 07:30	07/23/20 14:25	JA
Zinc	69.8	ug/L		0.9	1	EPA 200.8	07/15/20 07:30	08/03/20 15:49	AO

Sample Number: 206711-04	Collection Date: 07/15/2020 8:10
Description: grab	Location: Field Blank LLHG



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-0720

Date Received: 7/15/2020

MDL: Method Detection Limit

PQL: Practical Quantitation Limit

BMDL: Below Method Detection Limit

"Methods for Chemical Analysis of Water and Wastes" EPA, EMSL-CI, EPA 600/4-79-020, Rev. March 1979 & 1983.

BMDL = Below Method Detection Limit

COD: EPA approved methods in "HACH Water Analysis Handbook", 2nd Ed.

EPA- Methods for Chemical Analysis of Water and Wastes, 1994.

Oil & Grease: EPA-821-R-98-002, February 1999.

State of Florida, NELAC Certification #E87542

The results shown relate only to these samples.

These results meet all of the requirements of the NELAC standard.

206711-01

The Tailing Factors did not meet QA/QC criteria per EPA 625.1.

Qualifiers

M1 = The Matrix Spike did not meet QA/QC requirements.

N10 = The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit and should only be relied upon as an estimate.

O95 = The standard extracted in the sample batch did not meet QA/QC criteria.

This report was reviewed for completeness and approved.

Date Complete: 08/18/2020

Dyana Hughes, Reporting Manager

All data on this report is in compliance with the reported method unless otherwise noted.

Erin Consuegra, QA/QC Manager



Pace Analytical Services, LLC
110 South Bayview Blvd.
Oldsmar, FL 34677
(813)881-9401

ANALYTICAL RESULTS

Project: 25-0720
Pace Project No.: 35565819

Sample: 206711-01 Lab ID: 35565819001 Collected: 07/15/20 09:10 Received: 07/27/20 10:30 Matrix: Water

Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level	Analytical Method: EPA 1631E Preparation Method: EPA 1631E Pace Analytical Services - Indianapolis								
Mercury	2.48	ng/L	0.50	0.19	1	07/31/20 17:20	08/01/20 10:45	7439-97-6	

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

EPA Identification Number		NPDES Permit Number AL0063797	Facility Name Dadeville WWTP		Form Approved 03/05/19 OMB No. 2040-0004		
Form 2S NPDES		U.S Environmental Protection Agency Application for NPDES Permit for Sewage Sludge Management NEW AND EXISTING TREATMENT WORKS TREATING DOMESTIC SEWAGE					
PRELIMINARY INFORMATION							
Does your facility currently have an effective NPDES permit or have you been directed by your NPDES permitting authority to submit a full Form 2S permit application?							
<input checked="" type="checkbox"/> Yes → Complete Part 2 of application package (begins p. 7). <input type="checkbox"/> No → Complete Part 1 of application package (below).							
PART 1		LIMITED BACKGROUND INFORMATION (40 CFR 122.21(c)(2)(ii))					
Complete this part only if you are a "sludge-only" facility (i.e., a facility that does not currently have, and is not applying for, an NPDES permit for a direct discharge to a surface body of water).							
PART 1, SECTION 1. FACILITY INFORMATION (40 CFR 122.21(c)(2)(ii)(A))							
Facility Information	1.1	Facility name Dadeville WWTP					
		Mailing address (street or P.O. box) 475 Buck Street					
		City or town Dadeville		State Alabama	ZIP code 36853		
		Contact name (first and last) Victor Buiivds	Title Superintendent	Phone number (256) 825-7355	Email address wwtpjason@gmail.com		
		Location address (street, route number, or other specific identifier)					<input checked="" type="checkbox"/> Same as mailing address
		City or town		State	ZIP code		
		1.2 Ownership Status					
<input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input checked="" type="checkbox"/> Other public (specify) <u>Municipal Board</u> <input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____							
PART 1, SECTION 2. APPLICANT INFORMATION (40 CFR 122.21(c)(2)(ii)(B))							
Applicant Information	2.1	Is applicant different from entity listed under Item 1.1 above? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 2.3 (Part 1, Section 2).					
	2.2	Applicant name Waterworks and Sewage Board of the City of Dadeville					
		Applicant address (street or P.O. box) 826 East Columbus Street					
		City or town Dadeville		State Alabama	ZIP code 36853		
		Contact name (first and last) Mike Ingram	Title WSB Superintendent	Phone number (256) 825-5004	Email address mayor.ingram@gmail.com		
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 checked="" type="checkbox"/> Both						
2.4	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input checked="" type="checkbox"/> Facility <input type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)						
PART 1, SECTION 3. SEWAGE SLUDGE AMOUNT (40 CFR 122.21(c)(2)(ii)(D))							
Sewage Sludge Amount	3.1	Provide the total dry metric tons per the latest 365-day period of sewage sludge generated, treated, used, and disposed of:					
		Practice				Dry Metric Tons per 365-Day Period	
		Amount generated at the facility				150.59	
		Amount treated at the facility				150.59	
		Amount used (i.e., received from off site) at the facility				0	
Amount disposed of at the facility				150.59			

PART 1 SECTION 4 POLLUTANT CONCENTRATIONS (40 CFR 122.21(c)(2)(ii)(E))

4.1

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

Check here if you have provided a separate attachment with this information.

Pollutant Concentrations

Pollutant	Concentration (mg/kg dry weight)	Analytical Method	Detection Level for Analysis
Arsenic			
Cadmium			
Chromium			
Copper			
Lead			
Mercury			
Molybdenum			
Nickel			
Selenium			
Zinc			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			

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" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:45%;">Use or Disposal Practice (check one)</th> <th style="width:15%;">Amount (dry metric tons)</th> <th style="width:20%;">Pathogen Class and Reduction Alternative</th> <th style="width:20%;">Vector Attraction Reduction Option</th> </tr> </thead> <tbody> <tr> <td> <input type="checkbox"/> Land application of bulk sewage <input checked="" type="checkbox"/> Land application of biosolids (bulk) <input type="checkbox"/> Land application of biosolids (bags) <input type="checkbox"/> Surface disposal in a landfill <input type="checkbox"/> Other surface disposal <input type="checkbox"/> Incineration </td> <td style="text-align: center; vertical-align: top;">120.95</td> <td> <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 checked="" 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 </td> <td> <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 checked="" type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <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 checked="" type="checkbox"/> Land application of biosolids (bulk) <input type="checkbox"/> Land application of biosolids (bags) <input type="checkbox"/> Surface disposal in a landfill <input type="checkbox"/> Other surface disposal <input type="checkbox"/> Incineration	120.95	<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 checked="" 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 checked="" type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <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 checked="" type="checkbox"/> Land application of biosolids (bulk) <input type="checkbox"/> Land application of biosolids (bags) <input type="checkbox"/> Surface disposal in a landfill <input type="checkbox"/> Other surface disposal <input type="checkbox"/> Incineration	120.95	<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 checked="" 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 checked="" type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <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.)												
	<table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering)</td> <td><input checked="" type="checkbox"/> Thickening (concentration)</td> </tr> <tr> <td><input type="checkbox"/> Stabilization</td> <td><input checked="" type="checkbox"/> Anaerobic digestion</td> </tr> <tr> <td><input type="checkbox"/> Composting</td> <td><input type="checkbox"/> Conditioning</td> </tr> <tr> <td><input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)</td> <td><input checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)</td> </tr> <tr> <td><input type="checkbox"/> Heat drying</td> <td><input type="checkbox"/> Thermal reduction</td> </tr> <tr> <td><input type="checkbox"/> Methane or biogas capture and recovery</td> <td><input type="checkbox"/> Other (specify) _____</td> </tr> </table>	<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	<input type="checkbox"/> Other (specify) _____
<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	<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 checked="" 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 checked="" 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.)								
	<table style="width:100%;"> <tr> <td><input type="checkbox"/> Treatment or blending</td> <td><input type="checkbox"/> Sale or give-away in bag or other container</td> </tr> <tr> <td><input type="checkbox"/> Land application</td> <td><input type="checkbox"/> Surface disposal</td> </tr> <tr> <td><input type="checkbox"/> Incineration</td> <td><input type="checkbox"/> Other (describe)</td> </tr> <tr> <td><input type="checkbox"/> Composting</td> <td></td> </tr> </table>	<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	
<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									

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP
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Form Approved 03/05/19
OMB No. 2040-0004

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

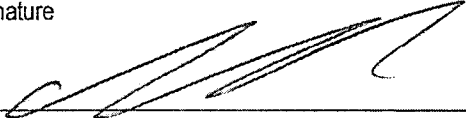
Use and Disposal Sites	Provide the following information for each site on which sewage sludge from this facility is used or disposed of.				
	<input checked="" type="checkbox"/> Check here if you have provided separate attachments with this information.				
	7.1	Site name or number			
		Mailing address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

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

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

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP
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Form Approved 03/05/19
OMB No. 2040-0004

Checklist and Certification Statement Continued	8.2	Certification Statement <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
		Name (print or type first and last name) Mike Ingram	Official title WSB Superintendent Phone number (256) 825-5004
		Signature 	Date signed 2/28/23

PART 1 APPLICANTS STOP HERE.

Submit completed application package to your NPDES permitting authority.

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EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Form Approved 03/05/19 OMB No. 2040-0004		
PART 2		PERMIT APPLICATION INFORMATION (40 CFR 122.21(q))			
Complete this part if you have an effective NPDES permit or have been directed by the NPDES permitting authority to submit a full permit application. In other words, complete this part if your facility has, or is applying for, an NPDES permit. Part 2 is divided into five sections. Section 1 pertains to all applicants. The applicability of Sections 2 to 5 depends on your facility's sewage sludge use or disposal practices. See the instructions to determine which sections you are required to complete.					
PART 2, SECTION 1. GENERAL INFORMATION (40 CFR 122.21(q)(1-7) AND (q)(13))					
All Part 2 applicants must complete this section.					
General Information	Facility Information				
	1.1	Facility name Dadeville WWTP			
		Mailing address (street or P.O. box) 475 Buck Street			
		City or town Dadeville	State Alabama	ZIP code 36853	Phone number (256) 825-7355
		Contact name (first and last) Victor Buivids	Title Superintendent	Email address wwtpjason@gmail.com	
		Location address (street, route number, or other specific identifier) <input checked="" type="checkbox"/> Same as mailing address			
		City or town	State	ZIP code	
	1.2	Is this facility a Class I sludge management facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	1.3	Facility Design Flow Rate	0.750 million gallons per day (mgd)		
	1.4	Total Population Served	850 of 3100		
	1.5	Ownership Status			
		<input type="checkbox"/> Public—federal	<input type="checkbox"/> Public—state	<input checked="" type="checkbox"/> Other public (specify) <u>Municipal Board</u>	
		<input type="checkbox"/> Private	<input type="checkbox"/> Other (specify) _____		
	Applicant Information				
	1.6	Is applicant different from entity listed under Item 1.1 above? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 1.8 (Part 2, Section 1).			
1.7	Applicant name Waterworks and Sewage Board of the City of Dadeville				
	Applicant mailing address (street or P.O. box) 826 East Columbus Street				
	City or town Dadeville	State Alabama	ZIP code 36853		
	Contact name (first and last) Mike Ingram	Title WSB Superintendent	Phone number (256) 825-5004	Email address mayor.ingram@gmail.com	
1.8	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Both				
1.9	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input checked="" type="checkbox"/> Facility <input type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)				

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DEC 12 2023

**IND/MUN BRANCH
WATER DIVISION**

EPA Identification Number		NPDES Permit Number	Facility Name		Form Approved 03/05/19 OMB No. 2040-0004	
		AL0063797	Dadeville WWTP			
1.10	Facility's NPDES permit number				AL0063797	
	<input type="checkbox"/> Check here if you do not have an NPDES permit but are otherwise required to submit Part 2 of Form 2S.					
1.11	Indicate all other federal, state, and local permits or construction approvals received or applied for that regulate this facility's sewage sludge management practices below.					
	✓					
	<input type="checkbox"/> RCRA (hazardous wastes)	<input type="checkbox"/> Nonattainment program (CAA)	<input type="checkbox"/> NESHAPs (CAA)			
	<input type="checkbox"/> PSD (air emissions)	<input type="checkbox"/> Dredge or fill (CWA Section 404)	<input type="checkbox"/> Other (specify)			
			BUG 0000 003623-22			
	<input type="checkbox"/> Ocean dumping (MPRSA)	<input type="checkbox"/> UIC (underground injection of fluids)	BUD 0000 003623-22			
Indian Country						
1.12	Does any generation, treatment, storage, application to land, or disposal of sewage sludge from this facility occur in Indian Country?					
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No → SKIP to Item 1.14 (Part 2, Section 1) below.				
1.13	Provide a description of the generation, treatment, storage, land application, or disposal of sewage sludge that occurs.					
Topographic Map						
1.14	Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.)					
	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
Line Drawing						
1.15	Have you attached a line drawing and/or a narrative description that identifies all sewage sludge practices that will be employed during the term of the permit containing all the required information to this application? (See instructions for specific requirements.)					
	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
Contractor Information						
1.16	Do contractors have any operational or maintenance responsibilities related to sewage sludge generation, treatment, use, or disposal at the facility?					
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No → SKIP to Item 1.18 (Part 2, Section 1) below.				
1.17	Provide the following information for each contractor.					
	<input type="checkbox"/> Check here if you have attached additional sheets to the application package.					
		Contractor 1	Contractor 2	Contractor 3		
	Contractor company name					
	Mailing address (street or P.O. box)					
	City, state, and ZIP code					
	Contact name (first and last)					
	Telephone number					
	Email address					

General Information Continued

1.17	cont.	Responsibilities of contractor	Contractor 1	Contractor 2	Contractor 3

Pollutant Concentrations

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

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

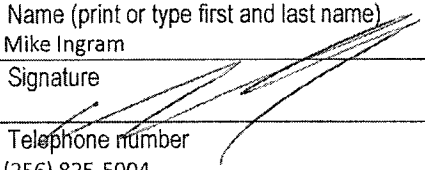
1.18	Pollutant	Average Monthly Concentration (mg/kg dry weight)	Analytical Method	Detection Level
	Arsenic			
	Cadmium			
	Chromium			
	Copper			
	Lead			
	Mercury			
	Molybdenum			
	Nickel			
	Selenium			
	Zinc			

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.	
	Column 1	Column 2
	<input checked="" type="checkbox"/> Section 1 (General Information)	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 3 (Land Application of Bulk Sewage Sludge)	<input checked="" type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 4 (Surface Disposal)	<input checked="" type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 5 (Incineration)	<input checked="" type="checkbox"/> w/ attachments

1.20 **Certification Statement**

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

Name (print or type first and last name) Mike Ingram	Official title WSB Superintendent
Signature 	Date signed 2/28/23
Telephone number (256) 825-5004	

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))

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

2.1 Does your facility generate sewage sludge or derive a material from sewage sludge?
 Yes No → SKIP to Part 2, Section 3.

Amount Generated Onsite
 2.2 Total dry metric tons per 365-day period generated at your facility: 150.59

Amount Received from Off Site Facility
 2.3 Does your facility receive sewage sludge from another facility for treatment use or disposal?
 Yes 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.
 Check here if you have attached additional sheets to the application package.

2.5 Name of facility
 Mailing address (street or P.O. box)
 City or town State ZIP code
 Contact name (first and last) Title Phone number Email address
 Location address (street, route number, or other specific identifier) Same as mailing address
 City or town State ZIP code
 County County code Not available

2.6 Indicate the amount of sewage sludge received, the applicable pathogen class and reduction alternative, and the applicable vector reduction option provided at the offsite facility.

Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
	<input type="checkbox"/> Not applicable <input type="checkbox"/> Class A, Alternative 1 <input type="checkbox"/> Class A, Alternative 2 <input type="checkbox"/> Class A, Alternative 3 <input type="checkbox"/> Class A, Alternative 4 <input type="checkbox"/> Class A, Alternative 5 <input type="checkbox"/> Class A, Alternative 6 <input type="checkbox"/> Class B, Alternative 1 <input type="checkbox"/> Class B, Alternative 2 <input type="checkbox"/> Class B, Alternative 3 <input type="checkbox"/> Class B, Alternative 4 <input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Not applicable <input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2 <input type="checkbox"/> Option 3 <input type="checkbox"/> Option 4 <input type="checkbox"/> Option 5 <input type="checkbox"/> Option 6 <input type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <input type="checkbox"/> Option 11

2.7 Identify the treatment process(es) that are known to occur at the offsite facility, including blending activities and treatment to reduce pathogens or vector attraction properties. (Check all that apply.)

<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering)	<input type="checkbox"/> 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) _____

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

Treatment Provided at Your Facility		
2.8	For each sewage sludge use or disposal practice, indicate the applicable pathogen class and reduction alternative and the applicable vector attraction reduction option provided at your facility. Attach additional pages, as necessary.	
	Use or Disposal Practice (check one)	Pathogen Class and Reduction Alternative
	<input type="checkbox"/> Land application of bulk sewage <input checked="" type="checkbox"/> Land application of biosolids (bulk) <input type="checkbox"/> Land application of biosolids (bags) <input type="checkbox"/> Surface disposal in a landfill <input type="checkbox"/> Other surface disposal <input type="checkbox"/> Incineration	<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 checked="" 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
		Vector Attraction Reduction Option
		<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 checked="" type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <input type="checkbox"/> Option 11
2.9	Identify the treatment process(es) used at your facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge? (Check all that apply.)	
	<input checked="" type="checkbox"/> Preliminary operations (e.g., sludge grinding and 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 checked="" type="checkbox"/> Anaerobic digestion <input type="checkbox"/> Conditioning <input checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction
2.10	Describe any other sewage sludge treatment or blending activities not identified in Items 2.8 and 2.9 (Part 2, Section 2) above. <input type="checkbox"/> Check here if you have attached the description to the application package.	
Preparation of Sewage Sludge Meeting Ceiling and Pollutant Concentrations, Class A Pathogen Requirements, and One of Vector Attraction Reduction Options 1 to 8		
2.11	Does the sewage sludge from your facility meet the ceiling concentrations in Table 1 of 40 CFR 503.13, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), and one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)-(8) and is it land applied? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.14 (Part 2, Section 2) below.	
2.12	Total dry metric tons per 365-day period of sewage sludge subject to this subsection that is applied to the land:	
2.13	Is sewage sludge subject to this subsection placed in bags or other containers for sale or give-away for application to the land? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<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.		

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

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

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

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

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

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

Shipment Off Site for Treatment or Blending

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

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

2.19 Name of receiving facility

Mailing address (street or P.O. box)

City or town State ZIP code

Contact name (first and last) Title Phone number Email address

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

City or town State ZIP code

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

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

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

Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable
<input type="checkbox"/> Class A, Alternative 1	<input type="checkbox"/> Option 1
<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2
<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3
<input type="checkbox"/> Class A, Alternative 4	<input type="checkbox"/> Option 4
<input type="checkbox"/> Class A, Alternative 5	<input type="checkbox"/> Option 5
<input type="checkbox"/> Class A, Alternative 6	<input type="checkbox"/> Option 6
<input type="checkbox"/> Class B, Alternative 1	<input type="checkbox"/> Option 7
<input type="checkbox"/> Class B, Alternative 2	<input type="checkbox"/> Option 8
<input type="checkbox"/> Class B, Alternative 3	<input type="checkbox"/> Option 9
<input type="checkbox"/> Class B, Alternative 4	<input type="checkbox"/> Option 10
<input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Option 11

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

2.23	Which treatment process(es) are used at the receiving facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge from your facility? (Check all that apply.)	
	<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering)	<input type="checkbox"/> Thickening (concentration)
	<input type="checkbox"/> Stabilization	<input type="checkbox"/> Anaerobic digestion
	<input type="checkbox"/> Composting	<input type="checkbox"/> Conditioning
	<input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	<input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
	<input type="checkbox"/> Heat drying	<input type="checkbox"/> Thermal reduction
	<input type="checkbox"/> Methane or biogas capture and recovery	<input type="checkbox"/> Other (specify) _____
2.24	Attach a copy of any information you provide the receiving facility to comply with the "notice and necessary information" requirement of 40 CFR 503.12(g). <input type="checkbox"/> Check here to indicate that you have attached material.	
2.25	Does the receiving facility place sewage sludge from your facility in a bag or other container for sale or give-away for application to the land? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.	
2.26	Attach a copy of all labels or notices that accompany the product being sold or given away. <input type="checkbox"/> Check here to indicate that you have attached material.	
	<input type="checkbox"/> Check here once you have completed Items 2.17 to 2.26 (Part 2, Section 2), then → SKIP to Item 2.32 (Part 2, Section 2) below.	
Land Application of Bulk Sewage Sludge		
2.27	Is sewage sludge from your facility applied to the land? <input checked="" 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:	120.59
2.29	Did you identify all land application sites in Part 2, Section 3 of this application? <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.	
2.31	Describe how you notify the NPDES permitting authority for the states where the land application sites are located. Attach a copy of the notification. <input type="checkbox"/> Check here if you have attached the explanation to the application package. <input type="checkbox"/> Check here if you have attached the notification to the application package.	
Surface Disposal		
2.32	Is sewage sludge from your facility placed on a surface disposal site? <input 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:	120.59
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 checked="" type="checkbox"/> Check here if you have attached additional sheets to the application package.	3

EPA Identification Number		NPDES Permit Number AL0063797		Facility Name Dadeville 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 Tony Wolfe Farm						
		Mailing address (street or P.O. box) 1740 West Lafayette Street						
		City or Town Dadeville			State Alabama		ZIP Code 36853	
		Contact Name (first and last) Tony Wolfe		Title Mr.	Phone Number (334) 750-2778		Email Address wolfetd@auburn.edu	
	2.37	Site Contact (Check all that apply.) <input type="checkbox"/> Owner <input checked="" 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:					59.56	
	Incineration							
	2.39	Is sewage sludge from your facility fired in a sewage sludge incinerator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.46 (Part 2, Section 2) below.						
	2.40	Total dry metric tons of sewage sludge from your facility fired in all sewage sludge incinerators per 365-day period:						
	2.41	Do you own or operate all sewage sludge incinerators in which sewage sludge from your facility is fired? <input type="checkbox"/> Yes → SKIP to Item 2.46 (Part 2, Section 2) below. <input type="checkbox"/> No						
	2.42	Indicate the total number of sewage sludge incinerators used that you do not own or operate. (Provide the information in Items 2.43 to 2.45 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.						
	2.43	Incinerator name or number						
		Mailing address (street or P.O. box)						
		City or town			State		ZIP code	
	Contact name (first and last)		Title	Phone number		Email address		
	Location address (street, route number, or other specific identifier)					<input type="checkbox"/> Same as mailing address		
	City or town			State		ZIP code		
2.44	Contact (check all that apply) <input type="checkbox"/> Incinerator owner <input type="checkbox"/> Incinerator operator							
2.45	Total dry metric tons of sewage sludge from your facility fired in this sewage sludge incinerator per 365-day period:							
Disposal in a Municipal Solid Waste Landfill								
2.46	Is sewage sludge from your facility placed on a municipal solid waste landfill? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 3.							
2.47	Indicate the total number of municipal solid waste landfills used. (Provide the information in Items 2.48 to 2.52 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.							

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP
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Form Approved 03/05/19
OMB No. 2040-0004

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

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

Land Application of Bulk Sewage Sludge	3.1	Does your facility apply sewage sludge to land? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 2, Section 4.
	3.2	Do any of the following conditions apply? <ul style="list-style-type: none"> The sewage sludge meets the ceiling concentrations in Table 1 of 40 CFR 503.12, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), and one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8); The sewage sludge is sold or given away in a bag or other container for application to the land; or You provide the sewage sludge to another facility for treatment or blending. <input type="checkbox"/> Yes → SKIP to Part 2, Section 4. <input checked="" type="checkbox"/> No
	3.3	Complete Section 3 for every site on which the sewage sludge is applied. <input checked="" type="checkbox"/> Check here if you have attached sheets to the application package for one or more land application sites.
	Identification of Land Application Site	
	3.4	Site name or number
		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
		Latitude/Longitude of Land Application Site (see instructions)
		Latitude Longitude
	Method of Determination <input checked="" type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____	
3.5	Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location. <input checked="" type="checkbox"/> Check here to indicate you have attached a topographic map for this site.	
Owner Information		
3.6	Are you the owner of this land application site? <input type="checkbox"/> Yes → SKIP to Item 3.8 (Part 2, Section 3) below. <input checked="" type="checkbox"/> No	
3.7	Owner name	
	Mailing address (street or P.O. box)	
	City or town State ZIP code	
	Contact name (first and last) Title Phone number Email address	
Applier Information		
3.8	Are you the person who applies, or who is responsible for application of, sewage sludge to this land application site? <input checked="" type="checkbox"/> Yes → SKIP to Item 3.10 (Part 2, Section 3) below. <input type="checkbox"/> No	
3.9	Applier's name	
	Mailing address (street or P.O. box)	
	City or town State ZIP code	
	Contact name (first and last) Title Phone number Email address	

Site Type

3.10 Type of land application:

<input checked="" type="checkbox"/> Agricultural land	<input type="checkbox"/> Forest
<input type="checkbox"/> Reclamation site	<input type="checkbox"/> Public contact site
<input type="checkbox"/> Other (describe)	

Crop or Other Vegetation Grown on Site

3.11 What type of crop or other vegetation is grown on this site?
Bahia Grass

3.12 What is the nitrogen requirement for this crop or vegetation?
In USDA Zone 8 Bahia Grass requires 75 lb.s to 175 lbs. of nitrogen and phosphorus per year per acre.

Vector Attraction Reduction

3.13 Are the vector attraction reduction requirements at 40 CFR 503.33(b)(9) and (b)(10) met when sewage sludge is applied to the land application site?

<input type="checkbox"/> Yes	<input checked="" 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.

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

Cumulative Loadings and Remaining Allotments

3.16 Is the sewage sludge applied to this site since July 20, 1993, subject to the cumulative pollutant loading rates (CPLRs) in 40 CFR 503.13(b)(2)?

<input type="checkbox"/> Yes	<input checked="" 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.

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

Land Application of Bulk Sewage Sludge Continued

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

Surface Disposal

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

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Form Approved 03/05/19 OMB No. 2040-0004		
Surface Disposal Continued	4.11	Is the boundary of the active sewage sludge unit less than 150 meters from the property line of the surface disposal site? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.13 (Part 2, Section 4) below.			
	4.12	Provide the actual distance in meters:	_____ meters		
	4.13	Remaining capacity of active sewage sludge unit in dry metric tons:	_____ dry metric tons		
	4.14	Anticipated closure date for active sewage sludge unit, if known (MM/DD/YYYY): _____			
	4.15	Attach a copy of any closure plan that has been developed for this active sewage sludge unit. <input type="checkbox"/> Check here to indicate that you have attached a copy of the closure plan to the application package.			
	Sewage Sludge from Other Facilities				
	4.16	Is sewage sludge sent to this active sewage sludge unit from any facilities other than your facility? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.21 (Part 2, Section 4) below.			
	4.17	Indicate the total number of facilities (other than your facility) that send sewage sludge to this active sewage sludge unit. (Complete Items 4.18 to 4.20 directly below for each such facility.) <input type="checkbox"/> Check here to indicate that you have attached responses for each facility to the application package.			
	4.18				
	Facility name _____				
	Mailing address (street or P.O. box) _____				
	City or town _____			State _____	ZIP code _____
	Contact name (first and last) _____		Title _____	Phone number _____	Email address _____
	4.19				
	Indicate the pathogen class and reduction alternative and the vector attraction reduction option met for the sewage sludge before leaving the other facility.				
Pathogen Class and Reduction Alternative			Vector Attraction Reduction Option		
<input type="checkbox"/> Not applicable <input type="checkbox"/> Class A, Alternative 1 <input type="checkbox"/> Class A, Alternative 2 <input type="checkbox"/> Class A, Alternative 3 <input type="checkbox"/> Class A, Alternative 4 <input type="checkbox"/> Class A, Alternative 5 <input type="checkbox"/> Class A, Alternative 6 <input type="checkbox"/> Class B, Alternative 1 <input type="checkbox"/> Class B, Alternative 2 <input type="checkbox"/> Class B, Alternative 3 <input type="checkbox"/> Class B, Alternative 4 <input type="checkbox"/> Domestic septage, pH adjustment			<input type="checkbox"/> Not applicable <input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2 <input type="checkbox"/> Option 3 <input type="checkbox"/> Option 4 <input type="checkbox"/> Option 5 <input type="checkbox"/> Option 6 <input type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <input type="checkbox"/> Option 11		
4.20					
Which treatment process(es) are used at the other facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge before leaving the other facility? (Check all that apply.)					
<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering) <input type="checkbox"/> Stabilization <input type="checkbox"/> Composting <input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization) <input type="checkbox"/> Heat drying <input type="checkbox"/> Methane or biogas capture and recovery		<input type="checkbox"/> Thickening (concentration) <input type="checkbox"/> Anaerobic digestion <input type="checkbox"/> Conditioning <input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Thermal reduction <input type="checkbox"/> Other (specify) _____			

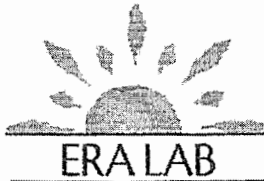
EPA Identification Number		NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Surface Disposal Continued	Vector Attraction Reduction			
	4.21	Which vector attraction reduction option, if any, is met when sewage sludge is placed on this active sewage sludge unit?		
		<input type="checkbox"/> Option 9 (Injection below and surface)	<input type="checkbox"/> Option 11 (Covering active sewage sludge unit daily)	
		<input type="checkbox"/> Option 10 (Incorporation into soil within 6 hours)	<input type="checkbox"/> None	
	4.22	Describe any treatment processes used at the active sewage sludge unit to reduce vector attraction properties of sewage sludge.		
		<input type="checkbox"/> Check here if you have attached your description to the application package.		
	Groundwater Monitoring			
	4.23	Is groundwater monitoring currently conducted at this active sewage sludge unit, or are groundwater monitoring data otherwise available for this active sewage sludge unit?		
		<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.26 (Part 2, Section 4) below.	
	4.24	Provide a copy of available groundwater monitoring data.		
		<input type="checkbox"/> Check here to indicate you have attached the monitoring data.		
4.25	Describe the well locations, the approximate depth to groundwater, and the groundwater monitoring procedures used to obtain these data.			
	<input type="checkbox"/> Check here if you have attached your description to the application package.			
4.26	Has a groundwater monitoring program been prepared for this active sewage sludge unit?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.28 (Part 2, Section 4) below.		
4.27	Submit a copy of the groundwater monitoring program with this permit application.			
	<input type="checkbox"/> Check here to indicate you have attached the monitoring program.			
4.28	Have you obtained a certification from a qualified groundwater scientist that the aquifer below the active sewage sludge unit has not been contaminated?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Item 4.30 (Part 2, Section 4) below.		
4.29	Submit a copy of the certification with this permit application.			
	<input type="checkbox"/> Check here to indicate you have attached the certification to the application package.			
Site-Specific Limits				
4.30	Are you seeking site-specific pollutant limits for the sewage sludge placed on the active sewage sludge unit?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No → SKIP to Part 2, Section 5.		
4.31	Submit information to support the request for site-specific pollutant limits with this application.			
	<input type="checkbox"/> Check here to indicate you have attached the requested information.			

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

Incinerator Information	
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 <input type="checkbox"/> Not available
	County code
	City or town
	State ZIP code
Latitude/Longitude of Incinerator (see instructions)	
Latitude Longitude	
. ' "	
Method of Determination	
<input type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____	
Amount Fired	
5.4	Dry metric tons per 365-day period of sewage sludge fired in the sewage sludge incinerator.
Beryllium NESHAP	
5.5	Submit information, test data, and a description of measures taken that demonstrate whether the sewage sludge incinerated is beryllium-containing waste and will continue to remain as such. <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.
Mercury NESHAP	
5.8	Is compliance with the mercury NESHAP being demonstrated via stack testing? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.11 (Part 2, Section 5) below.
5.9	Submit a complete report of stack testing and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit. <input type="checkbox"/> Check here to indicate that you have attached this information.
5.10	Provide copies of mercury emission rate tests for the two most recent years in which testing was conducted. <input type="checkbox"/> Check here to indicate that you have attached this information.
5.11	Do you demonstrate compliance with the mercury NESHAP by sewage sludge sampling? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.13 (Part 2, Section 5) below.
5.12	Submit a complete report of sewage sludge sampling and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit. <input type="checkbox"/> Check here to indicate that you have attached this information.

Incineration

EPA Identification Number	NPDES Permit Number AL0063797	Facility Name Dadeville WWTP	Form Approved 03/05/19 OMB No. 2040-0004	
Incineration Continued	Dispersion Factor			
	5.13	Dispersion factor in micrograms/cubic meter per gram/second:		
	5.14	Name and type of dispersion model:		
	5.15	Submit a copy of the modeling results and supporting documentation. <input type="checkbox"/> Check here to indicate that you have attached this information.		
	Control Efficiency			
	5.16	Provide the control efficiency, in hundredths, for each of the pollutants listed below.		
		Pollutant	Control Efficiency, in Hundredths	
		Arsenic		
		Cadmium		
		Chromium		
		Lead		
		Nickel		
	5.17	Attach a copy of the results or performance testing and supporting documentation (including testing dates). <input type="checkbox"/> Check here to indicate that you have attached this information.		
	Risk-Specific Concentration for Chromium			
	5.18	Provide the risk-specific concentration (RSC) used for chromium in micrograms per cubic meter:		
	5.19	Was the RSC determined via Table 2 in 40 CFR 503.43? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.21 (Part 2, Section 5) below.		
	5.20	Identify the type of incinerator used as the basis. <input type="checkbox"/> Fluidized bed with wet scrubber <input type="checkbox"/> Other types with wet scrubber <input type="checkbox"/> Fluidized bed with wet scrubber and wet electrostatic precipitator <input type="checkbox"/> Other types with wet scrubber and wet electrostatic precipitator		
	5.21	Was the RSC determined via Table 6 in 40 CFR 503.43 (site-specific determination)? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.23 (Part 2, Section 5) below.		
5.22	Provide the decimal fraction of hexavalent chromium concentration to total chromium concentration in stack exit gas:			
5.23	Attach the results of incinerator stack tests for hexavalent and total chromium concentrations, including the date(s) of any test(s), with this application. <input type="checkbox"/> Check here to indicate that you have attached this information. <input type="checkbox"/> Not applicable			
Incinerator Parameters				
5.24	Do you monitor total hydrocarbons (THC) in the exit gas of the sewage sludge incinerator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5.25	Do you monitor carbon monoxide (CO) in the exit gas of the sewage sludge incinerator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5.26	Indicate the type of sewage sludge incinerator.			
5.27	Incinerator stack height in meters:			
5.28	Indicate whether the value submitted in Item 5.27 is (check only one response): <input type="checkbox"/> Actual stack height <input type="checkbox"/> Creditable stack height			



ENVIRONMENTAL RESOURCE ANALYSTS, INC.
Auburn Technology Park 2975 Brown Court Auburn, AL 36830
Tel. (334) 502-3444 Fax (334) 502-8888 www.eralab.com

Geometric Mean Determination for Fecal Coliforms

Report Created For:

Dadeville WWTP "DRY"

Attention:

Jason Buivids

Address:

475 Buck St.

Dadeville, AL 36853

Project:


25-1021

Sample ID	MPN / g Dry Weight	Log Value
221139-01a	1,407	3.15
221140-01a	615	2.79
221141-01a	1,376	3.14
221142-01a	195	2.29
221143-01a	1	0.17
221144-01a	113	2.05
221145-01a	9	0.95

Mean Log: 2.08

Inverse Log or Geometric Mean: 119 MPN/g dry weight

Reviewed and Approved By:

 11-22-21
Erin Consuegra, MS
Technical Manager



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-1021
Date Received: 10/15/2021

Sample Number: 221131-01	Collection Date: 10/15/2021 7:45
Description: grab	Location: DRY

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia-N	4,680	mg/kg dry weight		80.6	80.6	EPA 350.1	10/15/21 07:45	10/22/21 15:00	TE
Arsenic	<13.7	mg/kg dry weight		13.65	42.4	EPA 6010C	10/15/21 07:45	10/28/21 14:02	JA
Cadmium	0.336	mg/kg dry weight	N10	0.195	0.848	EPA 6010C	10/15/21 07:45	10/28/21 12:57	JA
Chromium	39.7	mg/kg dry weight		0.263	2.12	EPA 6010C	10/15/21 07:45	10/28/21 12:57	JA
Copper	405	mg/kg dry weight		1.611	8.479	EPA 6010C	10/15/21 07:45	10/28/21 14:02	JA
Kjeldahl-N	28,500	mg/kg dry weight		692	1970	EPA 351.2	10/15/21 07:45	10/26/21 10:10	TE
Lead	22.8	mg/kg dry weight		0.712	4.24	EPA 6010C	10/15/21 07:45	10/28/21 12:57	JA
Mercury	<0.11	mg/kg dry weight		0.111	0.111	EPA 7471A	10/15/21 07:45	10/28/21 15:37	JA
Molybdenum	13.8	mg/kg dry weight	N10	6.19	42.4	EPA 6010C	10/15/21 07:45	10/28/21 14:02	JA
Nickel	18.4	mg/kg dry weight		0.415	0.848	EPA 6010C	10/15/21 07:45	10/28/21 12:57	JA
Nitrate/Nitrite	14.2	mg/kg dry weight		3.01	8.61	EPA 353.2	10/15/21 07:45	11/11/21 14:20	TE
Percent Solids	88.3	%				SM 2540G-2015	10/15/21 07:45	10/18/21 10:25	IP
Percent Solids	88.0	%		0.1	0.1	SM 2540G-2015	10/15/21 07:45	10/18/21 10:25	IP
Phosphorous-P	6,280	mg/kg dry weight		365	787	EPA 365.4	10/15/21 07:45	10/26/21 10:10	TE
Potassium	2,200	mg/kg dry weight		164.5	169.6	EPA 6010C	10/15/21 07:45	10/28/21 14:02	JA
Selenium	<1.35	mg/kg dry weight		1.348	2.12	EPA 6010C	10/15/21 07:45	10/28/21 12:57	JA
Zinc	296	mg/kg dry weight		9.666	21.2	EPA 6010C	10/15/21 07:45	10/28/21 14:02	JA



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-1021
Date Received: 10/15/2021

MDL: Method Detection Limit
PQL: Practical Quantitation Limit
BMDL: Below Method Detection Limit

Qualifiers

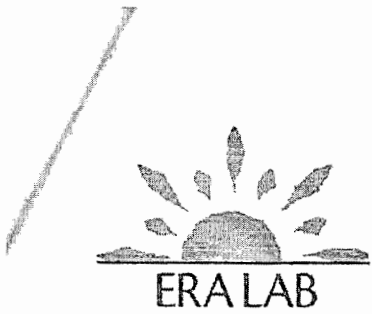
N10 = The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit and should only be relied upon as an estimate.

This report was reviewed for completeness and approved.
Date Complete: 11/12/2021

Dyana Hughes, Reporting Manager

All data on this report is in compliance with the reported method unless otherwise noted.

Erin Consuegra, QA/QC Manager



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

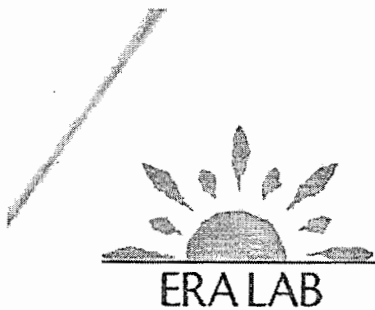
Tel. (334) 502-3444 Fax (334) 502-8888

Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-1021
Date Received: 10/15/2021

Sample Number: 221995-01	Collection Date: 10/14/2021 14:30
Description: grab	Location: Wolfe Farm 1740 W Lafayette St

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia-N	<44.8	mg/kg dry weight		44.8	44.8	EPA 350.1	10/14/21 14:30	11/10/21 14:45	TE
Arsenic	<6.49	mg/kg dry weight		6.486	20.14	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Cadmium	<0.927	mg/kg dry weight		0.927	4.029	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Chromium	71.5	mg/kg dry weight		1.249	10.07	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Copper	14.8	mg/kg dry weight		0.765	4.029	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Kjeldahl-N	582	mg/kg dry weight		104	294	EPA 351.2	10/14/21 14:30	11/08/21 17:20	TE
Lead	7.82	mg/kg dry weight	N10	3.384	20.14	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Mercury	<0.12	mg/kg dry weight		0.116	0.116	EPA 7471A	10/14/21 14:30	10/28/21 15:44	JA
Molybdenum	<2.94	mg/kg dry weight		2.941	20.14	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Nickel	13.9	mg/kg dry weight		1.974	4.029	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Nitrate/Nitrite	24.5	mg/kg dry weight		1.49	4.25	EPA 353.2	10/14/21 14:30	11/11/21 14:31	TE
Organic-N	582	mg/kg dry weight				Calculation	10/14/21 14:30	11/12/21 09:55	EC
pH	6.9	SU	H1			EPA 9045D	10/14/21 14:30	11/02/21 15:00	TE
Phosphorous-P	521	mg/kg dry weight		54.6	118	EPA 365.4	10/14/21 14:30	11/08/21 17:20	TE
Potassium	555	mg/kg dry weight		156.3	161.1	EPA 6010C	10/14/21 14:30	10/28/21 15:16	JA
Selenium	<6.41	mg/kg dry weight		6.405	10.07	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA
Temperature at pH measurement	20.9	degree C					10/14/21 14:30	11/02/21 15:00	TE
Total Solids	89.3	%	H1	0.1	0.1	SM 2540B-2011	10/14/21 14:30	10/25/21 12:45	IP
Zinc	31.5	mg/kg dry weight		4.593	10.07	EPA 6010C	10/14/21 14:30	10/28/21 14:28	JA



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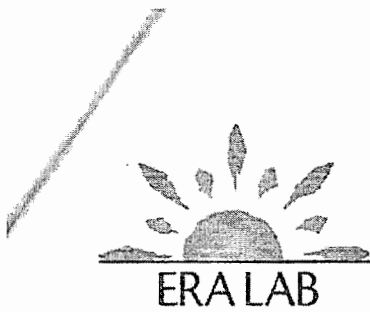
Results of Analysis For: City of Dadeville
 475 Buck St.
 Dadeville, AL 36853

Project: 25-1021

Date Received: 10/15/2021

Sample Number: 221994-01	Collection Date: 10/14/2021 15:00
Description: grab	Location: Ingram Farm 797 Vaugh Loop

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia-N	<41.4	mg/kg dry weight		41.4	41.4	EPA 350.1	10/14/21 15:00	11/10/21 14:30	TE
Arsenic	<27.4	mg/kg dry weight		27.4	85.09	EPA 6010C	10/14/21 15:00	10/28/21 15:36	JA
Cadmium	<3.91	mg/kg dry weight		3.914	17.02	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Chromium	82.8	mg/kg dry weight		5.275	42.54	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Copper	30.0	mg/kg dry weight		3.233	17.02	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Kjeldahl-N	1,260	mg/kg dry weight		108	307	EPA 351.2	10/14/21 15:00	11/08/21 17:10	TE
Lead	<14.3	mg/kg dry weight		14.29	85.09	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Mercury	<0.11	mg/kg dry weight		0.11	0.11	EPA 7471A	10/14/21 15:00	10/28/21 15:42	JA
Molybdenum	<12.4	mg/kg dry weight		12.42	85.09	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Nickel	18.4	mg/kg dry weight		8.338	17.02	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Nitrate/Nitrite	22.7	mg/kg dry weight		1.36	3.89	EPA 353.2	10/14/21 15:00	11/11/21 14:30	TE
Organic-N	1,260	mg/kg dry weight				Calculation	10/14/21 15:00	11/12/21 08:54	EC
pH	6.5	SU	H1			EPA 9045D	10/14/21 15:00	11/02/21 15:00	TE
Phosphorous-P	320	mg/kg dry weight		57	123	EPA 365.4	10/14/21 15:00	11/08/21 17:10	TE
Potassium	1,590	mg/kg dry weight		330.1	340.3	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Selenium	<27.1	mg/kg dry weight		27.06	42.54	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA
Temperature at pH measurement	21.1	degree C					10/14/21 15:00	11/02/21 15:00	TE
Total Solids	86.2	%	H1	0.1	0.1	SM 2540B-2011	10/14/21 15:00	10/25/21 12:45	IP
Zinc	56.3	mg/kg dry weight		19.4	42.54	EPA 6010C	10/14/21 15:00	10/28/21 15:28	JA



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

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Results of Analysis For: City of Dadeville
475 Buck St.
Dadeville, AL 36853

Project: 25-1021

Date Received: 10/15/2021

Sample Number: 221993-01

Description: grab

Collection Date: 10/14/2021 14:45

Location: Ingram Farm 49&Eagle Ck Rd

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia-N	<42.9	mg/kg dry weight		42.9	42.9	EPA 350.1	10/14/21 14:45	11/10/21 16:50	TE
Arsenic	<24.0	mg/kg dry weight		24.04	74.66	EPA 6010C	10/14/21 14:45	10/28/21 15:33	JA
Cadmium	<3.43	mg/kg dry weight		3.434	14.93	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Chromium	90.6	mg/kg dry weight		4.629	37.33	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Copper	15.7	mg/kg dry weight		2.837	14.93	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Kjeldahl-N	999	mg/kg dry weight		106	300	EPA 351.2	10/14/21 14:45	11/08/21 17:00	TE
Lead	<12.5	mg/kg dry weight		12.54	74.66	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Mercury	<0.11	mg/kg dry weight		0.113	0.113	EPA 7471A	10/14/21 14:45	10/28/21 15:41	JA
Molybdenum	<10.9	mg/kg dry weight		10.90	74.66	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Nickel	12.7	mg/kg dry weight	N10	7.317	14.93	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Nitrate/Nitrite	22.5	mg/kg dry weight		1.25	3.56	EPA 353.2	10/14/21 14:45	11/11/21 14:15	TE
Organic-N	999	mg/kg dry weight				Calculation	10/14/21 14:45	11/12/21 08:50	EC
pH	6.4	SU	H1			EPA 9045D	10/14/21 14:45	11/02/21 15:00	TE
Phosphorous-P	386	mg/kg dry weight		55.6	120	EPA 365.4	10/14/21 14:45	11/08/21 17:00	TE
Potassium	508	mg/kg dry weight		289.7	298.6	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Selenium	<23.7	mg/kg dry weight		23.74	37.33	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA
Temperature at pH measurement	20.8	degree C					10/14/21 14:45	11/02/21 15:00	TE
Total Solids	90.7	%	H1	0.1	0.1	SM 2540B-2011	10/14/21 14:45	10/25/21 12:45	IP
Zinc	35.2	mg/kg dry weight	N10	17.02	37.33	EPA 6010C	10/14/21 14:45	10/28/21 15:23	JA



Environmental Resource Analysts, Inc.

2975 Brown Court
Auburn, AL 36830
334-502-3444
(Fax) 334-502-8888

30 Years in Business, and Counting
www.eralab.com

Laboratory Testing Report

Sample #: 309984

Prepared For:

City of Dadeville
475 Buck Street
Dadeville, AL 36853

Attention: Jason Buivids

We appreciate the opportunity to provide testing results for you. The analytical results in this report are based upon information supplied by you, the client, and are for your exclusive use. If you have any questions regarding this data, please do not hesitate to contact the Technical Manager or the Lab Director at the number listed above.

The analyses presented in this report were performed by ERA, Inc. Any exceptions or problems with the analyses are noted in the Laboratory Testing Report.

Any issues encountered during sample receipt are documented on the Cooler Receipt Form.

The results as reported relate only to the item(s) submitted for testing.

This report shall be used or copied only in its entirety. ERA, Inc. is not responsible for the consequences arising from the use of a partial report.



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

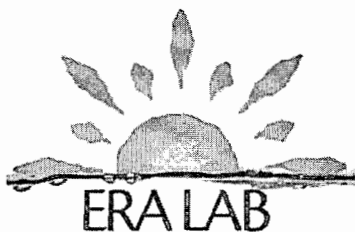
Results of Analysis For: City of Dadeville
 475 Buck Street
 Dadeville, AL 36853

Project: 25-1022
 Date Received: 10/14/2022

Sample Number: 309984-01
 Sample Type: Grab

Collection Date: 10/14/2022 8:15
 Location: Dry

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
Ammonia-N	5,590	mg/kg Dry Weight	42.5	42.5	EPA 350.1	10/18/22 12:19	BG	
Arsenic	<9.05	mg/kg Dry Weight	9.05	28.12	EPA 6010C	10/20/22 13:34	JA	
Cadmium	<1.29	mg/kg Dry Weight	1.29	5.62	EPA 6010C	10/20/22 13:34	JA	
Chromium	32.4	mg/kg Dry Weight	1.74	14.06	EPA 6010C	10/20/22 13:34	JA	
Copper	454	mg/kg Dry Weight	1.07	5.62	EPA 6010C	10/20/22 13:34	JA	
Kjeldahl-N (TKN)	2,680	mg/kg Dry Weight	150	274	EPA 351.2	10/19/22 15:01	BG	
Lead	30.0	mg/kg Dry Weight	4.72	28.12	EPA 6010C	10/20/22 13:34	JA	
Mercury	0.490	mg/kg Dry Weight	0.11	0.11	EPA 7471A	10/18/22 12:44	JA	
Molybdenum	10.2	mg/kg Dry Weight	4.10	28.12	EPA 6010C	10/20/22 13:34	JA	N10
Nickel	17.2	mg/kg Dry Weight	2.76	5.62	EPA 6010C	10/20/22 13:34	JA	
Nitrate/Nitrite as N	<3.92	mg/kg Dry Weight	3.92	11.2	EPA 353.2	10/21/22 16:33	BG	
Phosphorous-P	1,190	mg/kg Dry Weight	50.9	110	EPA 365.4	10/19/22 15:01	BG	
Potassium	1,980	mg/kg Dry Weight	109.09	112.46	EPA 6010C	10/20/22 13:34	JA	*
Selenium	<8.94	mg/kg Dry Weight	8.94	14.06	EPA 6010C	10/20/22 13:34	JA	
Total Solids (Percent Solids)	86.8	%	0.01	0.01	SM 2540G-2015	10/17/22 13:00	JA	
Zinc	513	mg/kg Dry Weight	6.41	14.06	EPA 6010C	10/20/22 13:34	JA	



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MDL: Method Detection Limit
PQL: Practical Quantitation Limit

Qualifiers

- N10 = The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit and should only be relied upon as an estimate.
- * = ERA is not TNI accredited for this analyte.

This report was reviewed for completeness and approved.
Date Complete: 10/24/2022

Dyana Hughes, Reporting Manager

All data on this report is in compliance with the reported method unless otherwise noted.

Erin Consuegra, Technical Manager



CHAIN OF CUSTODY



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830
Tel. (334) 502-3444 Fax (334) 502-8888

Any requests for EXPEDITED results must be pre-arranged with the lab.

Client: Dadeville WWTP		G or C	Composite Sample(s)		
Project: <u>25-1022</u>			Subsample Frequency	First Subsample Date/Time	Last Subsample Date/Time
Sample No.	309984-01	Grab			
Location	Dry				
Collector	<u>--- VJB/JW</u>				
Date/Time Sample	<u>10/14/22 0815</u>				

For Client Use:		Relinquished To Sealed Container: <input type="checkbox"/>	
Relinquished By: <u>VJB</u>	Date/Time: <u>10/14/22 0855</u>	Received By: _____	Date/Time: _____
Relinquished By: _____	Date/Time: _____	Received By: _____	Date/Time: _____
Relinquished By: _____	Date/Time: _____	Received By: _____	Date/Time: _____

For Lab Use:

Sample	Preservation	Analysis	Preservation CK	Sample	Preservation	Analysis	Preservation CK
-01A	H2SO4	503-Arsenic, 503-Cadmium, 503-Chromium, 503-Copper, 503-Lead, 503-Mercury, 503-Molybdenum, 503-Nickel, 503-Selenium, 503-Zinc, 503-Ammonia-N, 503-TKN, 503-TP, Percent Solids, Solid NO2/NO3-Spec, 503-Potassium	pH≤2 Rcvd <u>BD</u>				
Received at Lab By: <u>BD</u>		Date/Time: <u>10/14/22 0855</u>	Date Kit Prepared: <u>9/21/22</u>				



Client Dader:16

Sample # 309983-309988

ERA Cooler Receipt Form

1. Condition of Cooler Upon Unpacking

A. Date & Time of Cooler Unpacking 10/14/22 1630 Receiving Analyst: [Signature]

B. Method of Delivery:

Fed Ex UPS USPS ERA Driver Client Drop Off Other
Tracking Number _____

C. Condition of Custody Seal upon arrival: Absent Present & Broken by ERA Driver Present & sealed Present & broken

2. Condition of Cooler Contents

A. Chain Of Custody Information: Completed Incomplete,

B. Cooling Process Solid Ice Ice pack Dry Ice None Other

C. Broken Bottles? No Yes If yes, which? _____

D. Temperature °C 3.6 Thermometer ID: Amburn
Reason for incorrect temp: ($>6.0^{\circ}\text{C}$) Frozen Beginning of Cooling process Ice melted Other

3. Sample Information and Verification

A. Sample Numbers match Chain of Custody? Yes No, _____

Correct bottle types used for each sample? Yes No, _____

All samples arrived within holding time? Yes No, _____

Sufficient volume in each bottle for tests? Yes No, _____

B. All samples were verified & marked on the Chain of Custody? Yes No, _____

C. Samples with preservative have been checked and are in the correct pH range? Yes, no preservatives needed No, see preservative info Not applicable

pH Strip Lot #: _____

Additional Preservative information	
1	Preservative Type: _____
2	Preservative Lot # _____
3	Preservative Type: _____
4	Preservative Lot # _____

D. Hexane Lot for O&G N/A

E. Trip Blanks Absent Present N/A

4. Comments and Resolutions

If any non-compliance was noted (temp out of range, holding time exceedance), contact the client to inform them and document here. Note how client was contacted (email/phone) when/who contacted and result of communication:

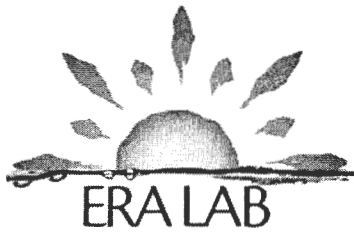
How was client contacted:	Email	Phone	Who contacted?	Date/Time of contact:
Result of communication:				

5. Analyst Conformation

The information regarding cooler, chain of custody, and sample receipt is correct and verified by the analyst. If conditions are not met the appropriate actions were taken by the receiving analyst and/or the lab manager.

Primary Reviewer: [Signature]

Secondary Reviewer: [Signature]



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

Auburn Technology Park - 2975 Brown Ct. - Auburn, AL 36830

Tel. (334) 502-3444 Fax (334) 502-8888

Sample #: 309984

All results are reported in Central Time.

Abbreviations

BMDL – Below Method Detection Limit	RECRA – Resource Conservation and Recovery Act
BOD – Biochemical Oxygen Demand	RL – Reporting Limit
BTEX – Benzene, Ethylbenzene, Toluene, Xylenes	SID – State Indirect Discharge
cBOD – Carbonaceous Biochemical Oxygen Demand	SOC – Synthetic Organic Compound
CCV – Continuing Calibration Verification	SVOC – Semi-volatile Organic Compound
COD – Chemical Oxygen Demand	TCLP – Toxic Characteristic Leaching Procedure
DO – Dissolved Oxygen	TD – Total Dissolved
DOC – Dissolved Organic Carbon	TDS – Total Dissolved Solids
DW – Drinking Water	TKN – Total Kjeldahl nitrogen
HAA – Halo Acetic Acid	TNI – The NELAC Institute
HPC – Heterotrophic Plate Count	TOC – Total Organic Carbon
HR – High Range	TOX – Toxicity
ICP – Inductively Coupled Plasma	TS – Total Solids
LCS – Laboratory Control Sample	TSS – Total Suspended Solids
LR – Low Range	TTHM – Total Trihalomethanes
MDL – Method Detection Limit	UV – Ultraviolet
MS – Mass Spectrometer	VOC – Volatile Organic Compound
MS – Matrix Spike	VS – Volatile Solids
ND – Not Detected at or above the MDL	WW – Wastewater
NPDES – National Pollutant Discharge Elimination System	
PQL – Practical Quantitation Limit	

Additional Information

Carbon Dioxide determination is a calculation using the Alkalinity and pH values.
ADMI color is reported using 10 ordinates at 400-700nm wavelength using instrument DR4000.
Reported TOC values are of non-purgable organic carbon.
ERA is not TNI accredited for field analyses.

Environmental Resource Analysts, Inc is TNI accredited through Florida DOH under E87542. For a full list of analytes, methods, and matrices, please request a copy of our scope from the Reporting Manager or download from our website: eralab.com

End of Report

Dadeville Water and Sewer Board Best Management Practices for Biosolids Land Application

Definition/Uses

Biosolids is domestic wastewater sludge that meets standards for use as a fertilizer or soil conditioner. These standards include monitoring requirements, metal limitations, pathogen reduction, vector requirements, and best management practices.

Applying biosolids to land uses the available nitrogen, phosphorus, and potash as fertilizer for growing crops. It is an environmentally sound practice sanctioned by the U.S. Environmental Protection Agency (EPA) and the Alabama Department of Environmental Management (ADEM). Reusing biosolids on crops, pastures, and timberland reduces water pollution. It eliminates the environmental risks and costs associated with sludge disposal options, benefiting all Alabamians.

Pollutant standards for land application

Testing for metal, pathogens, and other pollutants is required to determine the representative quality of the biosolids. Treat biosolids to reduce pathogens and vectors before application. The concentration of metal and other pollutants in the biosolids determines the acceptability for land application and the appropriate loading rates to protect crops, soils and the environment.

Vector Attraction Reduction

Vector Attraction Reduction Insects, birds, rodents, and domestic animals may transport sewage sludge and pathogens from sewage sludge to humans. Vectors are attracted to sewage sludge as a food source, and the reduction of the attraction of vectors to sewage sludge to prevent the spread of pathogens is a focus of the Part 503 regulation. Vector attraction reduction can be accomplished in two ways: by treating the sewage sludge to the point at which vectors will no longer be attracted to the sewage sludge and by placing a barrier between the sewage sludge and vectors.

Reducing Vector Attraction Options

Option 1: At least 38% reduction in volatile solids during 503.33(b)(1) sewage sludge treatment

Option 2: Less than 17% additional volatile solids loss during 503.33(b)(2) bench-scale anaerobic batch digestion of the sewage sludge for 40 additional days at 30°C to 37°C (86°F to 99°F)

Option 3: Less than 15% additional volatile solids reduction during 503.33(b)(3) bench-scale aerobic batch digestion for 30 additional days at 20°C (68°F)

Option 4: SOUR at 20°C (68°F) is ≤ 1.5 mg oxygen/hr/g total 503.33(b)(4) sewage sludge solids

Option 5: Aerobic treatment of the sewage sludge for at least 14 503.33(b)(5) days at over 40°C (104°F) with an average temperature of over 45°C (113°F)

Option 6: Addition of sufficient alkali to raise the pH to at least 12 503.33(b)(6) at 25°C (77°F) and maintain a pH ≥ 12 for 2 hours and a pH ≥ 11.5 for 22 more hours

Option 7: Percent solids $\geq 75\%$ prior to mixing with other materials 503.33(b)(7)

Option 8: Percent solids $\geq 90\%$ prior to mixing with other materials 503.33(b)(8)

Option 9: Sewage sludge is injected into soil so that no significant 503.33(b)(9) amount of sewage sludge is present on the land surface 1 hour after injection, except Class A sewage sludge which must be injected within 8 hours after the pathogen reduction process

Option 10: Sewage sludge is incorporated into the soil within 6 hours 503.33(b)(10) after application to land or placement on a surface disposal site, except Class A sewage sludge which must be applied to or placed on the land surface within 8 hours after the pathogen reduction process

Option 11: Sewage sludge placed on a surface disposal site must be 503.33(b)(11) covered with soil or other material at the end of each operating day

Option 12: pH of domestic septage must be raised to ≥ 12 at 25°C 503.33(b)(12) (77°F) by alkali addition and maintained ≥ 12 for 30 minutes without adding more alkali

Spills, Odor Complaints, and Fugitive Airborne Dust

Any and all spills and odor complaints are reported to WWTP employee(s). If in an area accessible to the public, the dried sludge will be removed from the site, the area will be limed, and signage placed to warn the public. Lime will be used for any odor complaints on the land application sites. The sludge is spread at rate to prevent as much fugitive airborne dust as possible.

The following list of practices is based on the regulations and standard permit conditions:

1. No discharge

Biosolids must not discharge from the application site, except during catastrophic or chronic precipitation exceeding the 1-in-10 year rainfall level.

2. Public contact sites and public-use or distribution of biosolids

- Class A biosolids applied to public-use sites, distributed for general public use or used on vegetable crops, root crops or home gardens must comply with 40 CFR 503 Subpart B.
- A biosolids management plan or engineering report for Class A biosolids used on public sites must be approved by the EPA and ADEM before use or distribution.
- Do not apply Class B biosolids to public contact areas, residential lawns or turf farms unless the biosolids are incorporated. Restrict public access for 12 months. You must gain approval from the permitting authority.

3. Crop restrictions

Do not apply Class B biosolids to root crops, home gardens, or vegetable crops whose edible parts will come in contact with applied biosolids, unless the crops are not used for direct human consumption.

4. Harvest and grazing restrictions

Do not apply biosolids to land within 30 days of harvest or grazing by cattle.

5. Threatened or endangered species

Applying biosolids must not adversely affect a threatened or endangered species or its designated critical habitat. This is in accordance with section 4 of the Endangered Species Act.

6. Buffer zones

Do not apply biosolids within:

- 300 feet of a water supply well, sinkhole, lake, pond, water supply reservoir or water supply intake in a stream;
- 300 feet of a losing stream, no-discharge stream, stream stretches designated for whole body contact recreation, wild, and scenic rivers
- 500 feet of an inhabited building/dwellings;
- 100 feet of wetlands or permanent flowing streams;
- 100 feet of waters of the state, including intermittent flowing streams.
- 100 feet of from the property boundary

7. Slope limitations for application sites

- On slopes of 0 to 6 percent, there is no rate limitation
- On 7 to 12 percent slopes, you may apply biosolids when soil conservation practices are used to meet minimum erosion (T) levels in accordance with U.S. Soil Conservation service recommendations.
- For slopes of 12 percent or more, apply biosolids only when the site is maintained in grass vegetation with at least 80 percent ground cover. Do not apply more than two dry tons per acre per year.

8. Storm water runoff

- Do not place biosolids in a location where it is reasonably certain that pollutants will be transported into waters of the state during stormwater runoff.
- Subsurface inject the biosolids, incorporate after application, use soil conservation practices, adhere to slope restrictions, create buffer areas, and follow other approved methods, as necessary.
- Soil conservation practices for application must be approved by the U.S. Soil Conservation Service.

9. Frozen, snow-covered or saturated soil conditions

Do not apply biosolids when the ground is frozen, snow covered or when the soil is saturated, unless site restrictions or other controls are provided to prevent pollutants from being discharged during snowmelt or storm water runoff. If land application is necessary during inclement weather, use sites which meet the following:

- A maximum field slope of 6 percent and a minimum 300 feet grass buffer between the application site and waters of the state.
- A maximum field slope of 2 percent and 100 feet grass buffer between the application site and waters of the state.
- Other best management practices approved by the EPA or ADEM.

10. Biosolids storage

- Provide adequate sludge and biosolids storage as needed to match the application windows for crop planting, harvesting and inclement weather conditions. Operate storage basins so there is no discharge to waters of the state.
- Storage should be increased for tilled cropland application sites depending on the crop rotations and ratio of tilled land to grassland. Recommended storage is 180 to 365 days if all sites are tilled crop land.
- Any storage area located off-site of the sludge or biosolids generating facility must have a separate individual permit for the storage site, except for temporary stockpiles.
- Use temporary stockpiles for solid or semi-solid materials (no free liquids) only. Limit the stockpile to two weeks per year at any one application field. Locate stockpiles at least 300 feet from drainage ways or they must have runoff collection berms at least 6 inches high around the pile.

11. Application rates

Evenly spread the biosolids over the entire application site. Do not dump the material in batches or spread a pile using a blade, disc or similar equipment.

12. Application equipment

Properly operate and maintain application equipment. Visually check the equipment each day during operation. Apply biosolids during daylight hours only, unless approval is obtained from the permitting authority.

13. Soil depth

Do not apply biosolids to sites that have less than 5 feet of soil above bedrock or a groundwater aquifer, unless authorized in a site-specific permit for the application site.

14. Record keeping

Sludge applicators must keep detailed records for at least five years on each location and amounts of biosolids applied.

Reference Information

EPA regulations, under Title 40 Code of Federal Regulations Part 503 (40 CFR 503), establish the minimum national standards for the use and disposal of domestic sludge. These standards include limitations for the land application of biosolids.

ADEM Administrative Code Chapter 335-13-16, established new regulations for All Generators, Distributors, and Suppliers of by-product materials, including domestic sludge/biosolids under Beneficial Use of By-Product Materials for the Purpose of Land Application.

Dadeville WWTP Best Management Plan

01. Description of Operations

The Dadeville WWTP is located in Tallapoosa County, Dadeville, Alabama. The Dadeville WWTP is a secondary treatment facility producing and disposing of dried sludge (By-product material) by Land Application. The Dadeville WWTP wastes the sludge from the aeration basin and clarifiers to an aerobic digester and thickener. The wasted sludge is digested approximately 40 days prior to disposal on the drying beds or the use of a dewatering box.

02. Timing and Method of Application

The sludge is dewatered and hauled to three (3) different farms (on a monthly rotation) where the solids are land applied by use of a truck with a fertilizer spreader. All three private farms are used for the application of sludge in a monthly rotation.

03. Crops Grown and Animal Grazing

All three privately owned farms use the land applied sludge for fertilizer/soil enrichment purposes for growing Bahia grass for the feeding of livestock. No animals can graze on the land-applied section for greater than 30 days after application of the sludge. All farms are sectioned off to keep livestock off of the areas where the sludge is applied for a period of at least (30) days or more.

The Tony Wolfe farm is 170 acres and grows Bahia grass for the feeding of livestock. The address is 1740 West Lafayette Street, Dadeville, AL. 36853 in Tallapoosa County.

The Ron Ingram farm is 63 acres and grows Bahia grass for the feeding of livestock. The Ron Ingram farm is located at 797 Vaughn Loop, Jacksons Gap, AL. 36861 in Tallapoosa County.

The Barry Ingram farm is 32 acres and grows Bahia grass for the feeding of livestock. The Barry Ingram farm is located at Hwy 49 and Church Road, Jacksons Gap, AL. 36861 in Tallapoosa County.

04. Restricted Public Access

All three private farms are private property and fenced in to restrict public access, they have a low potential for public exposure. All the farms meet all setback distances for sludge application.

05. Spills, Odor Complaints, and Fugitive Airborne Dust

Any and all spills and odor complaints are reported to WWTP employee(s). If in an area accessible to the public, the dried sludge will be removed from the site, the area will be limed, and signage placed to warn the public. Lime will be used for any odor complaints on the land application sites. The sludge is spread at rate to prevent as much fugitive airborne dust as possible.

06. Vector Attraction (Insects, Rodents, and Birds)

The vector attraction reduction option was satisfied using option # 7, by the percent solid concentration of the sewer sludge not containing unstabilized solids generated by primary wastewater treatment being greater than 75% based on moisture content and total solids. This is option #7 for 40CFR 503.33.

07. Reporting, Records, and Lab information

The Sludge Inventory Sheets, Sludge Land Application Record Sheets, MWPP Sewer Sludge Survey(s) and RAS/Sludge/ Soil Sample Lab Testing Results are kept at the Dadeville Waste Water Treatment Plant located at: 475 Buck Street, Dadeville, AL 36853 (Telephone Number: 256-825-7355).

Sampling of the Returned Activated Sludge (RAS), the Dried Sludge, and Soil Samples from each of the above listed (3) three Farms are sent to an Independent Lab.

The Independent Lab used is: ERA Lab, 2975 Brown Ct., Auburn, AL 36830 (Telephone Number: 334-502-3444) on an annual basis to ensure that the Sludge meets the required parameters for land application.

08. Emergency Support and Equipment Contacts

Title	Name	Primary Phone	Alternate Phone	Email
Tallapoosa County Health Dept.	Amy Baker	256-329-5116 334-300-7429	FAX 256-329-1670	amy.baker2@ adph.state.al.us
Tallapoosa County Health Dept.	Bridgette Key	256-329-5116 334-300-7933	FAX 256-329-1670	bridgette.key@ adph.state.al.us
ADEM Engineer	Shanda R. Torbert	334-271-7800	FAX 334-271-7800	storbert@ adem.alabama.gov
ADEM Materials Management	Molly Kilpatrick	334-292-0260	FAX 334-271-7800	molly.kilpatrick@adem.ala bama.gov
ADEM Materials Management	Cody Ennis	334-271-7948	Fax 334-271-7800	cody.ennis@adem.alabam a.gov
ADEM Materials Management	Wayne Crockett	334-514-9459	Fax 334-271-7800	CWCrockett@adem.alaba ma.gov
Dadeville Fire Chief	Scott Atkins	256-825-8534	334-728-2624	satkins2115@gmail.com
Dadeville Police Chief	Jonathan Floyd	256-825-6212	256-825-9959	jonathan.floyd.301@gmail .com
Tallapoosa County Sheriff	Dispatcher	256-825-4264	256-825-1032	N/A
Tallapoosa County EMS	Dispatcher	911	256-825-9811	N/A
Tallapoosa County EMA	Jason Moran	256-825-1078	256-596-1415	jmoran@tallaco.com
Lake Martin Community Hospital	Operator	256-825-7821	256-825-3201	N/A
Emergency Equipment Dadeville Street Dept.	Gene Collum	256-825-4551	256-307-3784	N/A
Emergency Equipment Dadeville Gas Dept.	Jon Rodgers	256-825-9242 256-825-5004	334-750-7009	N/A
Emergency Electrical AMPS	Kelley Jaye	256-825-0477	256-397-4399	kjaye@alabamamotorand pump.com
Emergency Electrical Nelson's	Gary Nelson	256-234-3000	256-397-2701	gary@lxrpm.com
Emergency Electrical ASAP	Gene Lamb	256-596-1504	256-825-2424	kimmie36860@ yahoo.com
Emergency Pump-Truck	Phil Stephens	256-896-4038	256-596-1082 256-896-4038	N/A
Emergency Pump-Truck	Darren Hutchins	256-414-4207	N/A	N/A
Media Newspaper The Dadeville Record	Operator	256-234-4281	FAX 256-234-6550	N/A

09. Emergency Equipment and Locations

Equipment ID	Equipment Name	Equipment Description	Equipment Location
Front-end loader/Backhoe	Front-end Loader/Backhoe	Front-end Loader/Backhoe	Dadeville WWTP
Front-end loader/Backhoe	Front-end Loader/Backhoe	Front-end Loader/Backhoe	Dadeville Water and Sewer Board Shop
Front-end loader/Backhoe	Front-end Loader/Backhoe	Front-end Loader/Backhoe	Dadeville Street Dept. Shop
Assorted Tools	Assorted Tools	Shovels—etc.	Dadeville Water and Sewer Board Shop
Assorted Tools	Assorted Tools	Shovels—etc.	Dadeville WWTP
Signage/Files/Supplies	Signage/Files/Supplies	Signage/Files/Supplies	Work Trucks/ Dadeville Water and Sewer Board Shop/WWTP
Gloves/Bleach/Sprayers	Gloves/Bleach/Sprayers	Gloves/Bleach/Sprayers	Work Trucks/ Dadeville Water and Sewer Board Shop/WWTP
Dump Truck	Dump Truck	Dump Truck	Work Trucks/ Dadeville Water and Sewer Board Shop/WWTP
Dump Truck	Dump Truck	Dump Truck	Dadeville Street Dept. Shop
Lime	Lime	Lime	Dadeville WWTP
Lime	Lime	Lime	Floyd's Feed & Seed

10. SAFETY

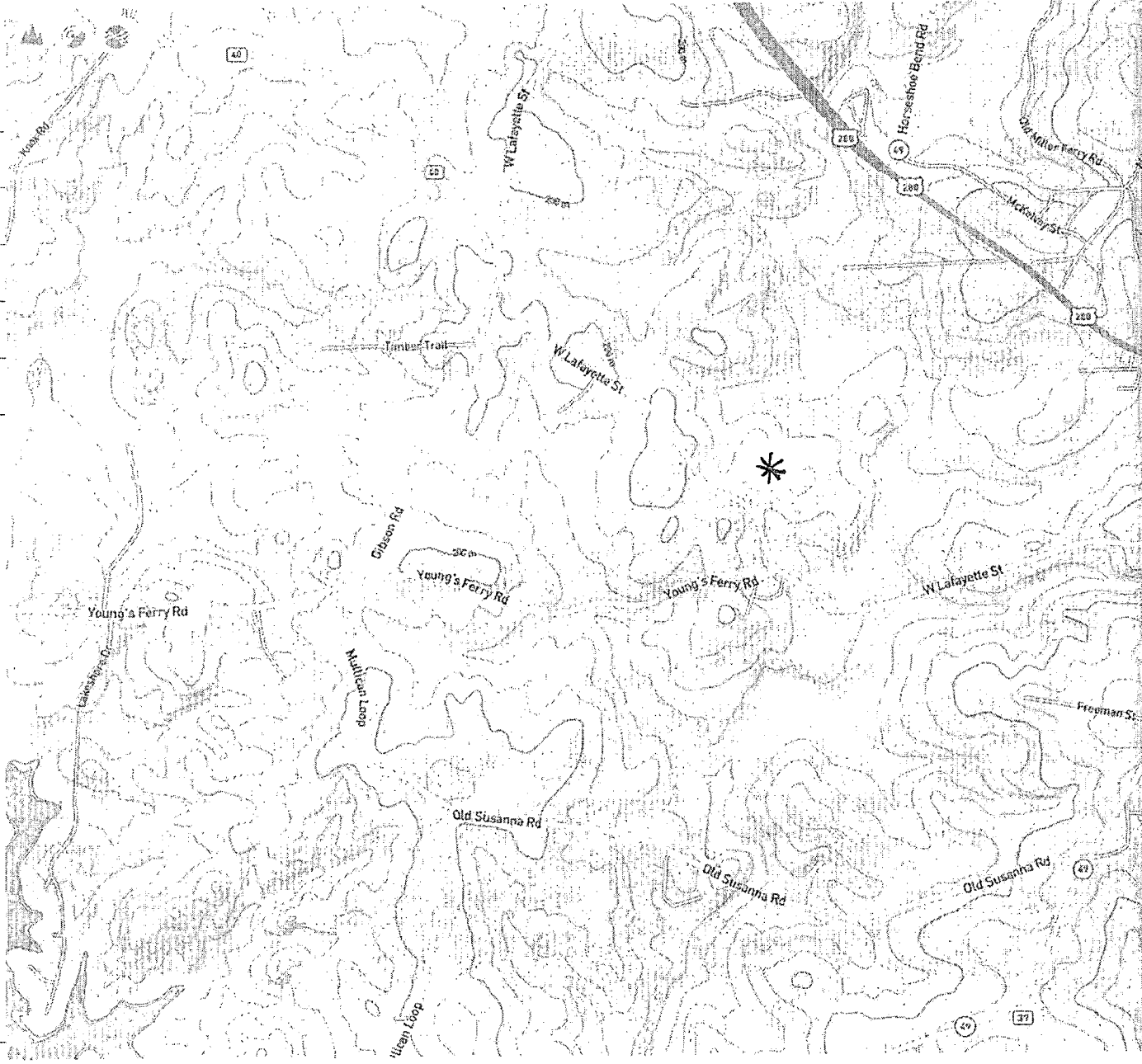
All Emergency Response shall comply with all Federal, State, and City safety regulations (OSHA, IDOT, etc.).

Best Management Practices Follow-up

Biosolids that meet the standards for metal, pathogens, vectors and other pollutants are safe to apply when following the best management practices.

Best management practices, or "good farming practices," include agronomic load rates, buffer zones, depth to groundwater, wetlands protection, harvest and grazing deferrals, threatened and endangered species protection, field slope limitations, restrictions for frozen or saturated soils, requirements for public-use sites, soil conservation practices and other site restrictions.

The Dadeville WWTP's goal is to follow Best Management Practices to do our part to keep our environment safe. Up-dates to safer and newer technologies will be implemented as needed.



Location | Map Name

1740 W Lafayette St, Dadevill...

2021 2022

All

0 records here. Try clearing timeline and/or scale filters.

Elevation @ 32.835, -85.735 is 626 ft. (191 m)

TONY WOLFE FARM

Lat: 32° 39' 27" N Long: 85° 45' 13" W

DMS DD MGR UTM

Scale 1:12,896

Map Records



Location | Map Name

Church Rd, Jacksons Gap, AL...

3021 ————— 2022

All ————— All

0 records here. Try dearing timeline and/or scale filters.
Elevation @ 32.902 -85.773 is 676 ft (206 m)

BARRY INGRAM FARM

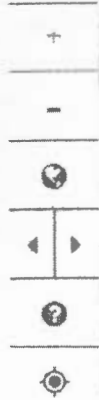
Lat: 32° 54' 14" N Long: 85° 48' 0" W

DMS DD MGR UTM

Scale: 1:25,000
Map Records: 0

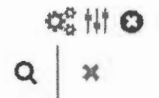
Footed tag than shows distance and characteristics, 75' near Jackson's Gap, AL.

topoView



Location | Map Name

797 Vaughn Loop, Jacksons ...



All | All

0 records here. Try clearing timeline and/or scale filters.
Elevation @ 32.893, -85.785 is 661 ft. (202 m)

RON INGRAM FARM

Lat: 32° 52' 37" N Long: 85° 45' 15" W

DMS DD MGR UTM

Scale: 1:10,000
Map Record: 0

Feeling fog? Our servers obscure and deconvolute, 79° near Jackson, Ga., AL.