LANCE R. LEFLEUR
DIRECTOR

KAY IVEY
GOVERNOR

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

August 18, 2022

Jimmy Green Jr., General Manager
Scottsboro Water, Sewer, and Gas Board
PO Box 550
Scottsboro, AL 35768

RE: Draft Permit
NPDES Permit No. AL0031372
Scottsboro Southside WWTP
Jackson County, Alabama

Dear Mr. Green Jr.:

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.

Should you have any questions, please contact the undersigned michael.simmons@adem.alabama.gov

Sincerely,

Michael N. Simmons
Municipal Section
Water Division

Enclosure

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

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

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

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

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

ADEM
Alabama Department of Environmental Management

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: SCOTTSBORO WATER, SEWER, AND GAS BOARD
PO BOX 550
SCOTTSBORO, AL 35768

FACILITY LOCATION: SCOTTSBORO SOUTHSIDE WWTP (0011 - 5 MGD, 0012 – 15 MGD)
318 CAMILLE STREET
SCOTTSBORO, ALABAMA
JACKSON COUNTY

PERMIT NUMBER: AL0031372

RECEIVING WATERS: TENNESSEE RIVER (GUNTERSVILLE LAKE)
ROSEBERRY CREEK (GUNTERSVILLE LAKE) – STORMWATER ONLY
UT TO ROSEBERRY CREEK (GUNTERSVILLE LAKE) – STORMWATER ONLY

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 001-1: 5 MGD Mechanical Plant

During the period beginning on the effective date of this permit and lasting through the completion of the facility expansion at Outfall DSN 001-2, the Permittee is authorized to discharge from Outfall 001, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	(Report) Minimum Daily	*****	*****	mg/l	2X Weekly	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	9.0 Maximum Daily	S.U.	2X Weekly	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	1251 Monthly Average	1876 Weekly Average	lbs/day	*****	30.0 Monthly Average	45.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	834 Monthly Average	1251 Weekly Average	lbs/day	*****	20.0 Monthly Average	30.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

(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.

1. DSN 001-1 (continued): 5 MGD Mechanical Plant

During the period beginning on the effective date of this permit and lasting through the completion of the facility expansion at Outfall DSN 001-2, 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)
Chlorine, Total Residual (50060) See note (3) Effluent Gross Value	*****	*****	*****	*****	*****	1.0 Maximum Daily	mg/l	2X Weekly	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	708 30 Day Geometric	1320 Maximum Daily	col/100mL	2X Weekly	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	1042 Monthly Average	1563 Weekly Average	lbs/day	*****	25.0 Monthly Average	37.5 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

(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.

2. DSN 001-2: 15 MGD Mechanical Plant

During the period beginning on the date of completion of the facility expansion and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 001-2, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	(Report) Minimum Daily	*****	*****	mg/l	5X Weekly	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	9.0 Maximum Daily	S.U.	5X Weekly	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	3753 Monthly Average	5629 Weekly Average	lbs/day	*****	30.0 Monthly Average	45.0 Weekly Average	mg/l	5X Weekly	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	5X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	2502 Monthly Average	3753 Weekly Average	lbs/day	*****	20.0 Monthly Average	30.0 Weekly Average	mg/l	5X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

(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.

2. DSN 001-2 (continued): 15 MGD Mechanical Plant

During the period beginning on the date of completion of the facility expansion 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)
Chlorine, Total Residual (50060) See note (3) Effluent Gross Value	*****	*****	*****	*****	*****	1.0 Maximum Daily	mg/l	5X Weekly	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	396 30 Day Geometric	739 Maximum Daily	col/100mL	5X Weekly	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	3127 Monthly Average	4691 Weekly Average	lbs/day	*****	25.0 Monthly Average	37.5 Weekly Average	mg/l	5X Weekly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	5X Weekly	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

(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.

3. DSN 001-T: 5 MGD Mechanical Plant Toxicity

During the period beginning on the effective date of this permit and lasting through the completion of the facility expansion at Outfall DSN 001-2, 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
Toxicity, Ceriodaphnia Acute (61425) Effluent Gross Value	*****	0 Single Sample	pass=0;fail=1	*****	*****	*****	*****	See Permit Requirements	24-Hr Composite	October
Toxicity, Pimephales Acute (61427) Effluent Gross Value	*****	0 Single Sample	pass=0;fail=1	*****	*****	*****	*****	See Permit Requirements	24-Hr Composite	October

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

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

4. DSN 012-T: 15 MGD Mechanical Plant Toxicity

During the period beginning on the date of completion of the facility expansion and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 0012, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal
Toxicity, Ceriodaphnia Acute (61425) Effluent Gross Value	*****	0 Single Sample	pass=0;fail=1	*****	*****	*****	*****	See Permit Requirements	24-Hr Composite	October
Toxicity, Pimephales Acute (61427) Effluent Gross Value	*****	0 Single Sample	pass=0;fail=1	*****	*****	*****	*****	See Permit Requirements	24-Hr Composite	October

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

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

5. DSN 002-S: Stormwater

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 002, 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)
pH (00400) Storm Water	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Annually	Grab	Not Seasonal
Solids, Total Suspended (00530) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Oil & Grease (00556) Storm Water	*****	*****	*****	*****	*****	15.0 Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Phosphorus, Total (As P) (00665) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Storm Water	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Annually	Calculated	Not Seasonal
E. Coli (51040) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Annually	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

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

6. DSN 003-S: Stormwater

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 003, 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)
pH (00400) Storm Water	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Annually	Grab	Not Seasonal
Solids, Total Suspended (00530) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Oil & Grease (00556) Storm Water	*****	*****	*****	*****	*****	15.0 Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Phosphorus, Total (As P) (00665) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Storm Water	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Annually	Calculated	Not Seasonal
E. Coli (51040) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Annually	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	Grab	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

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

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

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

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

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

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

4. **Recording of Results**

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

a. The facility name and location, point source number, date, time and exact place of sampling;

b. The name(s) of person(s) who obtained the samples or measurements;

c. The dates and times the analyses were performed;

d. The name(s) of the person(s) who performed the analyses;

e. The analytical techniques or methods used, including source of method and method number; and

f. The results of all required analyses.

5. Records Retention and Production

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

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

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

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

b. It remains the responsibility of the permittee to comply with the monitoring and reporting requirements of this permit until written authorization to reduce, suspend or terminate such monitoring and/or reporting is received by the permittee from the Director.

7. **Monitoring Equipment and Instrumentation**

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

C. DISCHARGE REPORTING REQUIREMENTS

1. **Reporting of Monitoring Requirements**

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

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

(2) **QUARTERLY MONITORING** shall be conducted at least once during each calendar quarter. Calendar quarters are the periods of January through March, April through June, July through September, and October through December. The permittee shall conduct the quarterly monitoring during the first complete calendar quarter following the effective date of this permit and is then required to monitor once during each quarter thereafter. Quarterly monitoring should be reported on the last DMR due for the quarter (i.e., March, June, September and December DMRs).

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

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

b. The permittee shall submit discharge monitoring reports (DMRs) 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 30l(c), 30l(g), 30l(h), 30l(k), or 3l6(a) of the FWPCA or for fundamentally different factors;

      (9) To incorporate an applicable 307(a) FWPCA toxic effluent standard or prohibition;

      (10) When required by the reopener conditions in this permit;

      (11) When required under 40 CFR 403.8(e) (compliance schedule for development of pretreatment program);

      (12) Upon failure of the state to notify, as required by Section 402(b)(3) of the FWPCA, another state whose waters may be affected by a discharge permitted by this permit;

      (13) When required to correct technical mistakes, such as errors in calculation, or mistaken interpretations of law made in determining permit conditions; or

      (14) When requested by the permittee and the Director determines that the modification has cause and will not result in a violation of federal or state law, regulations or rules; or

5. **Termination**

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

   a. Violation of any term or condition of this permit;

   b. The permittee's misrepresentation or failure to disclose fully all relevant facts in the permit application or during the permit issuance process or the permittee's misrepresentation of any relevant facts at any time;

   c. Materially false or inaccurate statements or information in the permit application or the permit;

d. A change in any condition that requires either a temporary or permanent reduction or elimination of the permitted discharge;

e. The permittee's discharge threatens human life or welfare or the maintenance of water quality standards;

f. Permanent closure of the facility generating the wastewater permitted to be discharged by this permit or permanent cessation of wastewater discharge;

g. New or revised requirements of any applicable standard or limitation that is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA that the Director determines cannot be complied with by the permittee.

h. Any other cause allowed by the ADEM Administrative Code, Chapter 335-6-6.

6. **Suspension**

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

7. **Stay**

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

F. COMPLIANCE WITH TOXIC POLLUTANT STANDARD OR PROHIBITION

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

G. NOTICE TO DIRECTOR OF INDUSTRIAL USERS

1. The permittee shall not allow the introduction of wastewater, other than domestic wastewater, from a new direct discharger prior to approval and permitting, if applicable, of the discharge by the Department.

2. The permittee shall not allow an existing indirect discharger to increase the quantity or change the character of its wastewater, other than domestic wastewater, prior to approval and permitting, if applicable, of the increased discharge by the Department.

3. The permittee shall report to the Department any adverse impact caused or believed to be caused by an indirect discharger on the treatment process, quality of discharged water or quality of sludge. Such report shall be submitted within seven days of the permittee becoming aware of the adverse impacts.

H. PROHIBITIONS

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

1. Pollutants which create a fire or explosion hazard in the treatment works;

2. Pollutants which will cause corrosive structural damage to the treatment works, or dischargers with a pH lower than 5.0 s.u., unless the works are specifically designed to accommodate such discharges;

3. Solid or viscous pollutants in amounts which will cause obstruction of flow in sewers, or other interference with the treatment works;

4. Pollutants, including oxygen demanding pollutants, released in a discharge of such volume or strength as to cause interference in the treatment works;

5. Heat in amounts which will inhibit biological activity in the treatment plant resulting in interference or in such quantities that the temperature of the treatment plant influent exceeds 40 °C (104 °F) unless the treatment plant is designed to accommodate such heat;

6. Pollutants in amounts which exceed any applicable pretreatment standard under Section 307 of FWPCA or any approved revisions thereof.

PART III: ADDITIONAL REQUIREMENTS, CONDITIONS, AND LIMITATIONS

A. CIVIL AND CRIMINAL LIABILITY

1. **Tampering**

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

2. **False Statements**

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

3. **Permit Enforcement**

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

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

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

      (2) An action for damages;

      (3) An action for injunctive relief; or

      (4) An action for penalties.

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

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

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

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

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

4. **Relief from Liability**

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

B. OIL AND HAZARDOUS SUBSTANCE LIABILITY

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

C. PROPERTY AND OTHER RIGHTS

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

D. AVAILABILITY OF REPORTS

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

E. EXPIRATION OF PERMITS FOR NEW OR INCREASED DISCHARGES

1. If this permit was issued for a new discharger or new source, this permit shall expire eighteen months after the issuance date if construction of the facility has not begun during the eighteen-month period.
2. If this permit was issued or modified to allow the discharge of increased quantities of pollutants to accommodate the modification of an existing facility, and if construction of this modification has not begun during the eighteen month period after issuance of this permit or permit modification, this permit shall be modified to reduce the quantities of pollutants allowed to be discharged to those levels that would have been allowed if the modification of the facility had not been planned.
3. Construction has begun when the owner or operator has:
   a. Begun, or caused to begin as part of a continuous on-site construction program:
      (1) Any placement, assembly, or installation of facilities or equipment; or
      (2) Significant site preparation work including clearing, excavation, or removal of existing buildings, structures, or facilities which are necessary for the placement, assembly, or installation of new source facilities or equipment; or
   b. Entered into a binding contractual obligation for the purpose of placement, assembly, or installation of facilities or equipment which are intended to be used in its operation within a reasonable time. Options to purchase or contracts which can be terminated or modified without substantial loss, and contracts for feasibility, engineering, and design studies do not constitute a contractual obligation under this paragraph.
4. Final plans and specifications for a waste treatment facility at a new source or new discharger, or a modification to an existing waste treatment facility must be submitted to and examined by the Department prior to initiating construction of such treatment facility by the permittee.
5. Upon completion of construction of waste treatment facilities and prior to operation of such facilities, the permittee shall submit to the Department a certification from a registered professional engineer, licensed to practice in the State of Alabama, that the treatment facilities have been built according to plans and specifications submitted to and examined by the Department.

F. COMPLIANCE WITH WATER QUALITY STANDARDS

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

G. GROUNDWATER

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

H. DEFINITIONS

1. **Average monthly discharge limitation** - means the highest allowable average of "daily discharges" over a calendar month, calculated as the sum of all "daily discharges" measured during a calendar month divided by the number of "daily discharges" measured during that month (zero discharge days shall not be included in the number of "daily discharges" measured and a less than detectable test result shall be treated as a concentration of zero if the most sensitive EPA approved method was used).
2. **Average weekly discharge limitation** - means the highest allowable average of "daily discharges" over a calendar week, calculated as the sum of all "daily discharges" measured during a calendar week divided by the number of "daily discharges" measured during that week (zero discharge days shall not be included in the number of "daily discharges" measured and a less than detectable test result shall be treated as a concentration of zero if the most sensitive EPA approved method was used).
3. **Arithmetic Mean** – means the summation of the individual values of any set of values divided by the number of individual values.
4. **AWPCA** - means the Alabama Water Pollution Control Act.
5. **BOD** – means the five-day measure of the pollutant parameter biochemical oxygen demand.
6. **Bypass** - means the intentional diversion of waste streams from any portion of a treatment facility.
7. **CBOD** – means the five-day measure of the pollutant parameter carbonaceous biochemical oxygen demand.
8. **Daily discharge** - means the discharge of a pollutant measured during any consecutive 24-hour period in accordance with the sample type and analytical methodology specified by the discharge permit.
9. **Daily maximum** - means the highest value of any individual sample result obtained during a day.
10. **Daily minimum** - means the lowest value of any individual sample result obtained during a day.
11. **Day** - means any consecutive 24-hour period.
12. **Department** - means the Alabama Department of Environmental Management.
13. **Director** - means the Director of the Department.
14. **Discharge** - means "[t]he addition, introduction, leaking, spilling or emitting of any sewage, industrial waste, pollutant or other waste into waters of the state". Code of Alabama 1975, Section 22-22-1(b)(9).
15. **Discharge Monitoring Report (DMR)** - means the form approved by the Director to accomplish reporting requirements of an NPDES permit.
16. **DO** – means dissolved oxygen.
17. **8HC** – means 8-hour composite sample, including any of the following:
    a. The mixing of at least 8 equal volume samples collected at constant time intervals of not more than 1 hour over a period of not less than 8 hours between the hours of 6:00 a.m. and 6:00 p.m. If the sampling period exceeds 8 hours, sampling may be conducted beyond the 6:00 a.m. to 6:00 p.m. period.
    b. A sample continuously collected at a constant rate over period of not less than 8 hours between the hours of 6:00 a.m. and 6:00 p.m. If the sampling period exceeds 8 hours, sampling may be conducted beyond the 6:00 a.m. to 6:00 p.m. period.
18. **EPA** - means the United States Environmental Protection Agency.
19. **FC** – means the pollutant parameter fecal coliform.
20. **Flow** – means the total volume of discharge in a 24-hour period.
21. **FWPCA** - means the Federal Water Pollution Control Act.
22. **Geometric Mean** – means the Nth root of the product of the individual values of any set of values where N is equal to the number of individual values. The geometric mean is equivalent to the antilog of the arithmetic mean of the logarithms of the individual values. For purposes of calculating the geometric mean, values of zero (0) shall be considered one (1).

23. **Grab Sample** – means a single influent or effluent portion which is not a composite sample. The sample(s) shall be collected at the period(s) most representative of the discharge.

24. **Indirect Discharger** – means a nondomestic discharger who discharges pollutants to a publicly owned treatment works or a privately owned treatment facility operated by another person.

25. **Industrial User** – means those industries identified in the Standard Industrial Classification manual, Bureau of the Budget 1967, as amended and supplemented, under the category "Division D – Manufacturing" and such other classes of significant waste producers as, by regulation, the Director deems appropriate.

26. **MGD** – means million gallons per day.

27. **Monthly Average** – means the arithmetic mean of all the composite or grab samples taken for the daily discharges collected in one month period. The monthly average for flow is the arithmetic mean of all flow measurements taken in a one month period.

28. **New Discharger** – means a person, owning or operating any building, structure, facility, or installation:

    a) From which there is or may be a discharge of pollutants;

    b) That did not commence the discharge of pollutants prior to August 13, 1979, and which is not a new source; and

    c) Which has never received a final effective NPDES permit for dischargers at that site.

29. **NH3-N** – means the pollutant parameter ammonia, measured as nitrogen.

30. **Notifiable sanitary sewer overflow** - means an overflow, spill, release or diversion of wastewater from a sanitary sewer system that:

    a) Reaches a surface water of the State; or

    b) May imminently and substantially endanger human health based on potential for public exposure including but not limited to close proximity to public or private water supply wells or in areas where human contact would be likely to occur.

31. **Permit application** - means forms and additional information that is required by ADEM Administrative Code Rule 335-6-6-.08 and applicable permit fees.

32. **Point source** - means "any discernible, confined and discrete conveyance, including but not limited to any pipe, channel, ditch, tunnel, conduit, well, discrete fissure, container, rolling stock, concentrated animal feeding operation, or vessel or other floating craft, . . . from which pollutants are or may be discharged." Section 502(14) of the FWPCA, 33 U.S.C. Section 1362(14).

33. **Pollutant** - includes for purposes of this permit, but is not limited to, those pollutants specified in Code of Alabama 1975, Section 22-22-1(b)(3) and those effluent characteristics specified in Provision I. A. of this permit.

34. **Privately Owned Treatment Works** – means any devices or system which is used to treat wastes from any facility whose operator is not the operator of the treatment works, and which is not a "POTW".

35. **Publicly Owned Treatment Works (POTW)** – means a wastewater collection and treatment facility owned by the State, municipality, regional entity composed of two or more municipalities, or another entity created by the State or local authority for the purpose of collecting and treating municipal wastewater.

36. **Receiving Stream** – means the "waters" receiving a "discharge" from a "point source".

37. **Severe property damage** - means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.

38. **Significant Source** – means a source which discharges 0.025 MGD or more to a POTW or greater than five percent of the treatment work's capacity, or a source which is a primary industry as defined by the U.S. EPA or which discharges a priority or toxic pollutant.

39. **TKN** – means the pollutant parameter Total Kjeldahl Nitrogen.

40. **TON** – means the pollutant parameter Total Organic Nitrogen.

41. **TRC** – means Total Residual Chlorine.

42. **TSS** – means the pollutant parameter Total Suspended Solids.

43. **24HC** – means 24-hour composite sample, including any of the following:

    a) The mixing of at least 8 equal volume samples collected at constant time intervals of not more than 2 hours over a period of 24 hours;

    b) A sample collected over a consecutive 24-hour period using an automatic sampler composite to one sample. As a minimum, samples shall be collected hourly and each shall be no more than one twenty-fourth (1/24) of the total sample volume collected;

    c) A sample collected over a consecutive 24-hour period using an automatic composite sampler composited proportional to flow.

44. **Upset** - means an exceptional incident in which there is an unintentional and temporary noncompliance with technology-based permit discharge limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, or careless or improper operation.

45. **Waters** - means "[a]ll waters of any river, stream, watercourse, pond, lake, coastal, ground or surface water, wholly or partially within the state, natural or artificial. This does not include waters which are entirely confined and retained completely upon the property of a single individual, partnership or corporation unless such waters are used in interstate commerce." Code of Alabama 1975, Section 22-22-1(b)(2). Waters "include all navigable waters" as defined in Section 502(7) of the FWPCA, 22 U.S.C. Section 1362(7), which are within the State of Alabama.

46. **Week** - means the period beginning at twelve midnight Saturday and ending at twelve midnight the following Saturday.

47. **Weekly (7-day and calendar week) Average** – is the arithmetic mean of all samples collected during a consecutive 7-day period or calendar week, whichever is applicable. The calendar week is defined as beginning on Sunday and ending on Saturday. Weekly averages shall be calculated for all calendar weeks with Saturdays in the month. If a calendar week overlaps two months (i.e., the Sunday is in one month and the Saturday in the following month), the weekly average calculated for the calendar week shall be included in the data for the month that contains the Saturday.

I. SEVERABILITY

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

PART IV: SPECIFIC REQUIREMENTS, CONDITIONS, AND LIMITATIONS

A. SLUDGE MANAGEMENT PRACTICES

1. **Applicability**

   a. Provisions of Provision IV.A. apply to a sewage sludge generated or treated in treatment works that is applied to agricultural and non-agricultural land, or that is otherwise distributed, marketed, incinerated, or disposed in landfills or surface disposal sites.

   b. Provisions of Provision IV.A. do not apply to:

      (1) Sewage sludge generated or treated in a privately owned treatment works operated in conjunction with industrial manufacturing and processing facilities and which receive no domestic wastewater.

      (2) Sewage sludge that is stored in surface impoundments located at the treatment works prior to ultimate disposal.

2. **Submitting Information**

   a. If applicable, the Permittee must submit annually with its Municipal Water Pollution Prevention (MWPP) report the following:

      (1) Type of sludge stabilization/digestion method;

      (2) Daily or annual sludge production (dry weight basis);

      (3) Ultimate sludge disposal practice(s).

   b. The Permittee shall provide sludge inventory data to the Director as requested. These data may include, but are not limited to, sludge quantity and quality reported in Provision IV.A.2.a as well as other specific analyses required to comply with State and Federal laws regarding solid and hazardous waste disposal.

   c. The Permittee shall give prior notice to the Director of at least 30 days of any change planned in the Permittee's sludge disposal practices.

3. **Reopener or Modification**

   a. Upon review of information provided by the Permittee as required by Provision IV.A.2. or, based on the results of an on-site inspection, the permit shall be subject to modification to incorporate appropriate requirements.

   b. If an applicable "acceptable management practice" or if a numerical limitation for a pollutant in sewage sludge promulgated under Section 405 of FWPCA is more stringent than the sludge pollutant limit or acceptable management practice in this permit. This permit shall be modified or revoked or reissued to conform to requirements promulgated under Section 405. The Permittee shall comply with the limitations no later than the compliance deadline specified in applicable regulations as required by Section 405 of FWPCA.

B. EFFLUENT TOXICITY LIMITATIONS AND BIOMONITORING REQUIREMENTS – ACUTE DIFFUSER

1. Acute Toxicity Test

   a. The permittee shall perform 48-hour acute toxicity tests on the wastewater discharges required to be tested for acute toxicity by Part I of this permit.

   b. The samples shall be diluted using an appropriate control water, to the Instream Waste Concentration (IWC) which is **5 percent** effluent at the 5.0 MGD discharge (Outfall 0011) and **14 percent** effluent at the 15.0 MGD discharge (Outfall 0012). The IWC is the actual concentration of effluent, after mixing, in the receiving stream during a 1-day, 10-year flow period.

   c. Any test where survival in the effluent concentration is less than 90% and statistically lower than the control indicates acute toxicity and constitutes noncompliance with this permit.

2. **General Test Requirements**

   a. A 24-hour composite sample shall be obtained for use in above biomonitoring tests. The holding time for each sample shall not exceed 36 hours. The control water shall be a water prepared in the laboratory in accordance with the EPA procedure described in EPA 821-R-02-012 or most current edition or another control water selected by the permittee and approved by the Department.

b. Effluent toxicity tests in which the control survival is less than 90% or in which the other requirements of the EPA Test Procedure are not met shall be unacceptable and the permittee shall rerun the tests as soon as practical within the monitoring period.

c. In the event of an invalid test, upon subsequent completion of a valid test, the results of all tests, valid and invalid, are reported with an explanation of the tests performed and results.

d. Toxicity tests shall be conducted for the duration of this permit in the month of **October**. Should results from the Annual Toxicity test indicate that Outfall 0011 or Outfall 0012 exhibits acute toxicity, then the Permittee must conduct the follow-up testing described in Part IV.B.4.a. In addition, the Permittee may then also be required to conduct toxicity testing in the months of **January**, **April**, **July**, and **October**.

3. Reporting Requirements

a. The permittee shall notify the Department in writing within 48 hours after toxicity has been demonstrated by the scheduled test(s).

b. Biomonitoring test results obtained during each monitoring period shall be summarized and reported using the appropriate Discharge Monitoring Report (DMR) form approved by the Department. In accordance with Section 2 of this part, an effluent toxicity report containing the information in Section 2 and 7 shall be included with the DMR. The test results must be submitted to the Department no later than 28 days after the month in which the tests were performed.

4. Additional Testing Requirements

a. If acute toxicity is indicated (noncompliance with permit limit), the permittee shall perform four additional valid acute toxicity tests in accordance with these procedures to determine the extent and duration of the toxic condition. The toxicity tests shall be performed once per week and shall be performed during the first four calendar weeks following the date on which the permittee became aware of the permit noncompliance and the results of these tests shall be submitted no later than 28 days following the month in which the tests were performed.

b. After evaluation of the results of the follow-up tests, the Department will determine if additional action is appropriate and may require additional testing and/or toxicity reduction measures. The permittee may be required to perform a Toxicity Identification Evaluation (TIE) and/or a Toxicity Reduction Evaluation (TRE). The TIE/TRE shall be performed in accordance with the most recent protocols/guidance outlined by EPA (e.g., EPA/600/2-88/062, EPA/600/R-92/080, EPA/600/R-92/081, EPA/833/B-99/022 and/or EPA/600/6-91/005F, etc.).

5. Test Methods

The tests shall be performed in accordance with the latest edition of the "EPA Methods for Measuring the Acute Toxicity of Effluents to Freshwater and Marine Organisms" and shall be performed using the fathead minnow (*Pimephales promelas*) and the cladoceran (*Ceriodaphnia dubia*).

6. Effluent Toxicity Testing Reports

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

a. Introduction

(1) Facility Name, location and county

(2) Permit number

(3) Toxicity testing requirements of permit

(4) Name of receiving water body

(5) Contract laboratory information (if tests are performed under contract)

(i) Name of firm

(ii) Telephone number

(iii) Address

(6) Objective of test

b. Plant Operations

(1) Discharge operating schedule (if other than continuous)

(2) Volume of discharge during sample collection to include Mean daily discharge on sample collection date (MGD, CFS, GPM)

(3) Design flow of treatment facility at time of sampling

c. Source of Effluent and Dilution Water

(1) Effluent samples

(i) Sampling point

(ii) Sample collection dates and times (to include composite sample start and finish times)

(iii) Sample collection method

(iv) Physical and chemical data of undiluted effluent samples (water temperature, pH, alkalinity, hardness, specific conductance, total residual chlorine (if applicable), etc.)

(v) Sample temperature when received at the laboratory

(vi) Lapsed time from sample collection to delivery

(vii) Lapsed time from sample collection to test intiation

(2) Dilution Water Samples

(i) Source

(ii) Collection date(s) and time(s) (where applicable)

(iii) Pretreatment

(iv) Physical and chemical characteristics (pH, hardness, water temperature, alkalinity, specific conductance, etc.)

d. Test Conditions

(1) Toxicity test method utilized

(2) End point(s) of test

(3) Deviations from referenced method, if any, and reason(s)

(4) Date and time test started

(5) Date and time test terminated

(6) Type and volume of test chambers

(7) Volume of solution per chamber

(8) Number of organisms per test chamber

(9) Number of replicate test chambers per treatment

(10) Test temperature, pH and dissolved oxygen as recommended by the method (to include ranges)

(11) Feeding frequency, and amount and type of food

(12) Light intensity (mean)

e. Test Organisms

(1) Scientific name

(2) Life stage and age

(3) Source

(4) Disease treatment (if applicable)

f. Quality Assurance

(1) Reference toxicant utilized and source

(2) Date and time of most recent acute reference toxicant test(s), raw data, and current cusum chart(s)

(3) Dilution water utilized in reference toxicant test

(4) Results of reference toxicant test(s) (LC50, etc.), report concentration-response relationship and evaluate test sensitivity. The most recent reference toxicant test shall be conducted within 30-days of the routine.

(5) Physical and chemical methods utilized

g. Results

(1) Provide raw toxicity data in tabular form, including daily records of affected organisms in each concentration (including controls) and replicate

(2) Provide table of endpoints: LC50, NOEC, Pass/Fail (as required in the applicable NPDES permit)

(3) Indicate statistical methods used to calculate endpoints

(4) Provide all physical and chemical data required by method

(5) Results of test(s) (LC50, NOEC, Pass/Fail, etc.), report concentration-response relationship (definitive test only), report percent minimum significant difference (PMSD).

h. Conclusions and Recommendations

(1) Relationship between test endpoints and permit limits

(2) Action to be taken

Adapted from "Methods for Measuring the Acute Toxicity of Effluents and Receiving Waters to Freshwater and Marine

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. POLLUTANT SCANS

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

F. MAJOR SOURCE STORMWATER REQUIREMENTS

1. Prohibitions

a. The Permittee shall not allow the discharge of non-storm water into permitted storm water outfall(s) unless said discharge is already subject to an NPDES permit.

b. Pollutants removed in the course of treatment or control shall be disposed in a manner that complies with all applicable Department rules and regulations.

2. Operational and Management Practices

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

a. In the SWPP Plan, the Permittee shall:

(1) Assess the treatment plant site by developing and presenting site drainage maps, materials inventory, and best management operational practices. The plan shall also include a description of all spill or leak sources;

(2) Describe mechanisms and procedures to prevent the contact of sewage sludge, screenings, raw or partially treated wastewater, or any other waste product or pollutant with storm water discharged from the facility;

(3) Provide for daily inspection on workdays of any structures that function to prevent storm water pollution or that remove pollutants from storm water;

(4) Provide for daily inspection of the facility in general to ensure that the SWPP Plan is continually implemented and effective;

(5) Include a Best Management Practices (BMP) Plan that, as a minimum, addresses housekeeping, preventative maintenance, spill prevention and response, and non-storm water discharges;

(6) Describe mechanisms and procedures to provide sediment control sufficient to prevent or control storm water pollution storm water by particles resulting from soil or sediment migration from the site due to significant clearing, grading, or excavation activities;

(7) Designate by position or name the person or persons responsible for the day to day implementation of the SWPP Plan; and

(8) Bear the signature of an individual meeting signatory requirements as defined in ADEM Administrative Code, Rule 335-6-6-.09.

b. The Director or his designee may notify the permittee at any time that the SWPP Plan is deficient and will require correction of the deficiency. The permittee shall correct any SWPP Plan deficiency identified by the Director or his designee within 30 days of receipt of notification and shall certify to the Department that the correction has been made and implemented.

c. Administrative Procedures

(1) A copy of the SWPP Plan shall be maintained at the facility and shall be available for inspection by the Department.

(2) A log of daily inspections required by Provision IV.F.2.a.(3.) of the permit shall be maintained at the facility and shall be made available for inspection by the Department upon request. The log shall contain records of all inspections performed and each daily entry shall be signed by the person performing the inspection.

(3) The Permittee shall provide training for any personnel required to implement the SWPP Plan and shall retain documentation of such training at the facility. Training records for all personnel shall be available for inspection by the Department. Training shall be performed prior to the date implementation is required.

3. Monitoring Requirements

a. Storm water discharged through each storm water outfall shall be sampled once per calendar year, using first flush grab samples (FFGS) collected during the first 30 minutes of discharge.

b. The total volume of storm water discharged for the event must be monitored, including the date and duration (in hours) and rainfall (in inches) for the storm event(s) sampled. The duration between the storm event sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm event must be a minimum of 72 hours. This information must be recorded as part of the sampling procedure and records retained in accordance with Provision I.B.5. of this permit. The volume may be measured using flow measurement devices or may be estimated using any method approved in writing by the Department.

G. SANITARY SEWER OVERFLOW RESPONSE PLAN

1. SSO Response Plan

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

a. General Information

(1) Approximate population of City/Town, if applicable

(2) Approximate number of customers served by the Permittee

(3) Identification of any subbasins designated by the Permittee, if applicable

(4) Identification of estimated linear feet of sanitary sewers

(5) Number of Pump/Lift Stations in the collection system

b. Responsibility Information

(1) The title(s) and contact information of key position(s) who will coordinate the SSO response, including information for a backup coordinator in the event that the primary SSO coordinator is unavailable. The SSO coordinator is the person responsible for assessing the SSO and initiating a series of response actions based on the type, severity, and destination of the SSO, except for routine SSOs for which the coordinator may pre-approve written procedures. Routine SSOs are those for which the corrective action procedures are generally consistent.

(2) The title(s), and contact information of key position(s) who will respond to SSOs, including information for backup responder(s) in the event the primary responder(s) are unavailable (i.e., position(s) who provide notification to the Department, the public, the county health department, and other affected entities such as public water systems; position(s) responsible for organizing crews for response; position(s) responsible for addressing public inquiries)

c. SSO and Surface Water Assessment

(1) Identification of locations within the collection system at which an SSO is likely to occur (e.g., based upon historical SSOs, lift stations where electricity may be lost, etc.)

(2) A map of the general collection system area, including identification of surface waterbodies and the location(s) of public drinking water source(s). Mapping of all collection system piping, pump stations, etc. is not required; however, if this information is already available, it should be included.

(3) Identification of surface waterbodies within the collection system area which are classified as Swimming according to ADEM Admin. Code chap. 335-6-11. References available to assist in this requirement include the following: http://adem.alabama.gov/alEnviroRegLaws/files/Division6Vol1.pdf and http://adem.alabama.gov/wqmap.

(4) Identification of surface waterbodies within the collection system area which are not classified as Swimming as indicated in paragraph c above, but are known locally as areas where swimming occurs or as areas that are heavily recreated

d. Public Reporting of SSOs

(1) Contact information for the public to report an SSO to the Permittee, during both normal and outside of normal business hours (e.g., telephone number, website, email address, etc.)

(2) Information requested from the person reporting an SSO to assist the Permittee in identifying the SSO (e.g., date, time, location, contact information)

(3) Procedures for communication of the SSO report to the appropriate positions for follow-up investigation and response, if necessary

e. Procedures to immediately notify the Department, the county health department, and other affected entities (such as public water systems) upon becoming aware of notifiable SSOs

f. Public Notification Methods for SSOs

(1) A listing of methods that are feasible, as determined by the Permittee, for public notifications (e.g., flyers distributed to nearby residents; signs posted at the location of the SSO, where the SSO enters a water of the state, and/or at a central public location; signs posted at fishing piers, boat launches, parks, swimming waterbodies, etc.; website and/or social media notifications; local print or radio and broadcast media notifications; "opt in" email, text message, or automated phone message notifications)

(i) If signage is a feasible method for public notification, procedures for use and removal of signage (e.g., availability and maintenance of signs, appropriate duration of postings)

(2) Minimum information to be included in public notifications (e.g., identification that an SSO has occurred, date, duration if known, estimated volume if known, location of the SSO by street address or other appropriate method, initial destination of the SSO)

(3) Procedures developed by the Permittee for determining the appropriate public notification method(s) based upon the potential for public exposure to health risks associated with the SSO

g. Standard Procedures shall be developed by the Permittee and shall include, at a minimum

(1) General SSO Response Procedures (e.g., procedures for dispatching staff to assess/correct an SSO; procedures for routine SSO corrective actions such as those for sewer blockages, overflowing manholes, line breakages, pump station power failure, etc.; procedures for disinfection of affected area, if applicable);

(2) Procedures for collection and proper disposal of the SSO, if feasible.

(3) General procedures for coordinating instream water quality monitoring, including, but not limited to, procedures for mobilizing staff, collecting samples, and typical test methods should the Department or the Permittee determine monitoring is appropriate following an SSO. Identification of a contractor who will collect and analyze the sample(s) may be listed in lieu of the procedures.

(4) References to other documents (such as Standard Operating Procedures for SSO Responses) may be acceptable for this section; however, the referenced document shall be identified and shall be reviewed at a frequency of at least that required by the Administrative Procedures Section.

h. Date of the SSO Response Plan, dates of all modifications and/or reviews, the title and signature of the reviewer(s) for each date and the signature of the responsible official or the appropriate designee.

2. SSO Response Plan Implementation

Except as otherwise required by this Permit, the Permittee shall fully implement the SSO Response Plan as soon as practicable, but no later than 180 days after the effective date of this Permit.

3. Department Review of the SSO Response Plan

a. When requested by the Director or his designee, the Permittee shall make the SSO Response Plan available for review by the Department.

b. Upon review, the Director or his designee may notify the Permittee that the SSO Response Plan is deficient and require modification of the Plan.

c. Within thirty days of receipt of notification, or an alternate timeframe as approved by the Department, the Permittee shall modify any SSO Response Plan deficiency identified by the Director or his designee and shall certify to the Department that the modification has been made.

4. SSO Response Plan Administrative Procedures

a. The Permittee shall maintain a copy of the SSO Response Plan at the permitted facility or an alternate location approved by the Department in writing and shall make it available for inspection by the Department.

b. The Permittee shall make a copy of the SSO Response Plan available to the public upon written request within 30 days of such request. The Permittee may redact information which may present security issues, such as location of public water supplies, identification of specific details of vulnerabilities, employee information, etc.

c. The Permittee shall provide training for any personnel required to implement the SSO Response Plan and shall retain at the facility documentation of such training. This documentation shall be available for inspection by the Department. Training shall be provided for existing personnel prior to the date by which implementation of the SSO Response Plan is required and for new personnel as soon as possible. Should significant revisions be made to the SSO Response Plan, training regarding the revisions shall be conducted as soon as possible.

d. The Permittee shall complete a review and evaluation of the SSO Response Plan at least once every three years. Documentation of the SSO Response Plan review and evaluation shall be signed and dated by the responsible official or the appropriate designee as part of the SSO Response Plan.

FACT SHEET

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

Date Prepared: August 4, 2022 **By:** Michael N. Simmons

NPDES Permit No. AL0031372

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

   Scottsboro Water, Sewer, and Gas Board
   PO Box 550
   Scottsboro, AL 35768

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

   Scottsboro Southside WWTP
   318 Camille Street
   Scottsboro, AL 35769

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

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

4. **Applicant's Receiving Waters**

Feature ID	Receiving Water	Classification
0011	Tennessee River (Guntersville Lake)	Swimming, Fish and Wildlife
002S	UT to Roseberry Creek (Guntersville Lake)	Fish and Wildlife
003S	Roseberry Creek (Guntersville Lake)	Swimming, Fish and Wildlife
0012	Tennessee River (Guntersville Lake)	Swimming, Fish and Wildlife

   For the Outfall latitude and longitude see the permit application.

5. **Permit Conditions:**

   See attached Rationale and Draft Permit.

6. **PROCEDURES FOR THE FORMULATION OF FINAL DETERMINATIONS**

   a. **Comment Period**

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

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

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

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

b. Public Hearing

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

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

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

c. Issuance of the Permit

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

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

d. Appeal Procedures

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

Alabama Environmental Management Commission
1400 Coliseum Blvd
[Mailing Address: Post Office Box 301463; Zip 36130-1463]
Montgomery, Alabama 36110-2400

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

NPDES PERMIT RATIONALE

NPDES Permit No: **AL0031372** Date: August 8, 2022

Permit Applicant: Scottsboro Water, Sewer, and Gas Board
PO Box 550
Scottsboro, AL 35768

Location: Scottsboro Southside WWTP
318 Camille Street
Scottsboro, AL 35769

Draft Permit is:

Initial Issuance:	
Reissuance due to expiration:	X
Modification of existing permit:	
Revocation and Reissuance:	

Basis for Limitations:

Water Quality Model:	$CBOD_5$, NH_3-N
Reissuance with no modification:	$CBOD_5$, $CBOD_5$ % Removal, NH_3-N, pH, TRC, TSS, TSS % Removal,
Instream calculation at 7Q10:	0011 – 5%, 0012 – 14 %
Toxicity based:	TRC
Secondary Treatment Levels:	$CBOD_5$, $CBOD_5$ % Removal, NH_3-N, TSS, TSS % Removal
Other (described below):	pH, E. Coli

Design Flow in Million Gallons per Day: 001-1 - 5 MGD, 001-2 – 15 MGD

Major: Yes

Description of Discharge:

Feature ID	Description	Receiving Water	WBC	303(d)	TMDL
001-1	Effluent Discharge	Tennessee River (Guntersville Lake)	Swimming and Fish and Wildlife	No	No
001-2	Effluent Discharge	Tennessee River (Guntersville Lake)	Swimming and Fish and Wildlife	No	No
002-S	Stormwater Discharge	Roseberry Creek (Guntersville Lake)	Swimming and Fish and Wildlife	No	No
003-S	Stormwater Discharge	UT to Roseberry Creek (Guntersville Lake)	Fish and Wildlife	No	No

Discussion: This is a reissuance due to expiration.

This is a permit reissuance that includes an expansion to the existing treatment plant. The expansion involves an increase in design capacity from 5.0 MGD to 15.0 MGD. The outfall location will remain the same. The current outfall designation, Outfall 0011, will be used until construction is completed. Once the expansion is complete, the outfall designation Outfall 0012 will be used, and the limits associated with that designation will apply.

The limits for Five Day Carbonaceous Biochemical Oxygen Demand ($CBOD_5$) and Total Ammonia as Nitrogen (NH_3-N) are based on the Waste Load Allocation (WLA) models that were completed by ADEM's Water Quality Branch

on March 5, 2014. The monthly average limits for $CBOD_5$ are 25.0 mg/L. The monthly average limits for NH_3-N are 20.0 mg/L.

The pH daily minimum and daily maximum limits of 6.0 to 9.0 S.U, respectively, were developed to be supportive of the water-use classification of the receiving stream. The daily maximum Total Residual Chlorine (TRC) limit of 1.0 mg/L is based on EPA's recommended water quality values and on the current Toxicity Rationale, which considers the available dilution in the receiving stream and should be protective of both acute and chronic Water Quality Criteria. Monitoring for TRC is only applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter "NODI=9" on the monthly DMR.

The Department has revised bacteriological criteria in ADEM Administrative Code R. 335-6-10-.09. As a result, this permit includes updated seasons that are consistent with the revised regulations. The imposed E. Coli limits were determined based on the water-use classification of the receiving stream. Since Tennessee River (Guntersville Lake) is classified as Swimming/Fish & Wildlife, the limits for Outfall 001-1 are 708 col/100mL (monthly geometric mean) and 1320 col/100mL (daily maximum), while the limits for Outfall 001-2 are 396 col/100mL (monthly geometric mean) and 739 col/100mL (daily maximum). Based on available dilution, the limits should be protective of the new water quality criteria at the edge of the mixing zone.

The Total Suspended Solids (TSS) and TSS % removal limits of 30.0 mg/L monthly average and 85.0%, respectively, are based on the requirements of 40 CFR part 133.102 regarding Secondary Treatment. A minimum percent removal limit of 85.0% is imposed for $CBOD_5$ also in accordance with 40 CFR 133.102 regarding Secondary Treatment.

This permit requires the Permittee to monitor and report the nutrient-related parameters of Nitrate plus Nitrite Nitrogen (NO_2+NO_3-N), Total Kjeldahl Nitrogen (TKN), and Total Phosphorus (TP). Monitoring for these nutrient related parameters is imposed so that sufficient information will be available regarding the nutrient contribution from this point source, should it be necessary at some later time to impose nutrient limits on this discharge.

Storm water runoff monitoring is being imposed by this permit based on 40 CFR Part 122. The designated outfalls for storm water runoff monitoring are 002-S and 003-S. Storm water runoff is to be monitored annually. The annual monitoring required includes: $CBOD_5$, E. Coli, Flow Rate, NH_3-N, NO_2+NO_3-N, Oil and Grease, pH, TKN, TP, and TSS.

This permit imposes acute toxicity testing with two species (Ceriodaphnia and Pimephales). Acute toxicity testing is required on an annual basis at the calculated IWC of 5 percent at outfall 001-1 and 14 percent at Outfall 001-2. Toxicity testing is imposed for survival.

Because this is a major facility treating both municipal and industrial wastewater, the Department completed a reasonable potential analysis (RPA) of the discharge based on the application data, and background data from station TENR-399. All background data test results were Below Detect except for hardness. The RPA indicates whether pollutants in treated effluent have potential to contribute to excursions of Alabama's in-stream water quality standards. Based on the analytical data submitted by the Permittee, it does not appear there is reasonable potential to cause an in-stream water quality criteria exceedance at this time.

For outfall 001-1, the monitoring frequency for $CBOD_5$, DO, E. Coli, NH_3-N, pH, TRC and TSS is twice per week. For outfall 001-2, the monitoring frequency for $CBOD_5$, DO, E. Coli, NH_3-N, pH, TRC and TSS is five times per week. For both outfalls, the monitoring frequency for nutrient-related parameters NO_2+NO_3-N, TKN, and TP is once per month. For both outfalls, $CBOD_5$ % removal and TSS % removal are to be calculated once per month. Flow will be monitored continuously, 7 days per week.

The segment of the Tennessee River (Guntersville Lake), containing the discharge is classified as a Tier II stream and is not on the most recent 303(d) list. There are no TMDLs affecting this discharge. Roseberry Creek (Guntersville Lake) is a Tier II stream and is not listed on the most recent 303(d) list. There are no TMDLs affecting this discharge. UT to Roseberry Creek (Guntersville Lake) is a Tier II stream and is not listed on the most recent 303(d) list. There are no TMDLs affecting this discharge.

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

ADEM Administrative Rule 335-6-10-.04 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 a new or expanded discharge to a Tier II stream, so the applicant is required to demonstrate that the discharge is necessary for economic and social development. The review of the anti-degradation evaluation is attached.

Prepared by: Michael N. Simmons

ANTIDEGRADATION RATIONALE

Permit Number:	**AL0031372**
Facility Name:	**Scottsboro Southside WWTP**
Receiving Water:	**Tennessee River (Lake Guntersville)**
Stream Category:	**Tier 2 as defined by ADEM Admin. Code 335-6-10-.12**
Discharge Description:	**Treated Industrial and Domestic Wastewater**

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

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

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

1. The future expansion of this facility and its associated collection system will address future growth in Scottsboro.

2. The expansion of the waste water treatment facility will require the creation of more jobs to accomplish operations and maintenance tasks at the facility and the associated collection system. Growth in the area will likely result in the growth of business and industry in the area, also increasing the number of jobs.

3. An increase in discharge capacity will allow for more connections to the system which would result in more revenue for the discharger, therefore creating more government tax revenue.

4. The expansion of this discharge would increase the standard of living in the area, while allowing for a single point discharge of treated sewage away from the urban area, thus protecting the public health and the environment.

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

Prepared by: Michael N. Simmons

Date: 7/14/2022

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	**Scottsboro Southside WWTP**	
NPDES Permit Number:	**AL0031372**	
Receiving Stream:	**Tennessee River (Guntersville Lake)**	
Facility Design Flow (Q_w):	**5.000 MGD**	
Receiving Stream $7Q_{10}$:	**5811.000 cfs**	
Receiving Stream $1Q_{10}$:	**4358.000 cfs**	
Winter Headwater Flow (WHF):	**10350.00 cfs**	
Summer Temperature for CCC:	**28 deg. Celsius**	
Winter Temperature for CCC:	**28 deg. Celsius**	
Headwater Background NH_3-N Level:	**0.15 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.

$$\text{Stream Dilution Ration (SDR)} = \frac{Qw}{7Q10 + Qw} = \textbf{0.13\%}$$

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.

$$\text{Limiting Dilution} = \frac{Q_w}{7Q_{10} + Q_w}$$

= **0.13%** **Stream-Dominated, CMC Applies**

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

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

	CMC	CCC
Allowable Summer Instream NH_3-N:	**36.09 mg/l**	**2.48 mg/l**
Allowable Winter Instream NH_3-N:	**36.09 mg/l**	**2.48 mg/l**

$$\text{Summer } NH_3\text{-N Toxicity Limit} = \frac{[(\text{Allowable Instream } NH_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater } NH_3\text{-N}) * (7Q_{10})]}{Q_w}$$

= **27034.5 mg/l NH3-N at 7Q10**

$$\text{Winter } NH_3\text{-N Toxicity Limit} = \frac{[(\text{Allowable Instream } NH_3\text{-N}) * (WHF + Q_w)] - [(\text{Headwater } NH_3\text{-N}) * (WHF)]}{Q_w}$$

= **N./A.**

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.

	DO-based NH3-N limit	Toxicity-based NH3-N limit
Summer	**20.00 mg/l NH3-N**	**27034.50 mg/l NH3-N**
Winter	**N./A.**	**N./A.**

Summer: The DO based limit of 20.00 mg/l NH3-N applies.
Winter limits are not applicable.

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

The following factors trigger toxicity testing requirements:

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

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

Acute toxicity testing is required

Instream Waste Concentration (IWC) = Based on Cormix Model = **4.27%** 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: **Swimming, Fish & Wildlife**
Disinfection Type: **Chlorination**
Limit calculation method: **Limits based on meeting stream standards at the point of discharge.**

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)		
Monthly limit as monthly average (November through April):	126	**708**
Monthly limit as monthly average (May through October):	126	**708**
Daily Max (November through April):	235	**1320**
Daily Max (May through October):	235	**1320**
Enterococci (applies to Coastal)		
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:	8.274 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	14.291 mg/l (acute)	(0.019)/(SDR)

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

Prepared By: Michael Simmons Date: 8/8/2022

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	**Scottsboro Southside WWTP**	
NPDES Permit Number:	**AL0031372**	
Receiving Stream:	**Tennessee River (Guntersville Lake)**	
Facility Design Flow (Q_w):	**15.000 MGD**	
Receiving Stream $7Q_{10}$:	**5811.000 cfs**	
Receiving Stream $1Q_{10}$:	**4358.000 cfs**	
Winter Headwater Flow (WHF):	**10350.00 cfs**	
Summer Temperature for CCC:	**28 deg. Celsius**	
Winter Temperature for CCC:	**28 deg. Celsius**	
Headwater Background NH_3-N Level:	**0.15 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.

$$\text{Stream Dilution Ration (SDR)} = \frac{Qw}{7Q10 + Qw} = \textbf{0.40\%}$$

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.

$$\text{Limiting Dilution} = \frac{Q_w}{7Q_{10} + Q_w}$$

= **0.40%** **Stream-Dominated, CMC Applies**

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

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

	CMC	CCC
Allowable Summer Instream NH_3-N:	**36.09 mg/l**	**2.48 mg/l**
Allowable Winter Instream NH_3-N:	**36.09 mg/l**	**2.48 mg/l**

$$\text{Summer } NH_3\text{-N Toxicity Limit} = \frac{[(\text{Allowable Instream } NH_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater } NH_3\text{-N}) * (7Q_{10})]}{Q_w}$$

= **9035.6 mg/l NH3-N at 7Q10**

$$\text{Winter } NH_3\text{-N Toxicity Limit} = \frac{[(\text{Allowable Instream } NH_3\text{-N}) * (WHF + Q_w)] - [(\text{Headwater } NH_3\text{-N}) * (WHF)]}{Q_w}$$

= **N./A.**

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.

	DO-based NH3-N limit	Toxicity-based NH3-N limit
Summer	**20.00 mg/l NH3-N**	**9035.60 mg/l NH3-N**
Winter	**N./A.**	**N./A.**

Summer: The DO based limit of 20.00 mg/l NH3-N applies.
Winter limits are not applicable.

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

The following factors trigger toxicity testing requirements:

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

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

Acute toxicity testing is required

Instream Waste Concentration (IWC) = Based on Cormix Model = **14.00%** Note: This number will be rounded up for toxicity testing purposes.

DISINFECTION REQUIREMENTS

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

See the attached Disinfection Guidance for applicable stream standards.

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

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)		
Monthly limit as monthly average (November through April):	126	**396**
Monthly limit as monthly average (May through October):	126	**396**
Daily Max (November through April):	235	**739**
Daily Max (May through October):	235	**739**
Enterococci (applies to Coastal)		
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:	2.765 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	4.776 mg/l (acute)	(0.019)/(SDR)

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

Prepared By: Michael Simmons Date: 8/4/2022

Facility Name: **Scottsboro Southside WWTP (5 MGD)**

NPDES No.: **AL0031372**

6/13/2017

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

ID	Pollutant	Carcinogen Yes*	Type	Background from upstream source (C_{d2}) Daily Max ug/l	Background from upstream source (C_{d2}) Monthly Ave ug/l	Background Instream (C_s) Daily Max ug/l	Background Instream (C_s) Monthly Ave ug/l	Enter Max Daily Discharge as reported by Applicant (C_d) Max ug/l	Enter Avg Daily Discharge as reported by Applicant (C_d) Ave ug/l	Partition Coefficient (Stream / Lake)
1	Antimony		Metals	0	0	0	0	0.6	0.2	-
2	**Arsenic*,****	YES	Metals	0	0	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0	0	-
4	Cadmium**		Metals	0	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	1.1	0.9	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	1.1	0.9	-
7	Copper**		Metals	0	0	0	0	7.5	3.1	1.000
8	Lead**		Metals	0	0	0	0	1	0.3	0.206
9	Mercury**		Metals	0	0	0	0	0.0009	0.00074	0.302
10	Nickel**		Metals	0	0	0	0	4.9	2.4	0.505
11	Selenium		Metals	0	0	0	0	0	0	-
12	Silver		Metals	0	0	0	0	0	0	-
13	Thallium		Metals	0	0	0	0	0	0	-
14	Zinc**		Metals	0	0	0	0	70.6	63.9	0.330
15	Cyanide		Metals	0	0	0	0	0	0	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0	-
17	Hardness (As CaCO3)		Metals	0	0	94000	66717	118000	104900	-
18	Acrolein		VOC	0	0	0	0	0	0	-
19	**Acrylonitrile***	YES	VOC	0	0	0	0	0	0	-
20	**Aldrin**	YES	VOC	0	0	0	0	0	0	-
21	**Benzene***	YES	VOC	0	0	0	0	0	0	-
22	**Bromoform***	YES	VOC	0	0	0	0	0	0	-
23	**Carbon Tetrachloride***	YES	VOC	0	0	0	0	0	0	-
24	**Chlordane**	YES	VOC	0	0	0	0	0	0	-
25	Clorobenzene		VOC	0	0	0	0	0	0	-
26	**Chlorodibromo-Methane***	YES	VOC	0	0	0	0	0	0	-
27	Chloroethane		VOC	0	0	0	0	0	0	-
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	0	0	-
29	**ChloroForm***	YES	VOC	0	0	0	0	0	0	-
30	**4,4'-DDD**	YES	VOC	0	0	0	0	0	0	-
31	**4,4'-DDE**	YES	VOC	0	0	0	0	0	0	-
32	**4,4'-DDT**	YES	VOC	0	0	0	0	0	0	-
33	**Dichlorobromo-Methane***	YES	VOC	0	0	0	0	0	0	-
34	1, 1-Dichloroethane		VOC	0	0	0	0	0	0	-
35	**1, 2-Dichloroethane***	YES	VOC	0	0	0	0	0	0	-
36	Trans-1, 2-Dichloro-Ethylene		VOC	0	0	0	0	0	0	-
37	**1, 1-Dichloroethylene***	YES	VOC	0	0	0	0	0	0	-
38	1, 2-Dichloropropane		VOC	0	0	0	0	0	0	-
39	1, 3-Dichloro-Propylene		VOC	0	0	0	0	0	0	-
40	**Dieldrin**	YES	VOC	0	0	0	0	0	0	-
41	Ethylbenzene		VOC	0	0	0	0	0	0	-
42	Methyl Bromide		VOC	0	0	0	0	0	0	-
43	Methyl Chloride		VOC	0	0	0	0	0	0	-
44	**Methylene Chloride***	YES	VOC	0	0	0	0	0	0	-
45	**1, 1, 2, 2-Tetrachloro-Ethane***	YES	VOC	0	0	0	0	0	0	-
46	**Tetrachloro-Ethylene***	YES	VOC	0	0	0	0	0	0	-
47	Toluene		VOC	0	0	0	0	0	0	-
48	**Toxaphene**	YES	VOC	0	0	0	0	0	0	-
49	**Tributyltine (TBT)**	YES	VOC	0	0	0	0	0	0	-
50	1, 1, 1-Trichloroethane		VOC	0	0	0	0	0	0	-
51	**1, 1, 2-Trichloroethane***	YES	VOC	0	0	0	0	0	0	-
52	**Trichlorethylene***	YES	VOC	0	0	0	0	0	0	-
53	**Vinyl Chloride***	YES	VOC	0	0	0	0	0	0	-
54	P-Chloro-M-Cresol		Acids	0	0	0	0	0	0	-
55	2-Chlorophenol		Acids	0	0	0	0	0	0	-
56	2, 4-Dichlorophenol		Acids	0	0	0	0	0	0	-
57	2, 4-Dimethylphenol		Acids	0	0	0	0	0	0	-
58	4, 6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	-
59	2, 4-Dinitrophenol		Acids	0	0	0	0	0	0	-
60	**4,6-Dintro-2-methylophenol**	YES	Acids	0	0	0	0	0	0	-
61	**Dioxin (2,3,7,8-TCDD)**	YES	Acids	0	0	0	0	0	0	-
62	2-Nitrophenol		Acids	0	0	0	0	0	0	-
63	4-Nitrophenol		Acids	0	0	0	0	0	0	-
64	**Pentachlorophenol***	YES	Acids	0	0	0	0	0	0	-
65	Phenol		Acids	0	0	0	0	0	0	-
66	**2, 4, 6-Trichlorophenol***	YES	Acids	0	0	0	0	0	0	-
67	Acenaphthene		Bases	0	0	0	0	0	0	-
68	Acenaphthylene		Bases	0	0	0	0	0	0	-
69	Anthracene		Bases	0	0	0	0	0	0	-
70	Benzidine		Bases	0	0	0	0	0	0	-
71	**Benzo(A)Anthracene***	YES	Bases	0	0	0	0	0	0	-
72	**Benzo(A)Pyrene***	YES	Bases	0	0	0	0	0	0	-
73	3, 4 Benzo-Fluoranthene		Bases	0	0	0	0	0	0	-
74	Benzo(GHI)Perylene		Bases	0	0	0	0	0	0	-
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	0	-
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0	-
77	**Bis (2-Chloroethyl)-Ether***	YES	Bases	0	0	0	0	0	0	-
78	Bis (2-Chloroiso-Propyl) Ether		Bases	0	0	0	0	0	0	-
79	**Bis (2-Ethylhexyl) Phthalate***	YES	Bases	0	0	0	0	0	0	-
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0	-
82	2-Chloronaphthalene		Bases	0	0	0	0	0	0	-
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
84	**Chrysene***	YES	Bases	0	0	0	0	0	0	-
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0	-
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0	-
87	**Dibenzo(A,H)Anthracene***	YES	Bases	0	0	0	0	0	0	-
88	1, 2-Dichlorobenzene		Bases	0	0	0	0	0	0	-
89	1, 3-Dichlorobenzene		Bases	0	0	0	0	0	0	-
90	1, 4-Dichlorobenzene		Bases	0	0	0	0	0	0	-
91	**3, 3-Dichlorobenzidine***	YES	Bases	0	0	0	0	0	0	-
92	Diethyl Phthalate		Bases	0	0	0	0	0	0	-
93	Dimethyl Phthalate		Bases	0	0	0	0	0	0	-
94	**2, 4-Dinitrotoluene***	YES	Bases	0	0	0	0	0	0	-
95	2, 6-Dinitrotoluene		Bases	0	0	0	0	0	0	-
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0	-
97	**Endosulfan (alpha)**	YES	Bases	0	0	0	0	0	0	-
98	**Endosulfan (beta)**	YES	Bases	0	0	0	0	0	0	-
99	**Endosulfan sulfate**	YES	Bases	0	0	0	0	0	0	-
100	**Endrin**	YES	Bases	0	0	0	0	0	0	-
101	**Endrin Aldeyhide**	YES	Bases	0	0	0	0	0	0	-
102	Fluoranthene		Bases	0	0	0	0	0	0	-
103	Fluorene		Bases	0	0	0	0	0	0	-
104	Heptochlor	YES	Bases	0	0	0	0	0	0	-
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	-
106	**Hexachlorobenzene***	YES	Bases	0	0	0	0	0	0	-
107	**Hexachlorobutadiene***	YES	Bases	0	0	0	0	0	0	-
108	**Hexachlorocyclohexan (alpa)**	YES	Bases	0	0	0	0	0	0	-
109	**Hexachlorocyclohexan (beta)**	YES	Bases	0	0	0	0	0	0	-
110	**Hexachlorocyclohexan (gamma)**	YES	Bases	0	0	0	0	0	0	-
111	HexachlorocycloPentadiene		Bases	0	0	0	0	0	0	-
112	Hexachloroethane		Bases	0	0	0	0	0	0	-
113	**Indeno(1, 2, 3-CK)Pyrene***	YES	Bases	0	0	0	0	0	0	-
114	Isophorone		Bases	0	0	0	0	0	0	-
115	Naphthalene		Bases	0	0	0	0	0	0	-
116	Nitrobenzene		Bases	0	0	0	0	0	0	-
117	**N-Nitrosodi-N-Propylamine***	YES	Bases	0	0	0	0	0	0	-
118	**N-Nitrosodi-N-Methylamine***	YES	Bases	0	0	0	0	0	0	-
119	**N-Nitrosodi-N-Phenylamine***	YES	Bases	0	0	0	0	0	0	-
120	**PCB-1016**	YES	Bases	0	0	0	0	0	0	-
121	**PCB-1221**	YES	Bases	0	0	0	0	0	0	-
122	**PCB-1232**	YES	Bases	0	0	0	0	0	0	-
123	**PCB-1242**	YES	Bases	0	0	0	0	0	0	-
124	**PCB-1248**	YES	Bases	0	0	0	0	0	0	-
125	**PCB-1254**	YES	Bases	0	0	0	0	0	0	-
126	**PCB-1260**	YES	Bases	0	0	0	0	0	0	-
127	Phenanthrene		Bases	0	0	0	0	0	0	-
128	Pyrene		Bases	0	0	0	0	0	0	-
129	1, 2, 4-Trichlorobenzene		Bases	0	0	0	0	0	0	-

5	Enter Q_d = wastewater discharge flow from facility (MGD)
7.736145	Q_d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Qd2 = background stream flow in MGD above point of discharge
0	Qd2 = background stream flow from upstream source (cfs)
5811	Enter 7Q10, Q_s = background stream flow in cfs above point of discharge
4358	Enter or estimated, 1Q10, Q_s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
38739	Enter Mean Annual Flow, Q_s = background stream flow in cfs above point of discharge
10350	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)
$Q_d + Qd2 + Q_s$	Q_r = resultant in-stream flow, after discharge
Calculated on other	C_r = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
66.717	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

August 4, 2022

Facility Name: Scottsboro Southside WWTP (5 MGD)

NPDES No.: AL0031372

						Freshwater F&W classification										Human Health Consumption Fish only (µg/l)			
							Freshwater Acute (µg/l) Q_h =1Q10					Freshwater Chronic (µg/l) Q_h = 7Q10				Carcinogen Q_h = Annual Average Non-Carcinogen Q_h = 7Q10			
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (Cd2) Daily Max	Max Daily Discharge as reported by Applicant (C_{max})	Water Quality Criteria (C_t)	Draft Permit Limit (C_{aveq})	20% of Draft Permit Limit	RP?	Background from upstream source (Cd2) Monthly Ave	Avg Daily Discharge as reported by Applicant (C_{ave})	Water Quality Criteria (C_t)	Draft Permit Limit (C_{aveq})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C_t)	Draft Permit Limit (C_{aveq})	20% of Draft Permit Limit	RP?
1	Antimony			0	0.6	-	-	-		0	0.2	-	-	-		3.73E+02	2.61E+05	5.62E+04	No
2	Arsenic		YES	0	0	592.334	334271.929	66854.386	No	0	0	261.324	196554.698	39310.940	No	3.03E-01	1.52E+03	3.04E+02	No
3	Beryllium			0	0	-	-	-		0	0	-	-	-		-	-	-	
4	Cadmium			0	0	5.756	3248.339	649.668	No	0	0	0.787	591.715	118.343	No	-	-	-	
5	Chromium/ Chromium III			0	1.1	1947.713	1099152.354	219830.471	No	0	0.9	253.357	190562.649	38112.530	No	-	-	-	
6	Chromium/ Chromium VI			0	1.1	16.000	9029.275	1805.855	No	0	0.9	11.000	8273.642	1654.728	No	-	-	-	
7	Copper			0	7.5	9.178	5179.635	1035.927	No	0	3.1	6.337	4766.682	953.336	No	-	-	-	
8	Lead			0	1	201.243	113567.410	22713.482	No	0	0.3	7.542	5886.469	1179.694	No	-	-	-	
9	Mercury			0	0.0009	2.400	1354.391	270.878	No	0	0.00074	0.012	9.026	1.805	No	4.24E-02	3.19E+01	6.38E+00	No
10	Nickel			0	4.9	658.381	371543.947	74308.789	No	0	2.4	73.126	55001.525	11000.305	No	9.93E+02	7.47E+05	1.49E+05	No
11	Selenium			0	0	20.000	11286.593	2257.319	No	0	0	5.000	3760.747	752.149	No	2.43E+03	1.83E+06	3.66E+05	No
12	Silver			0	0	1.604	904.978	180.996	No	0	0	-	-	-		-	-	-	
13	Thallium			0	0	-	-	-		0	0	-	-	-		2.74E-01	2.06E+02	4.12E+01	No
14	Zinc			0	70.6	252.009	142216.411	28443.282	No	0	63.9	254.071	191099.238	38219.848	No	1.49E+04	1.12E+07	2.24E+06	No
15	Cyanide			0	0	22.000	12415.253	2483.051	No	0	0	5.200	3911.176	782.235	No	9.33E+03	7.02E+06	1.40E+06	No
16	Total Phenolic Compounds			0	0	-	-	-		0	0	-	-	-		-	-	-	
17	Hardness (As CaCO3)			0	118000	-	-	-		0	104900	-	-	-		-	-	-	
18	Acrolein			0	0	-	-	-		0	0	-	-	-		-	-	-	
19	Acrylonitrile		YES	0	0	-	-	-		0	0	-	-	-		1.44E-01	7.21E+02	1.44E+02	No
20	Aldrin		YES	0	0	3.000	1692.989	338.598	No	0	0	-	-	-		2.94E-05	1.47E-01	2.94E-02	No
21	Benzene		YES	0	0	-	-	-		0	0	-	-	-		1.55E+01	7.75E+04	1.55E+04	No
22	Bromoform		YES	0	0	-	-	-		0	0	-	-	-		7.88E+01	3.94E+05	7.89E+04	No
23	Carbon Tetrachloride		YES	0	0	-	-	-		0	0	-	-	-		9.57E-01	4.79E+03	9.59E+02	No
24	Chlordane		YES	0	0	2.400	1354.391	270.878	No	0	0	0.0043	3.234	0.647	No	4.73E-04	2.37E+00	4.74E-01	No
25	Clorobenzene			0	0	-	-	-		0	0	-	-	-		9.06E+02	6.82E+05	1.36E+05	No
26	Chlorodibromo-Methane		YES	0	0	-	-	-		0	0	-	-	-		7.41E+00	3.71E+04	7.42E+03	No
27	Chloroethane			0	0	-	-	-		0	0	-	-	-		-	-	-	
28	2-Chloro-Ethylvinyl Ether			0	0	-	-	-		0	0	-	-	-		-	-	-	
29	ChloroForm		YES	0	0	-	-	-		0	0	-	-	-		1.02E+02	5.11E+05	1.02E+05	No
30	4,4' - DDD		YES	0	0	-	-	-		0	0	-	-	-		1.81E-04	9.08E-01	1.82E-01	No
31	4,4' - DDE		YES	0	0	-	-	-		0	0	-	-	-		1.28E-04	6.41E-01	1.28E-01	No
32	4,4' - DDT		YES	0	0	1.100	620.763	124.153	No	0	0	0.001	0.752	0.150	No	1.28E-04	6.41E-01	1.28E-01	No
33	Dichlorobromo-Methane		YES	0	0	-	-	-		0	0	-	-	-		1.00E+01	5.03E+04	1.01E+04	No
34	1, 1-Dichloroethane			0	0	-	-	-		0	0	-	-	-		-	-	-	
35	1, 2-Dichloroethane		YES	0	0	-	-	-		0	0	-	-	-		2.14E+01	1.07E+05	2.14E+04	No
36	Trans-1, 2-Dichloro-Ethylene			0	0	-	-	-		0	0	-	-	-		5.91E+03	4.44E+06	8.89E+05	No
37	1, 1-Dichloroethylene		YES	0	0	-	-	-		0	0	-	-	-		4.17E+03	2.09E+07	4.17E+06	No
38	1, 2-Dichloropropane			0	0	-	-	-		0	0	-	-	-		8.49E+00	6.39E+03	1.28E+03	No
39	1, 3-Dichloro-Propylene			0	0	-	-	-		0	0	-	-	-		1.23E+01	9.24E+03	1.85E+03	No
40	Dieldrin		YES	0	0	0.240	135.439	27.088	No	0	0	0.056	42.120	8.424	No	3.12E-05	1.56E-01	3.13E-02	No
41	Ethylbenzene			0	0	-	-	-		0	0	-	-	-		1.24E+03	9.36E+05	1.87E+05	No
42	Methyl Bromide			0	0	-	-	-		0	0	-	-	-		8.71E+02	6.55E+05	1.31E+05	No
43	Methyl Chloride			0	0	-	-	-		0	0	-	-	-		-	-	-	
44	Methylene Chloride		YES	0	0	-	-	-		0	0	-	-	-		3.46E+02	1.73E+06	3.46E+05	No
45	1, 1, 2, 2-Tetrachloro-Ethane		YES	0	0	-	-	-		0	0	-	-	-		2.33E+00	1.17E+04	2.34E+03	No
46	Tetrachloro-Ethylene		YES	0	0	-	-	-		0	0	-	-	-		1.92E+00	9.60E+03	1.92E+03	No
47	Toluene			0	0	-	-	-		0	0	-	-	-		8.72E+03	6.56E+06	1.31E+06	No
48	Toxaphene		YES	0	0	0.730	411.961	82.392	No	0	0	0.0002	0.150	0.030	No	1.62E-04	8.11E-01	1.62E-01	No
49	Tributyltin (TBT)		YES	0	0	0.460	259.592	51.918	No	0	0	0.072	54.155	10.831	No	-	-	-	
50	1, 1, 1-Trichloroethane			0	0	-	-	-		0	0	-	-	-		-	-	-	
51	1, 1, 2-Trichloroethane		YES	0	0	-	-	-		0	0	-	-	-		9.10E+00	4.56E+04	9.11E+03	No
52	Trichloroethylene		YES	0	0	-	-	-		0	0	-	-	-		1.75E+01	8.75E+04	1.75E+04	No
53	Vinyl Chloride		YES	0	0	-	-	-		0	0	-	-	-		1.42E+00	7.13E+03	1.43E+03	No
54	P-Chloro-M-Cresol			0	0	-	-	-		0	0	-	-	-		-	-	-	
55	2-Chlorophenol			0	0	-	-	-		0	0	-	-	-		8.71E+01	6.55E+04	1.31E+04	No
56	2, 4-Dichlorophenol			0	0	-	-	-		0	0	-	-	-		1.72E+02	1.29E+05	2.59E+04	No
57	2, 4-Dimethylphenol			0	0	-	-	-		0	0	-	-	-		4.98E+02	3.74E+05	7.48E+04	No
58	4, 6-Dinitro-O-Cresol			0	0	-	-	-		0	0	-	-	-		-	-	-	
59	2, 4-Dinitrophenol			0	0	-	-	-		0	0	-	-	-		3.11E+03	2.34E+06	4.68E+05	No
60	4,6-Dinitro-2-methylphenol		YES	0	0	-	-	-		0	0	-	-	-		1.65E+02	8.29E+05	1.66E+05	No
61	Dioxin (2,3,7,8-TCDD)		YES	0	0	-	-	-		0	0	-	-	-		2.67E-08	1.34E-04	2.67E-05	No
62	2-Nitrophenol			0	0	-	-	-		0	0	-	-	-		-	-	-	
63	4-Nitrophenol			0	0	-	-	-		0	0	-	-	-		-	-	-	
64	Pentachlorophenol		YES	0	0	6.723	4922.829	984.566	No	0	0	6.693	5033.822	1006.764	No	1.77E+00	8.85E+03	1.77E+03	No
65	Phenol			0	0	-	-	-		0	0	-	-	-		5.00E+05	3.76E+08	7.52E+07	No
66	2, 4, 6-Trichlorophenol		YES	0	0	-	-	-		0	0	-	-	-		1.41E+00	7.08E+03	1.42E+03	No
67	Acenaphthene			0	0	-	-	-		0	0	-	-	-		5.79E+02	4.35E+05	8.70E+04	No
68	Acenaphthylene			0	0	-	-	-		0	0	-	-	-		-	-	-	
69	Anthracene			0	0	-	-	-		0	0	-	-	-		2.35E+04	1.76E+07	3.51E+06	No
70	Benzidine			0	0	-	-	-		0	0	-	-	-		1.16E-04	8.72E-02	1.74E-02	No
71	Benzo(A)Anthracene		YES	0	0	-	-	-		0	0	-	-	-		1.07E-02	5.34E+01	1.07E+01	No
72	Benzo(A)Pyrene		YES	0	0	-	-	-		0	0	-	-	-		1.07E-02	5.34E+01	1.07E+01	No
73	Benzo(b)fluoranthene			0	0	-	-	-		0	0	-	-	-		1.07E-02	8.01E+00	1.60E+00	No
74	Benzo(GHI)Perylene			0	0	-	-	-		0	0	-	-	-		-	-	-	
75	Benzo(K)Fluoranthene			0	0	-	-	-		0	0	-	-	-		1.07E-02	8.01E+00	1.60E+00	No
76	Bis (2-Chloroethoxy) Methane			0	0	-	-	-		0	0	-	-	-		-	-	-	
77	Bis (2-Chloroethyl)-Ether		YES	0	0	-	-	-		0	0	-	-	-		3.07E-01	1.54E+03	3.08E+02	No
78	Bis (2-Chloroiso-Propyl) Ether			0	0	-	-	-		0	0	-	-	-		3.78E+04	2.84E+07	5.68E+06	No
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0	-	-	-		0	0	-	-	-		1.28E+00	6.42E+03	1.28E+03	No
80	4-Bromophenyl Phenyl Ether			0	0	-	-	-		0	0	-	-	-		-	-	-	
81	Butyl Benzyl Phthalate			0	0	-	-	-		0	0	-	-	-		1.13E+03	8.46E+05	1.70E+05	No
82	2-Chloronaphthalene			0	0	-	-	-		0	0	-	-	-		9.24E+02	6.95E+05	1.39E+05	No
83	4-Chlorophenyl Phenyl Ether			0	0	-	-	-		0	0	-	-	-		-	-	-	
84	Chrysene		YES	0	0	-	-	-		0	0	-	-	-		1.07E-02	5.34E+01	1.07E+01	No
85	Di-N-Butyl Phthalate			0	0	-	-	-		0	0	-	-	-		7.62E+03	1.97E+06	3.94E+05	No
86	Di-N-Octyl Phthalate			0	0	-	-	-		0	0	-	-	-		-	-	-	
87	Dibenzo(A,H)Anthracene		YES	0	0	-	-	-		0	0	-	-	-		1.07E-02	5.34E+01	1.07E+01	No
88	1, 2-Dichlorobenzene			0	0	-	-	-		0	0	-	-	-		7.55E+02	5.66E+05	1.14E+05	No
89	1, 3-Dichlorobenzene			0	0	-	-	-		0	0	-	-	-		5.62E+02	4.23E+05	8.46E+04	No
90	1, 4-Dichlorobenzene			0	0	-	-	-		0	0	-	-	-		1.12E+02	8.46E+04	1.69E+04	No
91	3, 3-Dichlorobenzidine		YES	0	0	-	-	-		0	0	-	-	-		1.66E-02	8.32E+01	1.66E+01	No
92	Diethyl Phthalate			0	0	-	-	-		0	0	-	-	-		2.56E+04	1.92E+07	3.85E+06	No
93	Dimethyl Phthalate			0	0	-	-	-		0	0	-	-	-		6.48E+05	4.88E+08	9.75E+07	No
94	2, 4-Dinitrotoluene		YES	0	0	-	-	-		0	0	-	-	-		1.98E+00	9.92E+03	1.98E+03	No
95	2, 6-Dinitrotoluene			0	0	-	-	-		0	0	-	-	-		-	-	-	
96	1,2-Diphenylhydrazine			0	0	-	-	-		0	0	-	-	-		1.17E-01	8.81E+01	1.76E+01	No
97	Endosulfan (alpha)		YES	0	0	0.22	124.153	24.831	No	0	0	0.056	42.120	8.424	No	5.19E+01	2.60E+05	5.19E+04	No
98	Endosulfan (beta)		YES	0	0	0.22	124.153	24.831	No	0	0	0.056	42.120	8.424	No	5.19E+01	2.60E+05	5.19E+04	No
99	Endosulfan sulfate		YES	0	0	-	-	-		0	0	-	-	-		5.19E+01	2.60E+05	5.19E+04	No
100	Endrin		YES	0	0	0.086	48.532	9.706	No	0	0	0.036	27.077	5.415	No	3.53E-02	1.77E+02	3.53E+01	No
101	Endrin Aldehyde		YES	0	0	-	-	-		0	0	-	-	-		1.76E-01	8.63E+02	1.77E+02	No
102	Fluoranthene			0	0	-	-	-		0	0	-	-	-		8.12E+01	6.10E+04	1.22E+04	No
103	Fluorene			0	0	-	-	-		0	0	-	-	-		3.11E+03	2.34E+06	4.68E+05	No
104	Heptachlor		YES	0	0	0.52	293.451	58.690	No	0	0	0.0038	2.858	0.572	No	4.63E-05	2.32E-01	4.64E-02	No
105	Heptachlor Epoxide		YES	0	0	0.52	293.451	58.690	No	0	0	0.0038	2.858	0.572	No	2.29E-05	1.15E-01	2.29E-02	No
106	Hexachlorobenzene		YES	0	0	-	-	-		0	0	-	-	-		1.68E-04	8.41E-01	1.68E-01	No
107	Hexachlorobutadiene		YES	0	0	-	-	-		0	0	-	-	-		1.08E+01	5.39E+04	1.08E+04	No
108	Hexachlorocyclohexan (alpha)		YES	0	0	-	-	-		0	0	-	-	-		2.85E-03	1.43E+01	2.85E+00	No
109	Hexachlorocyclohexan (beta)		YES	0	0	-	-	-		0	0	-	-	-		9.97E-03	4.99E+01	9.99E+00	No
110	Hexachlorocyclohexan (gamma)		YES	0	0	0.95	536.113	107.223	No	0	0	-	-	-		1.08E+00	5.39E+03	1.08E+03	No
111	HexachlorocycloPentadiene			0	0	-	-	-		0	0	-	-	-		9.45E+02	4.85E+05	9.71E+04	No
112	Hexachloroethane			0	0	-	-	-		0	0	-	-	-		1.92E+00	1.44E+03	2.89E+02	No
113	Indeno(1, 2, 3-CK)Pyrene		YES	0	0	-	-	-		0	0	-	-	-		1.07E-02	5.34E+01	1.07E+01	No
114	Isophorone			0	0	-	-	-		0	0	-	-	-		9.61E+02	4.22E+05	8.44E+04	No
115	Naphthalene			0	0	-	-	-		0	0	-	-	-		-	-	-	
116	Nitrobenzene			0	0	-	-	-		0	0	-	-	-		4.04E+02	3.04E+05	6.07E+04	No
117	N-Nitrosodi-N-Propylamine		YES	0	0	-	-	-		0	0	-	-	-		2.95E-01	1.48E+03	2.95E+02	No
118	N-Nitrosodimethylamine		YES	0	0	-	-	-		0	0	-	-	-		1.76E+00	8.81E+03	1.76E+03	No
119	N-Nitrosodiphenylamine		YES	0	0	-	-	-		0	0	-	-	-		3.50E+00	1.75E+04	3.51E+03	No
120	PCB-1016		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
121	PCB-1221		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
122	PCB-1232		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
123	PCB-1242		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
124	PCB-1248		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
125	PCB-1254		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
126	PCB-1260		YES	0	0	-	-	-		0	0	0.014	10.530	2.106	No	3.74E-05	1.87E-01	3.75E-02	No
127	Phenanthrene			0	0	-	-	-		0	0	-	-	-		-	-	-	
128	Pyrene			0	0	-	-	-		0	0	-	-	-		2.33E+03	1.76E+06	3.51E+05	No
129	1, 2, 4-Trichlorobenzene			0	0	-	-	-		0	0	-	-	-		4.09E+01	3.08E+04	6.16E+03	No

Facility Name: **Scottsboro Southside WWTP (15 MGD)**

NPDES No.: **AL0031372**

8/12/2017

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

ID	Pollutant	Carcinogen Yes*	Type	Background from upstream source (C_{d2}) Daily Max	Background from upstream source (C_{d2}) Monthly Ave	Background Instream (C_s) Daily Max	Background Instream (C_s) Monthly Ave	Enter Max Daily Discharge as reported by Applicant (C_d) Max	Enter Avg Daily Discharge as reported by Applicant (C_d) Ave	Partition Coefficient (Stream / Lake)
				µg/l	µg/l	µg/l	µg/l	µg/l	µg/l	
1	Antimony		Metals	0	0	0	0	0.6	0.2	-
2	**Arsenic*,****	YES	Metals	0	0	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0	0	-
4	Cadmium**		Metals	0	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	1.1	0.9	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	1.1	0.9	-
7	Copper**		Metals	0	0	0	0	7.5	3.1	1.000
8	Lead**		Metals	0	0	0	0	1	0.3	0.206
9	Mercury**		Metals	0	0	0	0	0.0009	0.00074	0.302
10	Nickel**		Metals	0	0	0	0	4.9	2.4	0.505
11	Selenium		Metals	0	0	0	0	0	0	-
12	Silver		Metals	0	0	0	0	0	0	-
13	Thallium		Metals	0	0	0	0	0	0	-
14	Zinc**		Metals	0	0	0	0	70.6	63.9	0.330
15	Cyanide		Metals	0	0	0	0	0	0	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0	-
17	Hardness (As CaCO3)		Metals	0	0	94000	66717	118000	104900	-
18	Acrolein		VOC	0	0	0	0	0	0	-
19	**Acrylonitrile***	YES	VOC	0	0	0	0	0	0	-
20	**Aldrin**	YES	VOC	0	0	0	0	0	0	-
21	**Benzene***	YES	VOC	0	0	0	0	0	0	-
22	**Bromoform***	YES	VOC	0	0	0	0	0	0	-
23	**Carbon Tetrachloride***	YES	VOC	0	0	0	0	0	0	-
24	**Chlordane**	YES	VOC	0	0	0	0	0	0	-
25	Clorobenzene		VOC	0	0	0	0	0	0	-
26	**Chlorodibromo-Methane***	YES	VOC	0	0	0	0	0	0	-
27	Chloroethane		VOC	0	0	0	0	0	0	-
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	0	0	-
29	**ChloroForm***	YES	VOC	0	0	0	0	0	0	-
30	**4,4'-DDD**	YES	VOC	0	0	0	0	0	0	-
31	**4,4'-DDE**	YES	VOC	0	0	0	0	0	0	-
32	**4.4'-DDT**	YES	VOC	0	0	0	0	0	0	-
33	**Dichlorobromo-Methane***	YES	VOC	0	0	0	0	0	0	-
34	1, 1-Dichloroethane		VOC	0	0	0	0	0	0	-
35	**1, 2-Dichloroethane***	YES	VOC	0	0	0	0	0	0	-
36	Trans-1, 2-Dichloro-Ethylene		VOC	0	0	0	0	0	0	-
37	**1, 1-Dichloroethylene***	YES	VOC	0	0	0	0	0	0	-
38	1, 2-Dichloropropane		VOC	0	0	0	0	0	0	-
39	1, 3-Dichloro-Propylene		VOC	0	0	0	0	0	0	-
40	**Dieldrin**	YES	VOC	0	0	0	0	0	0	-
41	Ethylbenzene		VOC	0	0	0	0	0	0	-
42	Methyl Bromide		VOC	0	0	0	0	0	0	-
43	Methyl Chloride		VOC	0	0	0	0	0	0	-
44	**Methylene Chloride***	YES	VOC	0	0	0	0	0	0	-
45	**1, 1, 2, 2-Tetrachloro-Ethane***	YES	VOC	0	0	0	0	0	0	-
46	**Tetrachloro-Ethylene***	YES	VOC	0	0	0	0	0	0	-
47	Toluene		VOC	0	0	0	0	0	0	-
48	**Toxaphene**	YES	VOC	0	0	0	0	0	0	-
49	**Tributyltine (TBT)**	YES	VOC	0	0	0	0	0	0	-
50	1, 1, 1-Trichloroethane		VOC	0	0	0	0	0	0	-
51	**1, 1, 2-Trichloroethane***	YES	VOC	0	0	0	0	0	0	-
52	**Trichlorethylene***	YES	VOC	0	0	0	0	0	0	-
53	**Vinyl Chloride***	YES	VOC	0	0	0	0	0	0	-
54	P-Chloro-M-Cresol		Acids	0	0	0	0	0	0	-
55	2-Chlorophenol		Acids	0	0	0	0	0	0	-
56	2, 4-Dichlorophenol		Acids	0	0	0	0	0	0	-
57	2, 4-Dimethylphenol		Acids	0	0	0	0	0	0	-
58	4, 6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	-
59	2, 4-Dinitrophenol		Acids	0	0	0	0	0	0	-
60	**4,6-Dinitro-2-methylophenol**	YES	Acids	0	0	0	0	0	0	-
61	**Dioxin (2,3,7,8-TCDD)**	YES	Acids	0	0	0	0	0	0	-
62	2-Nitrophenol		Acids	0	0	0	0	0	0	-
63	4-Nitrophenol		Acids	0	0	0	0	0	0	-
64	**Pentachlorophenol***	YES	Acids	0	0	0	0	0	0	-
65	Phenol		Acids	0	0	0	0	0	0	-
66	**2, 4, 6-Trichlorophenol***	YES	Acids	0	0	0	0	0	0	-
67	Acenaphthene		Bases	0	0	0	0	0	0	-
68	Acenaphthylene		Bases	0	0	0	0	0	0	-
69	Anthracene		Bases	0	0	0	0	0	0	-
70	Benzidine		Bases	0	0	0	0	0	0	-
71	**Benzo(A)Anthracene***	YES	Bases	0	0	0	0	0	0	-
72	**Benzo(A)Pyrene***	YES	Bases	0	0	0	0	0	0	-
73	3, 4 Benzo-Fluoranthene		Bases	0	0	0	0	0	0	-
74	Benzo(GHI)Perylene		Bases	0	0	0	0	0	0	-
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	0	-
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0	-
77	**Bis (2-Chloroethyl)-Ether***	YES	Bases	0	0	0	0	0	0	-
78	Bis (2-Chloroiso-Propyl) Ether		Bases	0	0	0	0	0	0	-
79	**Bis (2-Ethylhexyl) Phthalate***	YES	Bases	0	0	0	0	0	0	-
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0	-
82	2-Chloronaphthalene		Bases	0	0	0	0	0	0	-
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
84	**Chrysene***	YES	Bases	0	0	0	0	0	0	-
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0	-
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0	-
87	**Dibenzo(A,H)Anthracene***	YES	Bases	0	0	0	0	0	0	-
88	1, 2-Dichlorobenzene		Bases	0	0	0	0	0	0	-
89	1, 3-Dichlorobenzene		Bases	0	0	0	0	0	0	-
90	1, 4-Dichlorobenzene		Bases	0	0	0	0	0	0	-
91	**3, 3-Dichlorobenzidine***	YES	Bases	0	0	0	0	0	0	-
92	Diethyl Phthalate		Bases	0	0	0	0	0	0	-
93	Dimethyl Phthalate		Bases	0	0	0	0	0	0	-
94	**2, 4-Dinitrotoluene***	YES	Bases	0	0	0	0	0	0	-
95	2, 6-Dinitrotoluene		Bases	0	0	0	0	0	0	-
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0	-
97	**Endosulfan (alpha)**	YES	Bases	0	0	0	0	0	0	-
98	**Endosulfan (beta)**	YES	Bases	0	0	0	0	0	0	-
99	**Endosulfan sulfate**	YES	Bases	0	0	0	0	0	0	-
100	**Endrin**	YES	Bases	0	0	0	0	0	0	-
101	**Endrin Aldeyhide**	YES	Bases	0	0	0	0	0	0	-
102	Fluoranthene		Bases	0	0	0	0	0	0	-
103	Fluorene		Bases	0	0	0	0	0	0	-
104	Heptochlor	YES	Bases	0	0	0	0	0	0	-
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	-
106	**Hexachlorobenzene***	YES	Bases	0	0	0	0	0	0	-
107	**Hexachlorobutadiene***	YES	Bases	0	0	0	0	0	0	-
108	**Hexachlorocyclohexan (alpa)**	YES	Bases	0	0	0	0	0	0	-
109	**Hexachlorocyclohexan (beta)**	YES	Bases	0	0	0	0	0	0	-
110	**Hexachlorocyclohexan (gamma)**	YES	Bases	0	0	0	0	0	0	-
111	HexachlorocycloPentadiene		Bases	0	0	0	0	0	0	-
112	Hexachloroethane		Bases	0	0	0	0	0	0	-
113	**Indeno(1, 2, 3-CK)Pyrene***	YES	Bases	0	0	0	0	0	0	-
114	Isophorone		Bases	0	0	0	0	0	0	-
115	Naphthalene		Bases	0	0	0	0	0	0	-
116	Nitrobenzene		Bases	0	0	0	0	0	0	-
117	**N-Nitrosodi-N-Propylamine***	YES	Bases	0	0	0	0	0	0	-
118	**N-Nitrosodi-N-Methylamine***	YES	Bases	0	0	0	0	0	0	-
119	**N-Nitrosodi-N-Phenylamine***	YES	Bases	0	0	0	0	0	0	-
120	**PCB-1016**	YES	Bases	0	0	0	0	0	0	-
121	**PCB-1221**	YES	Bases	0	0	0	0	0	0	-
122	**PCB-1232**	YES	Bases	0	0	0	0	0	0	-
123	**PCB-1242**	YES	Bases	0	0	0	0	0	0	-
124	**PCB-1248**	YES	Bases	0	0	0	0	0	0	-
125	**PCB-1254**	YES	Bases	0	0	0	0	0	0	-
126	**PCB-1260**	YES	Bases	0	0	0	0	0	0	-
127	Phenanthrene		Bases	0	0	0	0	0	0	-
128	Pyrene		Bases	0	0	0	0	0	0	-
129	1, 2, 4-Trichlorobenzene		Bases	0	0	0	0	0	0	-

15	Enter Q_d = wastewater discharge flow from facility (MGD)
23.208435	Q_d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Qd2 = background stream flow in MGD above point of discharge
0	Qd2 = background stream flow from upstream source (cfs)
5811	Enter 7Q10, Q_s = background stream flow in cfs above point of discharge
4358	Enter or estimated, 1Q10, Q_s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
38739	Enter Mean Annual Flow, Q_s = background stream flow in cfs above point of discharge
10350	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)
$Q_s+Qd2+Q_s$	Q_r = resultant in-stream flow, after discharge
Calculated on other	C_r = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
66.717	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

August 4, 2022

Facility Name: Scottsboro Southside WWTP (15 MGD)

NPDES No.: AL0031372

Freshwater F&W classification						Freshwater Acute (µg/l) Q_s = 1Q10					Freshwater Chronic (µg/l) Q_s = 7Q10					Human Health Consumption Fish only (ug/l) Carcinogen Q_s = Annual Average, Non-Carcinogen Q_s = 7Q10			
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (Cd2) Daily Max	Max Daily Discharge as reported by Applicant (C_{max})	Water Quality Criteria (C_s)	Draft Permit Limit (C_{max})	20% of Draft Permit Limit	RP?	Background from upstream source (Cd2) Monthly Ave	Avg Daily Discharge as reported by Applicant (C_{ave})	Water Quality Criteria (C_s)	Draft Permit Limit (C_{ave})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C_s)	Draft Permit Limit (C_{max})	20% of Draft Permit Limit	RP?
1	Antimony			0	0.6	-	-	-	-	0	0.2	-	-	-	-	3.73E+02	9.38E+04	1.88E+04	No
2	Arsenic		YES	0	0	592.334	111818.866	22363.773	No	0	0	261.324	65692.449	13138.490	No	3.03E-01	5.06E+02	1.01E+02	No
3	Beryllium			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
4	Cadmium			0	0	5.758	1086.617	217.323	No	0	0	0.787	197.763	39.553	No	-	-	-	-
5	Chromium/ Chromium III			0	1.1	1847.713	367582.593	73536.519	No	0	0.9	253.357	63689.768	12737.958	No	-	-	-	-
6	Chromium/ Chromium VI			0	1.1	16.000	3020.425	604.085	No	0	0.9	11.000	2765.214	553.043	No	-	-	-	-
7	Copper			0	7.5	9.178	1732.664	346.533	No	0	3.1	6.337	1593.119	318.624	No	-	-	-	-
8	Lead			0	1	201.243	37969.965	7597.993	No	0	0.3	7.842	1971.384	394.277	No	-	-	-	-
9	Mercury			0	0.0009	2.400	453.064	90.613	No	0	0.00074	0.012	3.017	0.603	No	4.24E-02	1.07E+01	2.13E+00	No
10	Nickel			0	4.9	656.381	124286.903	24857.381	No	0	2.4	73.126	18382.592	3676.518	No	9.93E+02	2.50E+05	4.99E+04	No
11	Selenium			0	0	20.000	3775.531	755.106	No	0	0	5.000	1256.916	251.383	No	2.43E+03	6.11E+05	1.22E+05	No
12	Silver			0	0	1.604	302.728	60.546	No	0	0	-	-	-	-	-	-	-	-
13	Thallium			0	0	-	-	-	-	0	0	-	-	-	-	2.74E-01	6.88E+01	1.38E+01	No
14	Zinc			0	70.6	262.009	47573.477	9514.695	No	0	63.9	254.073	63869.126	12773.825	No	1.49E+04	3.74E+06	7.49E+05	No
15	Cyanide			0	0	22.000	4153.084	830.617	No	0	0	5.200	1307.192	261.438	No	9.33E+03	2.35E+06	4.69E+05	No
16	Total Phenolic Compounds			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
17	Hardness (As CaCO3)			0	118000	-	-	-	-	0	104900	-	-	-	-	-	-	-	-
18	Acrolein			0	0	-	-	-	-	0	0	-	-	-	-	5.43E+00	1.36E+03	2.73E+02	No
19	Acrylonitrile		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.44E-01	2.41E+02	4.81E+01	No
20	Aldrin		YES	0	0	3.000	565.330	113.266	No	0	0	-	-	-	-	2.94E-05	4.91E-02	9.82E-03	No
21	Benzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.55E+01	2.58E+04	5.17E+03	No
22	Bromoform		YES	0	0	-	-	-	-	0	0	-	-	-	-	7.88E+01	1.32E+05	2.63E+04	No
23	Carbon Tetrachloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	9.57E-01	1.60E+03	3.20E+02	No
24	Chlordane		YES	0	0	2.400	453.064	90.613	No	0	0	0.0043	1.081	0.216	No	4.73E-04	7.90E-01	1.58E-01	No
25	Clorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	9.06E+02	2.26E+05	4.56E+04	No
26	Chlorodibromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	7.41E+00	1.24E+04	2.47E+03	No
27	Chloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
28	2-Chloro-Ethylvinyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
29	ChloroForm		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.02E+02	1.70E+05	3.41E+04	No
30	4,4' - DDD		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.81E-04	3.03E-01	6.06E-02	No
31	4,4' - DDE		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.28E-04	2.14E-01	4.28E-02	No
32	4,4' - DDT		YES	0	0	1.100	207.654	41.531	No	0	0	0.001	0.251	0.050	No	1.28E-04	2.14E-01	4.28E-02	No
33	Dichlorobromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.00E+01	1.68E+04	3.35E+03	No
34	1, 1-Dichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
35	1, 2-Dichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	2.14E+01	3.57E+04	7.14E+03	No
36	Trans-1, 2-Dichloro-Ethylene			0	0	-	-	-	-	0	0	-	-	-	-	5.91E+03	1.48E+06	2.97E+05	No
37	1, 1-Dichloroethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	4.17E+03	6.96E+06	1.39E+06	No
38	1, 2-Dichloropropane			0	0	-	-	-	-	0	0	-	-	-	-	8.49E+00	2.14E+03	4.27E+02	No
39	1, 3-Dichloro-Propylene			0	0	-	-	-	-	0	0	-	-	-	-	1.23E+01	3.09E+03	6.17E+02	No
40	Dieldrin		YES	0	0	0.240	45.306	9.061	No	0	0	0.056	14.077	2.815	No	3.12E-05	5.22E-02	1.04E-02	No
41	Ethylbenzene			0	0	-	-	-	-	0	0	-	-	-	-	1.24E+03	3.13E+05	6.26E+04	No
42	Methyl Bromide			0	0	-	-	-	-	0	0	-	-	-	-	6.71E+02	2.19E+05	4.38E+04	No
43	Methyl Chloride			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
44	Methylene Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	3.46E+02	5.77E+05	1.15E+05	No
45	1, 1, 2, 2-Tetrachloro-Ethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	2.33E+00	3.90E+03	7.79E+02	No
46	Tetrachloro-Ethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.92E+00	3.20E+03	6.40E+02	No
47	Toluene			0	0	-	-	-	-	0	0	-	-	-	-	8.72E+03	2.19E+06	4.39E+05	No
48	Toxaphene		YES	0	0	0.730	137.807	27.561	No	0	0	0.0002	0.050	0.010	No	1.62E-04	2.70E-01	5.41E-02	No
49	Tributyltin (TBT)		YES	0	0	0.460	86.837	17.367	No	0	0	0.072	18.100	3.620	No	-	-	-	-
50	1, 1, 1-Trichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
51	1, 1, 2-Trichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	9.10E+00	1.52E+04	3.04E+03	No
52	Trichloroethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.75E+01	2.92E+04	5.84E+03	No
53	Vinyl Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.42E+00	2.36E+03	4.76E+02	No
54	P-Chloro-M-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
55	2-Chlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	6.71E+01	2.19E+04	4.38E+03	No
56	2, 4-Dichlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	1.72E+02	4.32E+04	8.65E+03	No
57	2, 4-Dimethylphenol			0	0	-	-	-	-	0	0	-	-	-	-	4.98E+02	1.25E+05	2.50E+04	No
58	4, 6-Dinitro-O-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
59	2, 4-Dinitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	3.11E+03	7.82E+05	1.56E+05	No
60	4,6-Dinitro-2-methylphenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.65E+02	2.76E+05	5.53E+04	No
61	Dioxin (2,3,7,8-TCDD)		YES	0	0	-	-	-	-	0	0	-	-	-	-	2.67E-06	4.45E-05	8.91E-06	No
62	2-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
63	4-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
64	Pentachlorophenol		YES	0	0	8.723	1646.758	329.352	No	0	0	5.693	1682.402	336.480	No	1.77E+00	2.95E+03	5.90E+02	No
65	Phenol			0	0	-	-	-	-	0	0	-	-	-	-	5.00E+05	1.26E+08	2.51E+07	No
66	2, 4, 6-Trichlorophenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.41E+00	2.36E+03	4.72E+02	No
67	Acenaphthene			0	0	-	-	-	-	0	0	-	-	-	-	5.79E+02	1.45E+05	2.91E+04	No
68	Acenaphthylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
69	Anthracene			0	0	-	-	-	-	0	0	-	-	-	-	2.31E+04	5.87E+06	1.17E+06	No
70	Benzidine			0	0	-	-	-	-	0	0	-	-	-	-	1.16E-04	2.91E-02	5.83E-03	No
71	Benzo(A)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	1.78E+01	3.56E+00	No
72	Benzo(A)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	1.78E+01	3.56E+00	No
73	Benzo(b)fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	2.68E+00	5.36E-01	No
74	Benzo(GHI)Perylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
75	Benzo(K)Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	2.68E+00	5.36E-01	No
76	Bis (2-Chloroethoxy) Methane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
77	Bis (2-Chloroethyl)-Ether		YES	0	0	-	-	-	-	0	0	-	-	-	-	3.07E-01	5.13E+02	1.03E+02	No
78	Bis (2-Chloroiso-Propyl) Ether			0	0	-	-	-	-	0	0	-	-	-	-	3.78E+04	9.50E+06	1.90E+06	No
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.28E+00	2.14E+03	4.28E+02	No
80	4-Bromophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
81	Butyl Benzyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	1.13E+03	2.83E+05	5.67E+04	No
82	2-Chloronaphthalene			0	0	-	-	-	-	0	0	-	-	-	-	9.24E+02	2.32E+05	4.65E+04	No
83	4-Chlorophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
84	Chrysene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	1.78E+01	3.56E+00	No
85	Di-N-Butyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	2.82E+03	6.59E+05	1.32E+05	No
86	Di-N-Octyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
87	Dibenzo(A,H)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	1.78E+01	3.56E+00	No
88	1, 2-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	7.55E+02	1.90E+05	3.80E+04	No
89	1, 3-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	5.62E+02	1.41E+05	2.83E+04	No
90	1, 4-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	1.12E+02	2.83E+04	5.65E+03	No
91	3, 3-Dichlorobenzidine		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.66E-02	2.78E+01	5.55E+00	No
92	Diethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	2.56E+04	6.43E+06	1.29E+06	No
93	Dimethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	6.48E+05	1.63E+08	3.26E+07	No
94	2, 4-Dinitrotoluene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.98E+00	3.31E+03	6.62E+02	No
95	2, 6-Dinitrotoluene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
96	1,2-Diphenylhydrazine			0	0	-	-	-	-	0	0	-	-	-	-	1.17E-01	2.94E+01	5.89E+00	No
97	Endosulfan (alpha)		YES	0	0	0.22	41.531	8.306	No	0	0	0.056	14.077	2.815	No	5.19E+01	8.66E+04	1.73E+04	No
98	Endosulfan (beta)		YES	0	0	0.22	41.531	8.306	No	0	0	0.056	14.077	2.815	No	5.19E+01	8.66E+04	1.73E+04	No
99	Endosulfan sulfate		YES	0	0	-	-	-	-	0	0	-	-	-	-	5.19E+01	8.66E+04	1.73E+04	No
100	Endrin		YES	0	0	0.086	16.235	3.247	No	0	0	0.036	9.050	1.810	No	3.53E-02	5.89E+01	1.18E+01	No
101	Endrin Aldeyhde		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.76E-01	2.94E+02	5.89E+01	No
102	Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	8.12E+01	2.04E+04	4.08E+03	No
103	Fluorene			0	0	-	-	-	-	0	0	-	-	-	-	3.11E+03	7.82E+05	1.56E+05	No
104	Heptachlor		YES	0	0	0.52	98.164	19.633	No	0	0	0.0038	0.955	0.191	No	4.63E-05	7.73E-02	1.55E-02	No
105	Heptachlor Epoxide		YES	0	0	0.52	98.164	19.633	No	0	0	0.0038	0.955	0.191	No	2.29E-05	3.82E-02	7.65E-03	No
106	Hexachlorobenzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.68E-04	2.80E-01	5.61E-02	No
107	Hexachlorobutadiene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.08E+01	1.80E+04	3.59E+03	No
108	Hexachlorocyclohexan (alpha)		YES	0	0	-	-	-	-	0	0	-	-	-	-	2.86E-03	4.76E+00	9.52E-01	No
109	Hexachlorocyclohexan (beta)		YES	0	0	-	-	-	-	0	0	-	-	-	-	9.87E-03	1.67E+01	3.33E+00	No
110	Hexachlorocyclohexan (gamma)		YES	0	0	0.95	179.338	35.868	No	0	0	-	-	-	-	1.08E+00	1.80E+03	3.60E+02	No
111	HexachlorocyclоPentadiene			0	0	-	-	-	-	0	0	-	-	-	-	6.45E+02	1.62E+05	3.24E+04	No
112	Hexachloroethane			0	0	-	-	-	-	0	0	-	-	-	-	1.92E+00	4.82E+02	9.64E+01	No
113	Indeno(1, 2, 3-CK)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.07E-02	1.78E+01	3.56E+00	No
114	Isophorone			0	0	-	-	-	-	0	0	-	-	-	-	5.61E+02	1.41E+05	2.82E+04	No
115	Naphthalene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
116	Nitrobenzene			0	0	-	-	-	-	0	0	-	-	-	-	4.04E+02	1.01E+05	2.03E+04	No
117	N-Nitrosodi-N-Propylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	2.95E-01	4.93E+02	9.85E+01	No
118	N-Nitrosodimethylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	1.76E+00	2.94E+03	5.88E+02	No
119	N-Nitrosodiphenylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	3.50E+00	5.85E+03	1.17E+03	No
120	PCB-1016		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
121	PCB-1221		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
122	PCB-1232		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
123	PCB-1242		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
124	PCB-1248		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
125	PCB-1254		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
126	PCB-1260		YES	0	0	-	-	-	-	0	0	0.014	3.519	0.704	No	3.74E-05	6.25E-02	1.25E-02	No
127	Phenanthrene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
128	Pyrene			0	0	-	-	-	-	0	0	-	-	-	-	2.33E+03	5.87E+05	1.17E+05	No
129	1, 2, 4-Trichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	4.05E+01	1.03E+04	2.06E+03	No

Waste Load Allocation Summary

REQUEST INFORMATION

Request Number: 2559

From:		In Branch/Section			
Date Submitted	12/30/1899	Date Required	12/30/1899	FUND Code	
Date Permit application received by NPDES program					
Receiving Waterbody	Tennessee River (Guntersville Lake)				
Previous Stream Name					
Facility Name	Scottsboro Southside WWTP	(Name of Discharger-WQ will use to file)			
		Previous Discharger Name			
River Basin	Tennessee	Outfall Latitude	34.603611	(decimal degrees)	
*County	Jackson	Outfall Longitude	-86.017220	(decimal degrees)	
Permit Number	AL0031372	Permit Type	CONVERSION		
		Permit Status	Active		
		Type of Discharger	MUNICIPAL		

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

If yes, impacting dischargers names.	Impacting dischargers permit numbers.
Smurfit Stone Hollywood WWTP Section WWTP Awesome Properties Scottsboro Goose Pond WWTP	

Existing Discharge Design Flow	5	MGD	Note: The flow rates given should be those requested for modeling.
Proposed Discharge Design Flow		MGD	

Comments included ☑ Yes ☐ No

Information Verified By: dwt

Year File Was Created: 2002

Response ID Number: 1404

Lat/Long Method: Municipal/Industrial

12 Digit HUC Code	060300010603		
Use Classification	S / F&W		
Site Visit Completed?	☑ Yes ☐ No	Date of Site Visit	2/20/2014
Waterbody Impaired?	☐ Yes ☑ No	Date of WLA Response	3/6/2014
Antidegradation	☐ Yes ☑ No	Approved TMDL?	☐ Yes ☑ No
Waterbody Tier Level	Tier II		
Use Support Category	1	Approval Date of TMDL	

Waste Load Allocation Information

Modeled Reach Length	28.5	Miles	Date of Allocation	3/5/2014	
Name of Model Used	QUAL2E		Allocation Type	Annual	
Model Completed by	David Thompson		Type of Model Used	Desk-top	
Allocation Developed by	Water Quality Branch				

Waste Load Allocation Summary

Annual Effluent Limits			Conventional Parameters		Other Parameters	
			Qw MGD	Qw MGD	Qw MGD	Qw MGD
			Season	Season	Season	Season
Qw	5	MGD	From	From	From	From
			Through	Through	Through	Through
CBOD5	25	mg/L	CBOD5 mg/L	CBOD5 mg/L	TP mg/L	TP mg/L
NH3-N	20	mg/L	NH3-N mg/L	NH3-N mg/L	TN mg/L	TN mg/L
TKN		mg/L	TKN mg/L	TKN mg/L	TSS mg/L	TSS mg/L
D.O.		mg/L	D.O. mg/L	D.O. mg/L	mg/L	mg/L

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

Water Quality Characteristics Immediately Upstream of Discharge

Parameter	Summer		Winter	
CBODu	2	mg/l		mg/l
NH3-N	0.15	mg/l		mg/l
Temperature	28	°C		°C
pH	7	su		su

Hydrology at Discharge Location

Drainage Area Qualifier				Method Used to Calculate
Exact	Drainage Area	23487	sq mi	
	Stream 7Q10	5811	cfs	ADEM Estimate w/TVA Data
	Stream 1Q10	4358	cfs	ADEM Estimate w/TVA Data
	Stream 7Q2	10350	cfs	ADEM Estimate w/TVA Data
	Annual Average	38739	cfs	ADEM Estimate w/TVA Data

Comments and/or Notations

discharge located at Tennessee River 382.6
this is a Tier Permit, this WLA package is for a design flow of 5 mgd
another WLA package will be developed for a design flow of 15 mgd

Waste Load Allocation Summary

REQUEST INFORMATION

Request Number: 2555

From:		In Branch/Section			
Date Submitted	12/30/1899	Date Required	12/30/1899	FUND Code	
Date Permit application received by NPDES program					
Receiving Waterbody	Tennessee River (Guntersville Lake)				
Previous Stream Name					
Facility Name	Scottsboro Southside WWTP	(Name of Discharger-WQ will use to file)			
		Previous Discharger Name			
River Basin	Tennessee	Outfall Latitude	34.603611	(decimal degrees)	
*County	Jackson	Outfall Longitude	-86.017220	(decimal degrees)	
Permit Number	AL0031372	Permit Type	CONVERSION		
		Permit Status	Active		
		Type of Discharger	MUNICIPAL		
Do other discharges exist that may impact the model?	☑ Yes ☐ No				

If yes, impacting dischargers names.	Smurfit Stone Hollywood WWTP Section WWTP Awesome Properties Scottsboro Goose Pond WWTP	Impacting dischargers permit numbers.	

Existing Discharge Design Flow	15 MGD	Note: The flow rates given should be those requested for modeling.	
Proposed Discharge Design Flow	MGD		
Comments included	☑ Yes ☐ No	Information Verified By	dwt
Year File Was Created	2002	Response ID Number	1403
Lat/Long Method	Municipal/Industrial		

12 Digit HUC Code	060300010603		
Use Classification	S / F&W		
Site Visit Completed?	☑ Yes ☐ No	Date of Site Visit	2/20/2014
Waterbody Impaired?	☐ Yes ☑ No	Date of WLA Response	3/6/2014
Antidegradation	☐ Yes ☑ No	Approved TMDL?	☐ Yes ☑ No
Waterbody Tier Level	Tier II		
Use Support Category	1	Approval Date of TMDL	

Waste Load Allocation Information

Modeled Reach Length	28.5	Miles	Date of Allocation	3/5/2014	
Name of Model Used	QUAL2E		Allocation Type	Annual	
Model Completed by	David Thompson		Type of Model Used	Desk-top	
Allocation Developed by	Water Quality Branch				

Waste Load Allocation Summary

Annual Effluent Limits		
Qw	15	MGD
CBOD5	25	mg/L
NH3-N	20	mg/L
TKN		mg/L
D.O.		mg/L

Conventional Parameters				Other Parameters			
Qw	MGD	Qw	MGD	Qw	MGD	Qw	MGD
Season		Season		Season		Season	
From		From		From		From	
Through		Through		Through		Through	
CBOD5	mg/L	CBOD5	mg/L	TP	mg/L	TP	mg/L
NH3-N	mg/L	NH3-N	mg/L	TN	mg/L	TN	mg/L
TKN	mg/L	TKN	mg/L	TSS	mg/L	TSS	mg/L
D.O.	mg/L	D.O.	mg/L		mg/L		mg/L

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

Water Quality Characteristics Immediately Upstream of Discharge

Parameter	Summer		Winter	
CBODu	2	mg/l		mg/l
NH3-N	0.15	mg/l		mg/l
Temperature	28	°C		°C
pH	7	su		su

Hydrology at Discharge Location

Drainage Area Qualifier				Method Used to Calculate
Exact	Drainage Area	23487	sq mi	
	Stream 7Q10	5811	cfs	ADEM Estimate w/TVA Data
	Stream 1Q10	4358	cfs	ADEM Estimate w/TVA Data
	Stream 7Q2	10350	cfs	ADEM Estimate w/TVA Data
	Annual Average	38739	cfs	ADEM Estimate w/TVA Data

Comments and/or Notations

discharge located at Tennessee River 382.6
this is a Tier Permit, this WLA package is for a design flow of 15 mgd
another WLA package will be developed for a design flow of 5 mgd

Mixing Zone Analysis Summary

REQUEST INFORMATION

request number: 3119

From: (Responsible Engineer) Stephanie Ammons | In Branch/Section: Municipal

Date Submitted: 11/21/2014 | **Date Required:** 12/22/2014 | **FUND Code:** 605

Receiving Waterbody: Tennessee River | **Date Permit application received by NPDES program:**

Previous Stream Name:

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

Previous Discharger Name:

River Basin: Tennessee | **Outfall Latitude:** 34.603611 (decimal degrees)

***County:** Jackson | **Outfall Longitude:** -86.01722 (decimal degrees)

Permit Number: AL0031372 | **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: 5 MGD

Proposed Discharge Design Flow: MGD

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

Seasonal limits requested? ☐ Yes ☐ No

If not seasonal, only the summer sections will be used

Comments included ☑ Yes ☐ No

Information Verified By: REC

Year File Was Started: 2004

12 Digit HUC Code: 060300010603

Date of MZ Response: 1/27/2015

Use Classification: S / F&W

Site Visit Completed? ☐ Yes ☑ No

Date of Site Visit:

Hydrology

			Method Used to Calculate
Drainage Area	23487	sq mi	
Stream 7Q10	5811	cfs	ADEM Estimate w/ TVA Data
Stream 1Q10	4358	cfs	ADEM Estimate w/ TVA Data
Stream 7Q2	10350	cfs	ADEM Estimate w/ TVA Data
Annual Average		cfs	

Date of MZ Analysis: 1/27/2015

Model Completed by: Ross Caton

Pollutant Category

Whole Effluent Toxicity (WET) ☑ **Thermal** ☐ **Pathogens** ☐

Mixing Zone Analysis Summary

WET Parameters

Summer

Acute

Ambient Streamflow	4358	cfs
ZID Length	18	Meters
ZID IWC	4.27	%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Winter

Acute

Ambient Streamflow		cfs
ZID Length	18	Meters
ZID IWC		%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Thermal Parameters

Summer

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

Winter

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

Pathogen Parameters

Summer

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

Winter

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

Comments and/or Notations: Note that this MZ IWC is for determination of Whole Effluent Toxicity.

Mixing Zone Analysis Summary

REQUEST INFORMATION

request number: 3120

From: (Responsible Engineer) Stephanie Ammons | In Branch/Section: Municipal

Date Submitted	11/21/2014	**Date Required**	12/22/2014	**FUND Code**	605

Receiving Waterbody	Tennessee River	Date Permit application received by NPDES program	
Previous Stream Name			

Facility Name	Scottsboro Southside WWTP	(Name of Discharger-WQ will use to file)	
		Previous Discharger Name	
River Basin	Tennessee	**Outfall Latitude**	34.603611 (decimal degrees)
***County**	Jackson	**Outfall Longitude**	-86.01722 (decimal degrees)
Permit Number	AL0031372	**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	15	MGD	**Note: The flow rates given should be those requested for modeling.**
Proposed Discharge Design Flow		MGD	

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

Comments included ☑ Yes ☐ No

Information Verified By REC

Year File Was Started 2004

12 Digit HUC Code	060300010603	**Date of MZ Response**	1/27/2015
Use Classification	S / F&W		
Site Visit Completed?	☐ Yes ☑ No	**Date of Site Visit**	

Hydrology			**Method Used to Calculate**
Drainage Area	23487	sq mi	
Stream 7Q10	5811	cfs	ADEM Estimate w/ TVA Data
Stream 1Q10	4358	cfs	ADEM Estimate w/ TVA Data
Stream 7Q2	10350	cfs	ADEM Estimate w/ TVA Data
Annual Average		cfs	

Date of MZ Analysis	1/27/2015	**Model Completed by**	Ross Caton

Pollutant Category

Whole Effluent Toxicity (WET) ☑ **Thermal** ☐ **Pathogens** ☐

Mixing Zone Analysis Summary

WET Parameters

Summer

Acute

Ambient Streamflow	4358	cfs
ZID Length	18	Meters
ZID IWC	14	%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Winter

Acute

Ambient Streamflow		cfs
ZID Length	18	Meters
ZID IWC		%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Thermal Parameters

Summer

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

Winter

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

Pathogen Parameters

Summer

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

Winter

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

Comments and/or Notations: Note that this MZ IWC is for determination of Whole Effluent Toxicity.

Mixing Zone Analysis Summary

Page

REQUEST INFORMATION

request number: 3117

From: (Responsible Engineer) Stephanie Ammons | In Branch/Section: Municipal

Date Submitted: 11/21/2014 | **Date Required:** 12/22/2014 | **FUND Code:** 605

Receiving Waterbody: Tennessee River | Date Permit application received by NPDES program:

Previous Stream Name:

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

Previous Discharger Name:

River Basin: Tennessee | **Outfall Latitude:** 34.603611 (decimal degrees)

***County:** Jackson | **Outfall Longitude:** -86.01722 (decimal degrees)

Permit Number: AL0031372 | **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: 5 MGD

Proposed Discharge Design Flow: MGD

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

Seasonal limits requested? ☐ Yes ☐ No

If not seasonal, only the summer sections will be used

Comments included ☑ Yes ☐ No

Information Verified By: REC

Year File Was Started: 2004

12 Digit HUC Code: 060300010603

Use Classification: S / F&W

Site Visit Completed? ☐ Yes ☑ No

Date of MZ Response: 1/27/2015

Date of Site Visit:

Hydrology			Method Used to Calculate
Drainage Area	23487	sq mi	
Stream 7Q10	5811	cfs	ADEM Estimate w/ TVA Data
Stream 1Q10	4358	cfs	ADEM Estimate w/ TVA Data
Stream 7Q2	10350	cfs	ADEM Estimate w/ TVA Data
Annual Average		cfs	

Date of MZ Analysis: 12/24/2014

Model Completed by: Ross Caton

Pollutant Category

Whole Effluent Toxicity (WET) ☐ **Thermal** ☐ **Pathogens** ☑

Mixing Zone Analysis Summary

WET Parameters

Summer

Acute

Ambient Streamflow	4358	cfs
ZID Length	7.64	Meters
ZID IWC	17.8	%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Winter

Acute

Ambient Streamflow		cfs
ZID Length	7.64	Meters
ZID IWC		%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Thermal Parameters

Summer

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

Winter

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

Pathogen Parameters

Summer

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

Winter

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

Comments and/or Notations

Note that this MZ IWC is for determination of Bacteria Limits. ZID length is equal to the 5 ft below the water surface due to the discharge located in a swimming classification.
E. Coli Limits : Geomean = 708 col/100mL Daily Max = 1320 col/100 mL

Mixing Zone Analysis Summary

REQUEST INFORMATION

request number: 3118

From: (Responsible Engineer) Stephanie Ammons | In Branch/Section: Municipal

Date Submitted: 11/21/2014 | **Date Required:** 12/22/2014 | **FUND Code:** 605

Receiving Waterbody: Tennessee River | Date Permit application received by NPDES program:

Previous Stream Name:

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

Previous Discharger Name:

River Basin: Tennessee | **Outfall Latitude:** 34.603611 (decimal degrees)

***County:** Jackson | **Outfall Longitude:** -86.01722 (decimal degrees)

Permit Number: AL0031372 | **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: 15 MGD

Proposed Discharge Design Flow: MGD

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

Seasonal limits requested? ☐ Yes ☒ No

If not seasonal, only the summer sections will be used

Comments included ☑ Yes ☐ No

Information Verified By: REC

Year File Was Started: 2004

12 Digit HUC Code: 060300010603

Use Classification: S / F&W

Site Visit Completed? ☐ Yes ☑ No

Date of MZ Response: 1/27/2015

Date of Site Visit:

Hydrology

			Method Used to Calculate
Drainage Area	23487	sq mi	
Stream 7Q10	5811	cfs	ADEM Estimate w/ TVA Data
Stream 1Q10	4358	cfs	ADEM Estimate w/ TVA Data
Stream 7Q2	10350	cfs	ADEM Estimate w/ TVA Data
Annual Average		cfs	

Date of MZ Analysis: 1/27/2015

Model Completed by: Ross Caton

Pollutant Category

Whole Effluent Toxicity (WET) ☐ **Thermal** ☐ **Pathogens** ☑

Mixing Zone Analysis Summary

WET Parameters

Summer

Acute

Ambient Streamflow	4358	cfs
ZID Length	7.64	Meters
ZID IWC	31.8	%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Winter

Acute

Ambient Streamflow		cfs
ZID Length	7.64	Meters
ZID IWC		%

Chronic

Ambient Streamflow		cfs
Mixing Zone Length		Meters
Mixing Zone IWC		%

Thermal Parameters

Summer

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

Winter

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

Pathogen Parameters

Summer

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

Winter

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

Comments and/or Notations

Note that this MZ IWC is for determination of Bacteria Limits. ZID length is equal to the 5 ft below the water surface due to the discharge located in a swimming classification.
E. Coli limits: Geomean = 396 col/100 mL Daily Max = 739 col/100 mL

LANCE R. LEFLEUR
DIRECTOR

ROBERT J. BENTLEY
GOVERNOR

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

MEMORANDUM January 27, 2015

Prepared For: Stephanie Ammons - Municipal Section
Prepared By: Ross Caton, ADEM Water Quality Branch
Subject: CORMIX Modeling – AL0031372 Scottsboro Southside WWTP 5 & 15 MGD

The Water Quality Branch has performed two CORMIX models for Scottsboro Southside WWTP. The facility discharges to the Tennessee River with a tiered permit at effluent flow rates of 5 MGD and 15 MGD.

A limiting dilution of 251:1 was calculated using the design effluent flow rate of 15 MGD and a Tennessee River 7Q10 value of 5811 cfs. Therefore, based upon the established ADEM protocol for Whole Effluent Toxicity (WET) determination, acute toxicity is applicable using the 1Q10 flow at the edge of the ZID. Also, an Instream Waste Concentration (IWC) for bacteria limits was evaluated at the 5 ft depth below the water's surface, due to the discharge being located in a swimming classified waterbody.

The Scottsboro Southside WWTP structure consists of a 100 ft submerged 36 inch diameter pipe with 10, 16 inch ports that point vertically and are all equally spaced. The ports are approximately 1.52 m above the river bottom and the diffuser is oriented perpendicular to the flow of the river.

The following are the IWC's calculated for each discharging rate:

Acute Toxicity:

Flow Rate	IWC
5 MGD	4.27%
15 MGD	14.00%

Bacteria Limits:

Flow Rate	IWC
5 MGD	17.8%
15 MGD	31.8%

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

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

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

Mobile-Coastal
4171 Commanders Drive
Mobile, AL 36615-1421
(251) 432-6533
(251) 432-6598 (FAX)

Scottsboro Southside WWTP AL0031372
MZ Bacterial Limits Calculations

Swimming and Other Whole Body Water-Contact Sports Use Classification instream criteria:
335-6-10-.09-10-21

6. Bacteria:

(i) Waters in the immediate vicinity of discharges of sewage or other wastes likely to contain bacteria harmful to humans, regardless of the degree of 335-6-10-.09 10-22 treatment afforded these wastes, are not acceptable for swimming or other whole body water-contact sports.*

(ii) In all other areas, the bacterial quality of water is acceptable when a sanitary survey by the controlling health authorities reveals no source of dangerous pollution and when the ***geometric mean E. coli organism density does not exceed 126 colonies/100 ml nor exceed a maximum of 235 colonies/100 ml in any sample in non-coastal waters****. In coastal waters, bacteria of the enterococci group shall not exceed a geometric mean of 35 colonies/100 ml nor exceed a maximum of 104 colonies/100 ml in any sample. The geometric mean shall be calculated from no less than five samples collected at a given station over a 30-day period at intervals not less than 24 hours. When the geometric mean bacterial organism density exceeds these levels, the bacterial water quality shall be considered acceptable only if a second detailed sanitary survey and evaluation discloses no significant public health risk in the use of the waters.*

*All IWC values were derived from the Cormix Model outputs

5 MGD Limits:

$$\textbf{Geomean: } \frac{Geomean\ Criteria}{IWC\ (\%)} = \frac{126 \frac{col}{100ml}}{17.8\%} = \mathbf{708 \frac{col}{100ml}}$$

$$\textbf{Daily Maximum: } \frac{Daily\ Max\ Criteria}{IWC\ (\%)} = \frac{235 \frac{col}{100ml}}{17.8\%} = \mathbf{1320 \frac{col}{100ml}}$$

15 MGD Limits:

$$\textbf{Geomean: } \frac{Geomean\ Criteria}{IWC\ (\%)} = \frac{126 \frac{col}{100ml}}{31.8\%} = \mathbf{396 \frac{col}{100ml}}$$

$$\textbf{Daily Maximum: } \frac{Daily\ Max\ Criteria}{IWC\ (\%)} = \frac{235 \frac{col}{100ml}}{31.8\%} = \mathbf{739 \frac{col}{100ml}}$$

Scottsboro WSG
Water Sewer Gas

February 3, 2020

Alabama Department of Environmental Management
Permits and Services Division
ATTN: Mr. Russell Kelly
1400 Coliseum Blvd.
Montgomery, AL 36110-2059

RE: Permit AL0031372

Dear Mr. Kelly,

Please find enclosed the application for permit renewal for the Scottsboro Southside Wastewater Treatment Plant AL0031372 for discharges 001-1 and 001-2. A check for permit renewal fee in the amount of $14,120 is also included.

Should you need further information, please let me know.

Sincerely,

Bradley Chandler
Assistant Manager

Enclosures:
EPA Form 3510-1
EPA Form 3510-2A
ADEM Form 188

P.O. Box 550 • 404 East Willow Street • Scottsboro, Alabama 35768
(256) 574-1515 • (256) 574-1744 • Fax: (256) 574-1965

Scottsboro WSG
Water Sewer Gas

SCOTTSBORO "SID" PRETREATMENT PROGRAM

P.O. Box 550 • 404 East Willow Street • Scottsboro, Alabama 35768
(256) 574-1515 • (256) 574-1744 • Fax: (256) 574-1965

SECTION 5 EXCLUDED WASTES

Section 5.01 No User shall contribute or cause to be contributed directly or indirectly, any pollutant or wastewater which will interfere with the operation or performance of the Sewerage System. These general prohibitions apply to all such Users of the Sewerage System whether or not the User is subject to National Categorical Pretreatment Standards or any other National, State, or local Pretreatment Standards or Requirements.

Section 5.02 No User shall discharge or deposit any of the following materials, waste materials, wastes, gases, or liquids into any sewer forming part of the Sewerage System except where these may constitute occasional, intermittent inclusions in the wastewaters discharged from residential premises:

5.02.01 Any wastewater having a temperature which will inhibit biological activity in a Wastewater Treatment Plant or resulting in other interference with the treatment processes but, in no case, wastewater with a temperature which exceeds 60°C (140°F) at its introduction into the Sewerage System or which exceeds 40°C (104°F) at its introduction into a Wastewater Treatment Plant.

5.02.02 Any water or waste containing more than 50 mg/l of fat, oil, or grease or other substances that will solidify or become viscous at temperatures between 0°C (32°F) and 60°C (140°F).

5.02.03 Wastewater from Industrial Users containing floatable oils, fat or grease.

5.02.04 Any garbage that has not been properly shredded so that no

particles are any greater than one-half inch (½") in any dimension.

5.02.05 Any waste capable of causing abnormal corrosion, abnormal deterioration, damage to or creating a hazard to structures, equipment, or personnel of the Sewerage System or interfering with proper operation of one of the City's Wastewater Treatment Plants. All wastes discharged to the Sewerage System must have a pH value in the range of 6 to 10 standard units. Prohibited materials include but are not limited to concentrated acids or alkalies and high concentrations of compounds of sulfur, chlorine, and fluorine, and substances which may react with water to form strongly acidic or basic products.

5.02.06 Any waters or wastes having a color which is not removable by the existing wastewater treatment processes and which causes the Plant effluent to exceed color requirements for discharge to the receiving waters.

Section 5.03 No User shall discharge or deposit any of the following materials, waste materials, waste gases, or liquids into any sewer forming a part of the Sewerage System:

5.03.01 Any liquids, solids, or gases which by reason of their nature or quantity are or may be sufficient, either alone or by interaction with other substances, to cause fire or explosion or be injurious in any other way to the Sewerage System or to the operation of the System. At no time shall two successive readings (15 to 30 minutes between readings)

on an explosion hazard meter[1] at the point of discharge into the Sewerage System be more than five percent (5%) nor any single reading over ten percent (10%) of the Lower Explosive Limit (L.E.L.) of the meter. Prohibited materials covered single reading over ten percent (10%) of the Lower Explosive Limit (L.E.L.) of the meter. Prohibited materials covered by this Section include, but are not limited to, gasoline, kerosene, naphtha, benzene, fuel oil, motor oil, mineral spirits, commercial solvents, toluene, xylene, ethers, alcohols, ketones, aldehydes, peroxides, chlorates, perchlorates, bromates, carbides, and hydrides.

5.03.02 Any other solid or viscous substance in quantity or character capable of causing obstruction to flow in sewers or interference with proper operation of wastewater treatment facilities such as, but not limited to, eggshells from egg processors, ashes, cinders, ceramic wastes, sand, mud, straw, shavings, thread, glass, rags, metal, feathers, bones, tar, plastics, wood, paunch manure, insulation materials, fibers of any kind, stock or poultry feeds, processed grains, viscera or other fleshy particles from processing or packing plants, or lime or similar sludges.

5.03.03 Any noxious or malodorous solids, liquids, or gases, which, either singly or by interaction with other wastes, are capable of creating a public nuisance or hazard to life or

[1] Model GX-3 Meter as manufactured by Gas Tech, Inc., Mountain View, California, referenced to establish a standard of quality for a measuring device.

are or may be sufficient to prevent entry into a sewer for its maintenance and repair.

5.03.04 Any substance which may cause Wastewater Treatment Plant effluent or any other product of the Sewerage System such as residue, sludge, or scum, to be unsuitable for reclamation and reuse or to interfere with the reclamation process. In no case, shall a substance discharged to the Sewerage System cause the system to be in non-compliance with sludge use or disposal criteria, guidelines or regulations developed by local, State or Federal authorities.

5.03.05 Any substance which will cause the Sewerage System to violate its NPDES Permit and/or water quality standards of the receiving stream.

5.03.06 Any water or wastes which, by interaction with other waters or wastes in the Sewerage System, release obnoxious gases, form suspended solids which interfere with the Sewerage System, or create a condition deleterious to structures and treatment processes.

5.03.07 Any form of Inflow as defined by Section 1.03.25 including storm drainage and uncontaminated thermal process water.

5.03.08 Infiltration as defined by Section 1.03.24 in excess of two hundred (200) gallons per inch of pipe diameter per mile of pipe per day.

5.03.09 Any Unpolluted Wastewater, as defined in Section 1.03.60.

Section 5.04 No User shall discharge into any sewer forming part of the Sewerage System any of the following materials in concentrations exceeding the stated limits:

5.04.01 Any water or wastes that contain more than ten (10) mg/l of hydrogen sulphide, sulphur dioxide or nitrous oxide.

5.04.02 Any toxic or poisonous substance or any other materials in sufficient quantity to injure or interfere with the wastewater treatment processes, or to constitute a hazard to humans or animals, or to cause a violation of the water quality standards or effluent standards for the stream or watercourse receiving the effluent from a Wastewater Treatment Plant or to exceed limitations set forth in Categorical Pretreatment Standards.

5.04.03 Any waters containing suspended solids of such character and quantity that unusual provisions, attention or expense is required to handle such materials at a Watewater Treatment Plant.

5.04.04 Any waters containing quantities of radium or naturally occurring or artificially produced radioisotopes in excess of presently existing or subsequently accepted limits for drinking water as established by current drinking water regulations promulgated by EPA.

5.04.05 No person shall discharge wastewater containing in excess of:

5.04.05.01 Fixed Upper Limits for Constituents (Milligrams per Liter)

Pollutant	30 Day Average	Daily Maximum
Aluminum as Al	25.0	50.0
Cadmium as Cd	0.26	0.69
Chromium (total) as Cr	1.71	2.77
Copper as Cu	2.07	3.36
Cyanide (total) as CN	0.65	1.20
Iron as Fe	10.0	20.0
Lead as Pb	0.43	0.69
Nickel as Ni	2.38	3.98
Phosphorus (total) as P	20.0	50.0
Silver as Ag	0.24	0.43
Tin as Sn	5.0	10.0
Zinc as Zn	15.0	20.0
pH	6.0-10.0 Standard Units	

5.04.05.02 Unless otherwise specified by SID Permit, no User shall discharge wastewater containing pollutants in excess of concentrations listed elsewhere in these Sewer Use Regulations.

5.04.06 The admission into the Sewerage System of any waters or wastes having a BOD in excess of five hundred (500) mg/l on a twenty-four (24) hour composite basis, or for any single sample having a BOD in excess of fifteen hundred (1500) mg/l will be subject to review by the Board. Where necessary in the opinion of the Board, the User shall provide and operate, at his own expense such pretreatment as may be required to reduce the BOD to meet the above requirements.

5.04.07 The admission into the Sewerage System of any waters or wastes having a suspended solids content in excess of five hundred (500) mg/l on a twenty-four (24) hour composite basis, or for any single sample having a suspended solids content greater than fifteen hundred (1500) mg/l will be subject to review by the Board. Where necessary in the opinion of the Board, the User shall provide and operate, at his own expense, such pre-treatment as may be required to reduce the suspended solids content to meet the above requirements.

5.04.08 The admission into the Sewerage System of any waters or wastes in volumes, or with constituents such that existing dilution conditions in the sewers or at a Wastewater Treatment Plant would be affected to the detriment of the Sewerage System, shall be subject to review and approval of the Board. Where necessary in the opinion of the Board, pre-treatment or equalizing units may be required to bring constituents or volumes of flow within the limits previously prescribed or to an otherwise acceptable level, and to hold or equalize flows such that no peak flow conditions may hamper the operation of any unit of the Sewerage System. Said equalization or holding unit shall have a capacity suitable to serve its intended purpose and be equipped with acceptable outlet control facilities to provide flexibility in operation and accommodate changing conditions in the waste flow.

5.04.09 Upon the promulgation of the National Categorical Pretreat-

ment Standards for a particular industrial subcategory, the Categorical Standard, if more stringent than limitations imposed under these Regulations for sources in that subcategory, shall immediately supersede the limitations imposed under these Regulations. All affected Users shall notify the Board of the applicable reporting requirements under 40 CFR, Section 403.12.

5.04.10 State requirements and limitations on discharges shall apply in any case where they are more stringent than Federal requirements and limitations or those of these Regulations.

5.04.11 The Board reserves the right to establish additional regulations containing more stringent limitations or requirements on discharges to the Sewerage System if deemed necessary.

SECTION 6 PRETREATMENT AND ACCIDENTAL DISCHARGE

Section 6.01 Any person, who is denied a permit to discharge industrial waste, or who is prohibited from discharging any substance as specified in these Regulations, or who is required to provide pretreatment or flow equalization as a Significant Industrial User under the Federal effluent limitation guidelines for the appropriate industrial category, shall have the sole responsibility to devise at his own expense the methods for eliminating the problem so as to make any waste discharge eligible for a permit or for compliance with these Regulations or the Federal guidelines. Such sole responsibility shall not be affected nor shall any responsibility be assumed by the Board, notwithstanding that the Board may render any assistance to any person in overcoming such a

Scottsboro WSG
Water Sewer Gas

May 9, 2022

Alabama Department of Environmental Mgt.
Municipal Section – Water Division
Attn: Nicholas Lowe
1400 Coliseum Blvd.
Montgomery, Alabama 36110-2059

Re: Request for Anti-degredation Analysis
NPDES Permit Number AL0031372
Scottsboro Southside WWTP
Jackson County

Mr. Lowe,

Enclosed please find anti-degradation analysis per your request along with ADEM Form 188 prepared by our consulting engineering firm, Municipal Consultants of Birmingham, Alabama. Please let me know if you have any questions on this matter.

Thank you,

Mr. Jim Green, Jr.
General Manager
Scottsboro Water, Sewer & Gas Board
404 E. Willow St.

Scottsboro WSG
Water Sewer Gas

July 27, 2022

RECEIVED
JUL 26 2022
MUNICIPAL SECTION

Alabama Department of Environmental Mgt.
Municipal Section – Water Division
Attn: Michael Simmons
1400 Coliseum Blvd.
Montgomery, Alabama 36110-2059

Re: Request for Anti-degredation Information
NPDES Permit Number AL0031372
Scottsboro Southside WWTP
Jackson County

Mr. Simmons,

As per our conversation concerning the Anti-Degradation Analysis previously conducted for our Scottsboro Southside WWTP, there are no changes according to our consulting engineer other than increased costs for the methods considered. Please let us know if you need any further information on this matter.

Thank you,

Mr. Jim Green, Jr.
General Manager
Scottsboro Water, Sewer & Gas Board
404 E. Willow St.

SECTION F – ANTI-DEGRADATION EVALUATION

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

1. Is this a new or increased discharge that began after April 3, 1991? ☒ Yes ☐ No
   If yes, complete F.2 below. If no, go to Section G.

2. Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in F.1? ☒ Yes ☐ No

   If yes, do not complete this section.

   If no and the discharge is to a Tier II waterbody as defined in ADEM Admin. Code r. 335-6-10-.12(4), complete F.2.A – F.2.F below, ADEM Form 311-Alternatives Analysis, and either ADEM Form 312 or ADEM Form 313- Calculation of Total Annualized Project Costs (Public-Sector or Private-Sector Projects, whichever is applicable). ADEM Form 312 or ADEM Form 313, whichever is applicable, must be provided for **each** treatment discharge alternative considered technically viable. ADEM forms can be found on the Department's website at http://adem.alabama.gov/DeptForms/.

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

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

   _____

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

   _____

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

   _____

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

   _____

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

   _____

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

   _____

SECTION G – EPA Application Forms

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

1. All applicants must submit Form 1.
2. Applicants for new or existing discharges of sanitary wastewater from Publicly-Owned Treatment Works (POTW) and Other Treatment Works Treating Domestic Sewage (TWTDS) must submit Form 2A.
3. Applicants for new or existing land application of sanitary wastewater must submit Form 2A and, if the land application site is not completely bermed to prevent runoff, applicants must also submit Form 2F.
4. Applicants for new and existing discharges of process wastewater from water treatment facilities (i.e. public water supply treatment plants) must submit Form 2C.
5. Applicants that generate sewage sludge, derive a material from sewage sludge, or dispose of sewage sludge must submit Part 2 of Form 2S.

Attachment 1 to Supplementary Form
ADEM Form 311
Alternatives Analysis

Applicant/Project: Scottsboro Southside WWTP

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

Alternative	Viable	Non-Viable	Comment
1 Land Application		X	
2 Pretreatment/Discharge to POTW		X	
3 Relocation of Discharge		X	
4 Reuse/Recycle		X	
5 Process/Treatment Alternatives		X	
6 On-site/Sub-surface Disposal		X	
(other project-specific alternatives considered by the applicant; attach additional sheets if necessary)			
7			
8			
9			

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

Signature: Stuckey Godfrey
(Professional Engineer)

Date: 03-18-19

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

ADEM Form 311 3/02

Scottsboro Southside WWTP Anti-Degradation Analysis – March 2014

ADEM Form 188, Section F: Information for New or Increased Discharges

A. Environmental or Public Health Problems that will be Corrected:

This increase in capacity is for a proposed discharge. This increase in capacity will allow the avoidance of certain environmental or public health public problems, because adequate WWTP treatment plant capacity will be available to properly handle wastewater.

Growth, at least some, will likely occur regardless of whether or not adequate capacity is available. If the growth occurs with wastewater being handled by septic tanks, etc., some tanks will likely fail and result in inadequately treated sewage being in yards and ditches, possibly including ditches where children play. This would result in both environmental and public health problems.

If the growth results in wastewater being sent to the Scottsboro WWTP but with the WWTP having inadequate capacity (due to not being expanded because it could not get a permit for expansion), then environmental problems may be created, public health problems may occur, and NPDES permit violations may occur.

It seems more reasonable to obtain a permit for WWTP expansion prior to growth occurring than to allow growth to occur (without sufficient treatment) and cause environmental problems and public health problems prior to obtaining a permit for WWTP expansion.

B. Increase in Employment:

This increase in capacity is being applied for in anticipation of growth. At this time, we do not know exactly how much increase in employment will accompany growth. As an indication of potential employment, a chicken processor could employ approximately 1,000 people. The Hyundai plant in Alabama employs approximately 2,700 people. The Mercedes Benz plant in Alabama employs approximately 3,000 people and is current planning for the addition of 300 more. (These jobs are direct employment and do not include the employment of support businesses.) The number of people employed obviously will vary significantly from one business to another. However, there is the potential for significant

increases in employment due to the growth that would be served by a WWTP expansion.

C. Preventing Employment Reduction:

At this time, the degree to which employment reduction is prevented by the increase in capacity of the WWTP is unknown. It seems reasonable that if the expansion of the WWTP allows new growth, that in general, existing employment will also be assisted by new growth. For example, the construction of the new businesses will require labor and materials from existing employers. Further, the new employees of the new businesses will need somewhere to spend their money, therefore the existing businesses could continue to be benefitted by the growth allowed by the expansion of the WWTP.

D. Additional State and Local Taxes:

This increase in capacity is to serve new growth that has not yet been defined. Scottsboro regularly receives inquiries regarding the availability of water and sewer capacity to serve new industries, so it is difficult to project what type of business may occur and thus what type of taxes will be paid.

A variety of taxes may result from a new business. These may include some of the following taxes as applicable:

City property tax, County property tax, School property tax, State property tax, Business license fees, State unemployment compensation taxes, and corporate income tax.

Retail businesses would collect sales taxes, cigarette taxes, and alcohol taxes. Where applicable, there could be others such as lodging taxes, motor vehicle dealer regulatory license fees, beautician license fees, and rental taxes. Other applicable taxes would apply to gasoline sales and scrap tire environmental fee.

Individuals would be subject to state income taxes.

Therefore for new businesses, the resulting tax revenues (state and local) could be substantial.

E. Public Services

This increase in capacity is to serve new growth that has not yet been defined. Thus the type of public service that may be provided is unknown at the present time. Depending on the type of business, the service provided could include all types of retail sales (groceries, fuel, clothing, or meals, etc.). It could include the manufacture of all types of products (motorcycles, cars or car components, construction equipment, carpet, or lawnmowers, etc.). It may include services such as housecleaning, painting, HVAC installation and repair, plumbing, medical care, or software development, etc..

F. Economic or Social Benefit to the Community

This increase in capacity is to serve new growth that has not yet been defined. Thus the type of economic or social benefit to the community is unknown at present. Some examples of businesses that would be allowed by having sufficient wastewater treatment capacity include assisted living developments (including nursing homes), institutions (such as daycare and training) that serve disadvantaged people, childcare, schools, churches, medical clinics and doctor offices, dialysis clinics, dentists, counselors, and veterinarians. Economic benefits result from having jobs available so that people can support themselves and their families. The increased tax revenue may allow the development of parks for the citizens to enjoy.

Alternatives Analysis

The existing Scottsboro WWTP is a fairly simple plant consisting of screening, grit removal, activated sludge aeration (with no primary clarification), final clarification, disinfection, and discharge to the Tennessee River. Other than a simple lagoon system (which is not practical due to the huge size that would be required, not to mention concern with limestone geology in the area and permit compliance) all other alternatives are more complex, more expensive, and more difficult to operate and maintain. The alternatives in ADEM Form 311 are briefly discussed below.

1. Land Application

The area for land application was estimated based on an application rate of 1" per week. For the 10 mgd increase in flow, this requires 2,578 acres. This is 4.0 square miles, a very large land area. Scottsboro is bordered by the Tennessee River on the southeast. Scottsboro's main business district is located north and east of the WWTP. There are various mountains located northerly and westerly, some with slopes approaching 10%. The level areas remaining within several miles of the WWTP contain many residences. This would necessitate many significant setbacks (in addition to the 4 square miles already required) for public health (windblown spray), public perception (opposition), and potential liability (whether justified or not). Depending on the type of irrigation equipment, additional buffer area may be needed. Therefore the fields would have to be divided into many, many independent tracts. This would greatly increase the manpower required to operate the system.

A minimum of 30-days holding time should be provided for wet periods of the year. (Even this may be inadequate to prevent runoff during exceptionally wet months.) This would require a 92-acre, 10-foot deep, storage pond, not including dike area and buffer around the pond. This would necessitate a 1.5 mile long road around the dike and a 1.5 mile long security fence. It is unknown if sufficient suitable and available land is available to construct this as one pond. Even if so, it would be desirable to construct this as at least two and probably more ponds. This will increase the length of the road and fencing.

Secondary treatment should be provided prior to land application to prevent excessive odor from the holding pond(s) and to allow better disinfection than could be obtained with lesser treatment. Secondary treatment – i.e. "full treatment" may help in addressing public opposition which would likely claim that they were "spraying raw sewage behind my house". Therefore the cost of treatment would (both capital and operating costs) would be the same as for the present conventional treatment and discharge. In fact, it would be desirable to have nutrient removal to reduce the algae growth in the holding pond. Algae can cause clogging in the sprinkler nozzles and create a real maintenance nightmare.

Land application would require the following additional capital costs after treatment:

1. Cost of the land for holding pond(s) and for irrigation
2. Cost to construct a pump station to pump effluent to the holding pond(s)
3. Cost to construct force mains (approximately 24" diameter) to holding pond(s)
4. Cost to construct holding pond(s)
5. Cost to construct a pumping station to pump flow out of the holding ponds to the spray fields
6. Cost to construct piping (approximately 24" diameter) from the pond(s) to the spray fields
7. Cost to construct piping inside the fields. This could be a grid of piping
8. Cost of the irrigation equipment
9. Cost of control valves to allow flow to be directed to the various fields
10. Cost for fencing (where applicable). For sites near residences, fencing would be desired to reduce the potential for children to play in the fields.
11. Cost for flow meters. Flow meters are desired at each field to keep track of the amount of effluent applied.

Land application would require the following additional operational costs after treatment:

1. Cost for maintaining the holding pond(s) and spray fields. This would include mowing the dikes and fields. There will also be costs for maintaining fences and roads along the dike and into the fields.
2. Costs for pumping effluent from the WWTP to the holding ponds. This would include power cost and maintenance costs on the pumps.

3. Costs for pumping effluent from the holding ponds to the fields. This would include power cost and maintenance costs on the pumps. Although these costs could vary significantly depending on the final design of the system (e.g. how far the effluent would have to be pumped to reach acceptable land that could be acquired), assuming a 75 psi pump discharge pressure, it appears that pump horsepower would be in the 500 hp range. Land application would not a "green" system in this case.
4. Costs to maintain the sprinkler system. These will vary depending on the type of system utilized. It would include cleaning debris from sprinklers and repair of freeze damage to exposed piping. For center pivot irrigation systems, there would be the costs associated with the drives, wheels, and bearings, etc.
5. Cost to maintain control valves. This would include automated remote control valves to reduce manpower as well as reducing the effort and time required to operate large valves.
6. Cost to calibrate and read flowmeters. This could include the cost of maintaining a SCADA system for the land application process.
7. Cost for laboratory monitoring, including groundwater monitoring if applicable.

No site specific project cost estimates have been prepared for the above. However, it can be seen that the costs would be far more than the cost of conventional treatment alone. The Water Environment Research Foundation (WERF) has prepared a fact sheet regarding Spray Distribution. WERF estimated the cost for a system handling 50,000 gpd at $1,260,000 to $1,890,000. Extrapolating the lower figure to a 10 mgd results in a rough estimate of $252 million just to construct the irrigation system. This estimate does not include the cost of the 4 square miles of land for irrigation or of the 92 acres of effluent storage. The treatment cost is also excluded.

WERF stated that "surface application of effluent is a relatively high risk dispersal method due to potential human contact with odors, contaminants, and pathogens". It stated that "large buffer zones, fences and signage are generally needed."

Given the very high construction cost, the operation costs, and the land requirements, land application is not viable.

2. **Pretreatment/Discharge to POTW**

   There are no other nearby POTWs nearby that could handle this amount of flow. This alternative is not viable.

3. **Relocation of Discharge**

   The present discharge is to the Tennessee River. This receiving stream provides significant dilution of the treated effluent and thus no relocation is reasonable or viable.

4. **Reuse/Recycle**

   The 10 mgd flow contemplated by the increased discharge is a large flow. There are no known demands for this much recycled water. Note that if there were a demand for reuse or recycled water, it may be necessary to provide additional treatment, perhaps including nitrification and filtration to enhance disinfection if the opportunity for human contact were increased. The addition of the new processes to allow recycling would result in significant additional construction costs and operating costs.

   The reuse of 10 mgd is currently non-viable.

5. **Process Treatment Alternatives**

   Two main process alternatives were considered: Trickling Filters and Membrane Bioreactors.

   Trickling filters would require the addition of a new process – primary clarification to pretreat the wastewater before the trickling filters. Then the sludge from the primary clarifiers would require treatment. Effluent from the trickling filter plant would be expected to contain more pollutants than that from the present activated sludge process. This would have a negative impact on disinfection. Trickling filters can sometimes have difficulty complying with NPDES percentage removal requirements when flows are high due to infiltration. Additionally, should TN limits be imposed in the future, trickling filters would not be a favored process and may have to be abandoned.

   Membrane bioreactors are fairly new technology in Alabama. Their primary advantage is a high degree of treatment. Due to the membrane technology, they have a very low effluent TSS. However, membranes are expensive and require a lot of support equipment such as chemical treatment and numerous actuated valves as well as a PLC control system.

All this auxiliary equipment increases maintenance labor, time, and cost and could be a real headache. An effective cleaning system is critical due to the concern with potential membrane fouling. Membranes are sensitive to hair and would require the installation of very fine screening downstream of the existing screen. To be safer, some designers would also add primary clarification ahead of the membrane. This would result in the production of primary sludge which would have to be handled. Some versions of this treatment process have had very high energy consumption. The actual life of membranes is an unknown variable such that an expensive replacement of membranes may be required sooner than anticipated or budgeted. Membranes would be totally new to the operators and require an extensive training program. It would not be surprising if the operators were very unhappy with a membrane system as they are accustomed to a simple WWTP which is simple to operate. A membrane system would be neither. With the Tennessee River's large flowrate and proximity, there is no need in Scottsboro taking a risk with technology that is expensive, complex, and unknown to them.

There are no viable process alternatives to the simple activated sludge process presently utilized.

During final design, consideration can be given to utilizing diffused aeration in lieu of the mechanical aeration presently utilized. Theoretically, and if properly applied, there could be some energy savings with diffused aeration. However, the diffused aeration system is more complex and involves aeration piping, possibly a blower building (with support systems such as lighting and ventilation, etc.), and diffusers (which need to be replaced periodically and can also collect rags). Air distribution and control must also be addressed.

6. **On-site/Sub-surface Disposal**

The 10 mgd flow contemplated by the increased discharge represents a large flow. This is a very large flowrate for on-site and/or sub-surface disposal. On-site systems are typically much smaller. For example, one state apparently restricts the size of on-site systems in their LOSS program (Large On-site Sewage Systems) to 100,000 gpd. At that size, 100 different systems would be required to treat and handle 10 mgd. This would require a very significant management system. It could be a logistical nightmare. This just is not practical. Furthermore, such systems

are sometimes prohibited from accepting industrial wastewaters. However, the desire to have sufficient capacity to treat a large amount of industrial wastewater is a primary reason for receiving a permit to discharge an additional 10 mgd.

The discharge of nitrates to groundwater is a major concern with these systems. One state restricts the discharge of total nitrogen to 8 mg/l for new discharges from on-site systems. This would be difficult to achieve from a practical standpoint. Nitrification and denitrification – which are not required for the discharge to the Tennessee River – would be necessary and would increase construction and operation costs.

On-site systems are not a viable alternative for handling 10 mgd.

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (ADEM)
NPDES INDIVIDUAL PERMIT APPLICATION
SUPPLEMENTARY INFORMATION FOR PUBLICLY-OWNED TREATMENT WORKS (POTW), OTHER TREATMENT WORKS TREATING DOMESTIC SEWAGE (TWTDS), AND PUBLIC WATER SUPPLY TREATMENT PLANTS

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

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

RECEIVED
AUG 10 2021
MUNICIPAL SECTION

PURPOSE OF THIS APPLICATION

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

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

SECTION A – GENERAL INFORMATION

1. Facility Name: Scottsboro Southside WWTP

   a. Operator Name: Lee Garner

   b. Is the operator identified in A.1.a, the owner of the facility? ☐ Yes ☒ No
   If no, provide name and address of the operator and submit information indicating the operator's scope of responsibility for the facility.
   Lee Garner; 318 Camille Street, Scottsboro, AL 35769; Plant Superintendent

   c. Name of Permittee* if different than Operator: Scottsboro Water, Sewer, and Gas Board
   **Permittee will be responsible for compliance with the conditions of the permit*

2. NPDES Permit Number: AL 0031372 (Not applicable if initial permit application)

3. Facility Physical Location: (**Attach a map with location marked; street, route no. or other specific identifier**)
   Street: 318 Camille Street
   City: Scottsboro County: Jackson State: Alabama Zip: 35769
   Facility Location (Front Gate): Latitude: 34 36 47.50 Longitude: 86 3 16

4. Facility Mailing Address: PO Box 550
   City: Scottsboro County: Jackson State: Alabama Zip: 35768

5. Responsible Official (as described on last page of this application):
   Name and Title: Jimmy Green Jr.
   Address: PO Box 550
   City: Scottsboro State: AL Zip: 35768
   Phone Number: 256-574-1515 Email Address: jimmy@scottsboro.org

6. Designated Facility/DMR Contact:

Name and Title: Bradley Chandler; Assistant Manager

Phone Number: 256-574-1515 Email Address: bradley@scottsboro.org

7. Designated Emergency Contact:

Name and Title: Jimmy Green Jr.

Phone Number: 256-574-1515 Email Address: jimmy@scottsboro.org

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

Name and Title:

Address:

City: State: Zip:

Phone Number: Email Address:

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

Permit Type	Permit Number	Held By
Southside WWTP	AL0031372	Scottsboro WSG
Goosepond WWTP	AL0054461	Scottsboro WSG
North Sauty Creek	ALG640041	Scottsboro WSG
Skinny Jones	ALG640042	Scottsboro WSG

10. Identify all Administrative Complaints, Notices of Violation, Directives, or Administrative Orders, Consent Decrees, or Litigation concerning water pollution or other permit violations, if any against the Applicant within the State of Alabama in the past five years (attach additional sheets if necessary):

Facility Name	Permit Number	Type of Action	Date of Action
Southside WWTP	AL0031372	Administrative Order	May,2019

SECTION B – WASTEWATER DISCHARGE INFORMATION

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

Outfall No.	Highest Flow in Last 12 Months (MGD)	Highest Daily Flow (MGD)	Average Flow (MGD)
001	See attached	See attached	See attached

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

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

For each shared outfall, provide the following:

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

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

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

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

Flow metering is located at the influent headworks of the plant and also at the effluent UV of the plant.

Automatic sampling is located at the influent headworks and the effluent UV of the plant.

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

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

(see attached)

SECTION C – WASTE STORAGE AND DISPOSAL INFORMATION

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

Description of Waste	Description of Storage Location
sludge	covered drying beds

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

Description of Waste	Quantity (lbs/day)	Disposal Method*
Domestic and Industrial Sludge Waste	2711	Scottsboro Landfill

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

SECTION D – INDUSTRIAL INDIRECT DISCHARGE CONTRIBUTORS

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

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?
Maples Industries Plants 1 and 2	Rug Textile Manufacturing	Existing	0.468	■ Yes ☐ No
Lozier Corporation	Manufacturing Wood and Metal Store Fixtures	Existing	0.049	■ Yes ☐ No
Safetweave	Automobile Airbags	Existing	0.166	■ Yes ☐ No
Polyamide	Manufacturing Nylon Yarn for Auto Airbags	Existing	0.053	■ Yes ☐ No

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

SECTION E – COASTAL ZONE INFORMATION

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

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

SECTION F – ANTI-DEGRADATION EVALUATION

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

1. Is this a new or increased discharge that began after April 3, 1991? ☐ Yes ■ No
   If yes, complete F.2 below. If no, go to Section G.

2. Has an Anti-Degradation Analysis been previously conducted and submitted to the Department for the new or increased discharge referenced in F.1? ☐ Yes ☐ No

   If yes, do not complete this section.

   If no and the discharge is to a Tier II waterbody as defined in ADEM Admin. Code r. 335-6-10-.12(4), complete F.2.A – F.2.F below, ADEM Form 311-Alternatives Analysis, and either ADEM Form 312 or ADEM Form 313- Calculation of Total Annualized Project Costs (Public-Sector or Private-Sector Projects, whichever is applicable). ADEM Form 312 or ADEM Form 313, whichever is applicable, must be provided for **each** treatment discharge alternative considered technically viable. ADEM forms can be found on the Department's website at http://adem.alabama.gov/DeptForms/.

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

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

   _____

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

   _____

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

   _____

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

   _____

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

   _____

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

   _____

SECTION G – EPA Application Forms

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

1. All applicants must submit Form 1.
2. Applicants for new or existing discharges of sanitary wastewater from Publicly-Owned Treatment Works (POTW) and Other Treatment Works Treating Domestic Sewage (TWTDS) must submit Form 2A.
3. Applicants for new or existing land application of sanitary wastewater must submit Form 2A and, if the land application site is not completely bermed to prevent runoff, applicants must also submit Form 2F.
4. Applicants for new and existing discharges of process wastewater from water treatment facilities (i.e. public water supply treatment plants) must submit Form 2C.
5. Applicants that generate sewage sludge, derive a material from sewage sludge, or dispose of sewage sludge must submit Part 2 of Form 2S.

SECTION H– ENGINEERING REPORT/BMP PLAN REQUIREMENTS

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

SECTION I– RECEIVING WATERS

Outfall No.	Receiving Water(s)	303(d) Segment?	Included in TMDL?*
001	Tennessee River	☐ Yes ■ No	☐ Yes ■ No
		☐ Yes ■ No	☐ Yes ■ No
		☐ Yes ☐ No	☐ Yes ☐ No

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

(1) Justification for the requested Compliance Schedule (e.g. time for design and installation of control equipment, etc.);

(2) Monitoring results for the pollutant(s) of concern which have not previously been submitted to the Department (sample collection dates, analytical results (mass and concentration), methods utilized, MDL/ML, etc. should be submitted as available);

(3) Requested interim limitations, if applicable;

(4) Date of final compliance with the TMDL limitations; and,

(5) Any other additional information available to support requested compliance schedule.

SECTION J – APPLICATION CERTIFICATION

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

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

Signature of Responsible Official: _____ Date Signed: 1/28/20

Name and Title: Jimmy Green; General Manager

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

Mailing Address: PO Box 550

City: Scottsboro State: Alabama Zip: 35768

Phone Number: 256-574-1515 Email Address: jimmy@scottsboro.org

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

(1) The application for an NPDES permit shall be signed by a responsible official, as indicated below:

(a) In the case of a corporation, by a principal executive officer of at least the level of vice president, or a manager assigned or delegated in accordance with corporate procedures, with such delegation submitted in writing if required by the Department, who is responsible for manufacturing, production, or operating facilities and is authorized to make management decisions which govern the operation of the regulated facility;

(b) In the case of a partnership, by a general partner;

(c) In the case of a sole proprietorship, by the proprietor; or

(d) In the case of a municipal, state, federal, or other public entity, by either a principal executive officer, or ranking elected official.

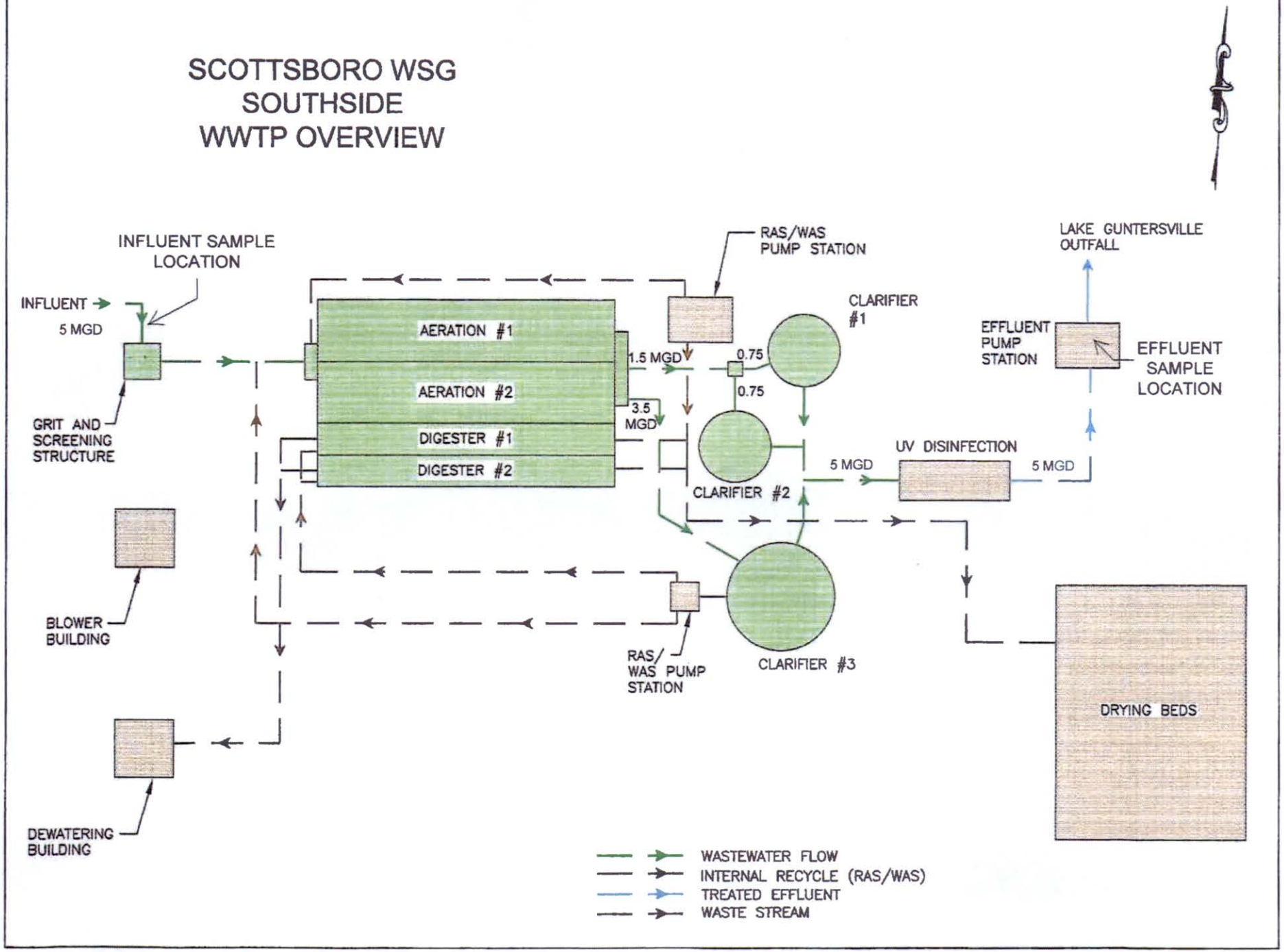
Scottsboro Southside WWTP Flow Data

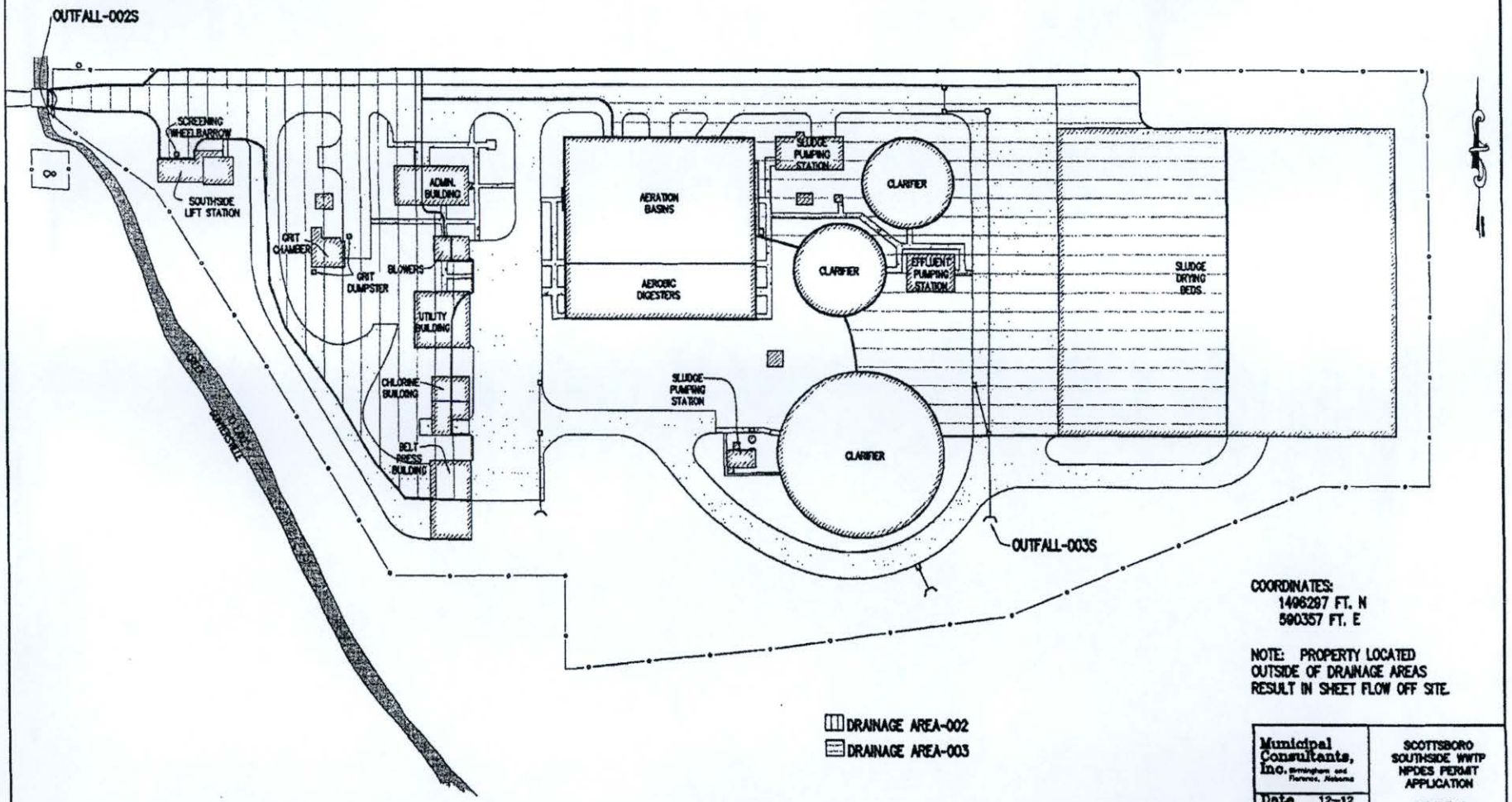
Month	2014 Average	2014 Daily Max	2015 Average	2015 Daily Max	2016 Average	2016 Daily Max	2017 Average	2017 Daily Max	2018 Average	2018 Daily Max	2019 Average	2019 Daily Max
Jan	5.845	9.063	6.383	13.164	6.415	11.924	6.479	13.438	4.455	6.302	8.578	15.111
Feb	7.637	11.407	5.815	10.512	8.025	13.165	5.079	6.907	8.181	13.566	8.999	14.103
Mar	5.286	7.825	7.495	11.616	5.407	6.966	7.478	12.790	6.880	14.461	7.665	12.490
Apr	5.711	11.780	6.556	12.142	4.913	10.307	5.480	10.833	7.125	13.470	5.911	10.821
May	3.846	4.864	4.208	6.861	3.247	6.141	4.966	8.564	4.190	6.822	4.875	8.326
Jun	4.577	8.811	4.139	8.756	2.848	3.087	5.477	11.531	4.208	7.150	3.812	4.858
Jul	4.168	7.852	3.957	7.069	2.951	3.809	5.781	13.256	4.023	5.459	3.227	3.970
Aug	3.858	6.599	4.158	6.746	3.065	3.648	3.259	3.985	3.555	4.698	3.191	4.577
Sep	3.657	5.271	3.193	3.714	2.752	3.305	4.053	10.472	3.916	10.161	2.924	3.472
Oct	4.383	11.171	3.142	4.136	2.658	3.072	4.120	6.877	4.035	6.237	3.906	13.918
Nov	3.974	7.936	4.088	7.783	2.922	8.100	3.951	5.395	6.559	11.827	5.073	9.184
Dec	5.556	11.902	7.481	13.866	4.380	8.092	4.760	10.071	7.930	13.675	8.143	14.245
Total	58.498	104.481	60.615	106.365	49.583	81.616	60.883	114.119	65.057	113.828	66.304	115.075
Yearly Avg.	4.875	8.707	5.051	8.864	4.132	6.801	5.074	9.510	5.421	9.486	5.525	9.590
Yearly Max.	7.637	11.902	7.495	13.866	8.025	13.165	7.478	13.438	8.181	14.461	8.999	15.111
Yearly Min.	3.657	4.864	3.142	3.714	2.658	3.072	3.259	3.985	3.555	4.698	2.924	3.472

Section B – 5

Collection system modifications will include pumping station improvements (Bob Jones Pumping Station) with increased pumping capacity and a new parallel forcemain. Modifications at the WWTP will include necessary facilities for handling and treating the increased flows resulting from the collection system modifications. Raw wastewater quality is not anticipated to change; however, flowrates will increase due to the collection system improvements.

SCOTTSBORO WSG
SOUTHSIDE
WWTP OVERVIEW

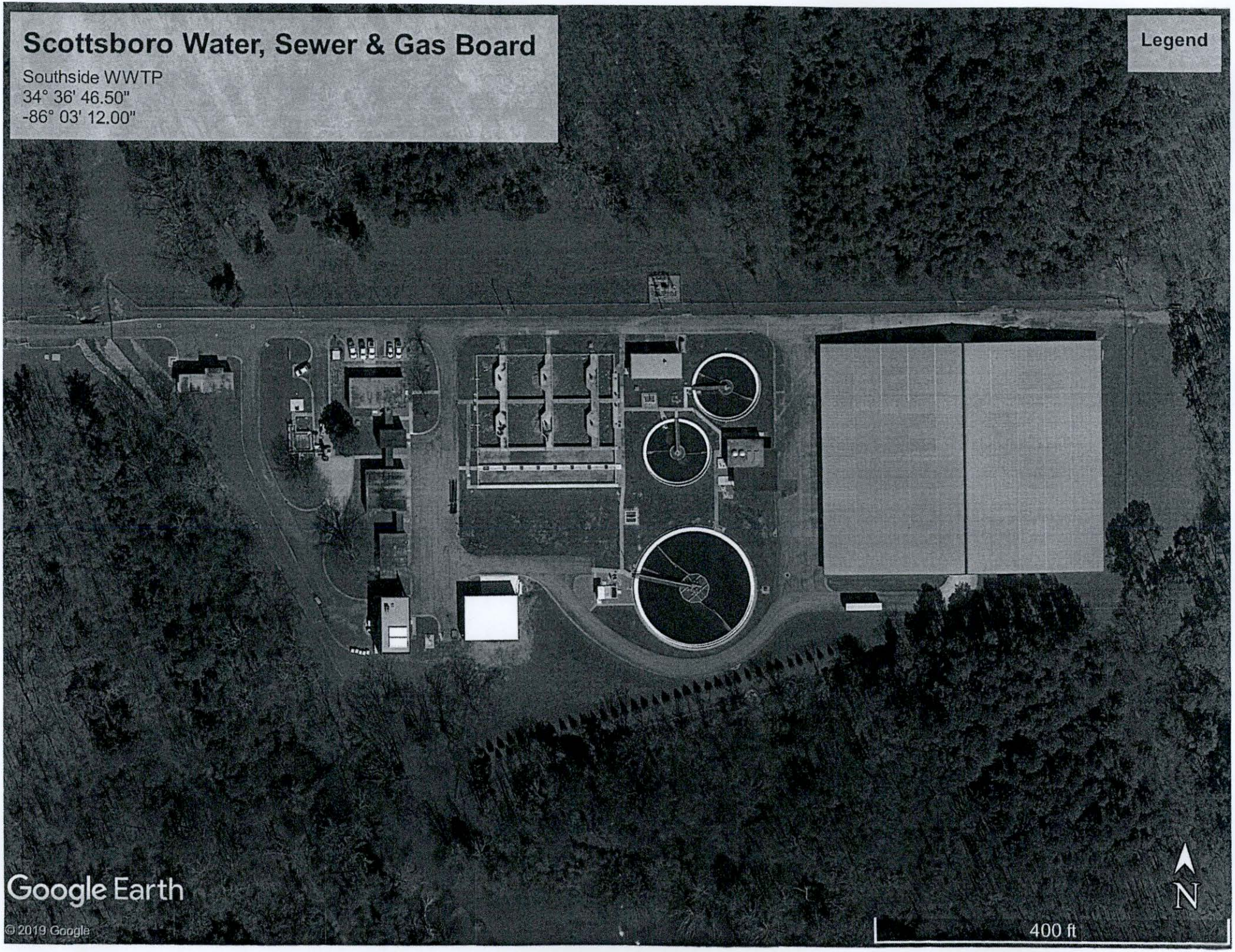




COORDINATES:
1496297 FT. N
590357 FT. E

NOTE: PROPERTY LOCATED OUTSIDE OF DRAINAGE AREAS RESULT IN SHEET FLOW OFF SITE.

Municipal Consultants, Inc. Birmingham and Florence, Alabama	SCOTTSBORO SOUTHSIDE WWTP NPDES PERMIT APPLICATION
Date 12-12	FIGURE 3 SITE DRAINAGE MAP
Sheet 1	
Scale NO SCALE	


Scottsboro Water, Sewer & Gas Board
Southside WWTP
34° 36' 46.50"
-86° 03' 12.00"
Legend
Google Earth
© 2019 Google
N
400 ft


Southside WWTP
Legend
Outfall
279
Outfall
34.603610° N
-86.017220° W
N
Bluff
1 mi
Google Earth
© 2019 Google


Southside WWTP
Legend
Outfall
Scottsboro Municipal Park
Southside WWTP
34.613111° N
-86.053523° W
Outfall
34.603610° N
-86.017220° W
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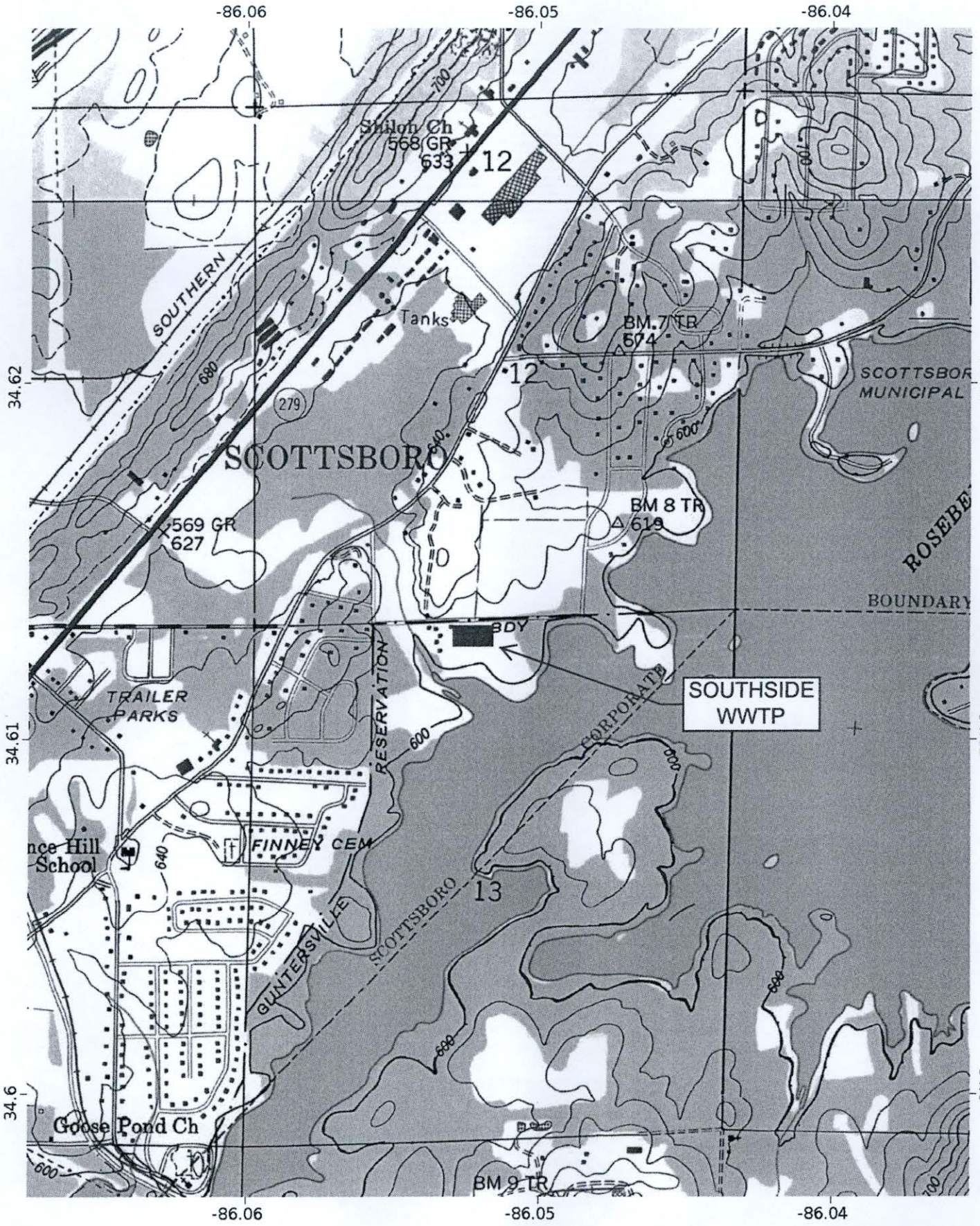
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-86.04
34.62
34.61
34.6
SOUTHSIDE WWTP
SCOTTSBORO
Shiloh Ch
568 GR
633
12
SOUTHERN
Tanks
BM 7 TR
574
SCOTTSBOR
MUNICIPAL
279
680
640
600
569 GR
627
BM 8 TR
619
ROSEBE
BOUNDARY
BDY
TRAILER
PARKS
RESERVATION
CORPORATE
FINNEY CEM
nce Hill
School
640
13
SCOTTSBORO
GUNTERSVILLE
660
Goose Pond Ch
BM 9 TR
Southside WWTP
WGS84
USNG Zone 16SED
CalTopo
0.5
1.0
1.5 km
0.1
0.2
0.3
0.4
0.5
0.6
0.7
0.8
0.9 mi
Scale 1:16000
1 inch = 1333 feet
MN
-4°
N

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Southside WWTP	RECEIVED

Form 2A NPDES

EPA

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

AUG 10 2021

MUNICIPAL SECTION

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

Facility Information

1.1 Facility name
Scottsboro Southside WWTP

Mailing address (street or P.O. box)
PO Box 550

City or town	State	ZIP code
Scottsboro	AL	35768

Contact name (first and last)	Title	Phone number	Email address
Jimmy Green Jr.	General Manager	(256) 574-1515	jimmy@scottsboro.org

Location address (street, route number, or other specific identifier) ☐ Same as mailing address
318 Camille Street

City or town	State	ZIP code
Scottsboro	Alabama	35769

1.2 Is this application for a facility that has yet to commence discharge?
☐ Yes → See instructions on data submission requirements for new dischargers. ☑ No

Applicant Information

1.3 Is applicant different from entity listed under Item 1.1 above?
☐ Yes ☑ No → SKIP to Item 1.4.

Applicant name

Applicant address (street or P.O. box)

City or town	State	ZIP code

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

1.4 Is the applicant the facility's owner, operator, or both? (Check only one response.)
☐ Owner ☐ Operator ☑ Both

1.5 To which entity should the NPDES permitting authority send correspondence? (Check only one response.)
☐ Facility ☐ Applicant ☑ 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

☑ NPDES (discharges to surface water) AL0054461;ALG640041;ALG64	☐ RCRA (hazardous waste)	☐ UIC (underground injection control)
☐ PSD (air emissions)	☐ Nonattainment program (CAA)	☐ NESHAPs (CAA)
☐ Ocean dumping (MPRSA)	☐ Dredge or fill (CWA Section 404)	☐ Other (specify)

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Southside WWTP	

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
Scottsboro, Alabama	15,000	100 % separate sanitary sewer 0 % combined storm and sanitary sewer ☐ Unknown	☑ Own ☑ Maintain ☐ Own ☐ Maintain ☐ Own ☐ Maintain
		____ % separate sanitary sewer ____ % combined storm and sanitary sewer ☐ Unknown	☐ Own ☐ Maintain ☐ Own ☐ Maintain ☐ Own ☐ Maintain
		____ % separate sanitary sewer ____ % combined storm and sanitary sewer ☐ Unknown	☐ Own ☐ Maintain ☐ Own ☐ Maintain ☐ Own ☐ Maintain
		____ % separate sanitary sewer ____ % combined storm and sanitary sewer ☐ Unknown	☐ Own ☐ Maintain ☐ Own ☐ Maintain ☐ Own ☐ Maintain
Total Population Served	15,000		

Total percentage of each type of sewer line (in miles)	Separate Sanitary Sewer System	Combined Storm and Sanitary Sewer
	100 %	0 %

Indian Country

1.8 Is the treatment works located in Indian Country?

☐ Yes ☑ No

1.9 Does the facility discharge to a receiving water that flows through Indian Country?

☐ Yes ☑ No

Design and Actual Flow Rates

1.10 Provide design *and* actual flow rates in the designated spaces.

Design Flow Rate
5.0 mgd

Annual Average Flow Rates (Actual)		
Two Years Ago	**Last Year**	**This Year**
5.074 mgd	5.421 mgd	5.525 mgd

Maximum Daily Flow Rates (Actual)		
Two Years Ago	**Last Year**	**This Year**
13.438 mgd	14.461 mgd	15.111 mgd

Discharge Points by Type

1.11 Provide the total number of effluent discharge points to waters of the United States by type.

Total Number of Effluent Discharge Points by Type				
Treated Effluent	**Untreated Effluent**	**Combined Sewer Overflows**	**Bypasses**	**Constructed Emergency Overflows**
1	0	0	0	0

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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
	15,000	100 % separate sanitary sewer	☑ Own ☐ Maintain
		0 % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
Total Population Served	15,000		

	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?

☐ Yes ☑ No

1.9 Does the facility discharge to a receiving water that flows through Indian Country?

☐ Yes ☑ No

Design and Actual Flow Rates

1.10 Provide design *and* actual flow rates in the designated spaces.

Design Flow Rate
15.0 mgd

Annual Average Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
5.074 mgd	5.421 mgd	5.525 mgd

Maximum Daily Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
13.438 mgd	14.461 mgd	15.111 mgd

Discharge Points by Type

1.11 Provide the total number of effluent discharge points to waters of the United States by type.

Total Number of Effluent Discharge Points by Type				
Treated Effluent	Untreated Effluent	Combined Sewer Overflows	Bypasses	Constructed Emergency Overflows
1	0	0	0	0

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Outfalls and Other Discharge or Disposal Methods

Outfalls Other Than to Waters of the United States

1.12 Does the POTW discharge wastewater to basins, ponds, or other surface impoundments that do not have outlets for discharge to waters of the United States?

☐ Yes ☑ No ➔ SKIP to Item 1.14.

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

Surface Impoundment Location and Discharge Data

Location	Average Daily Volume Discharged to Surface Impoundment	Continuous or Intermittent (check one)
	gpd	☐ Continuous ☐ Intermittent
	gpd	☐ Continuous ☐ Intermittent
	gpd	☐ Continuous ☐ 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	☐ Continuous ☐ Intermittent
	acres	gpd	☐ Continuous ☐ Intermittent
	acres	gpd	☐ Continuous ☐ 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) ☐ None	Average daily flow rate	mgd

1.21 Is the wastewater disposed of in a manner other than those already mentioned in Items 1.14 through 1.21 that do not have outlets to waters of the United States (e.g., underground percolation, underground injection)?

☐ Yes ☑ No ➔ SKIP to Item 1.23.

1.22 Provide information in the table below on these other disposal methods.

Information on Other Disposal Methods				
Disposal Method Description	**Location of Disposal Site**	**Size of Disposal Site**	**Annual Average Daily Discharge Volume**	**Continuous or Intermittent** (check one)
		acres	gpd	☐ Continuous ☐ Intermittent
		acres	gpd	☐ Continuous ☐ Intermittent
		acres	gpd	☐ Continuous ☐ Intermittent

Variance Requests

1.23 Do you intend to request or renew one or more of the variances authorized at 40 CFR 122.21(n)? (Check all that apply. Consult with your NPDES permitting authority to determine what information needs to be submitted and when.)

☐ Discharges into marine waters (CWA Section 301(h))

☐ Water quality related effluent limitation (CWA Section 302(b)(2))

☑ Not applicable

Contractor Information

1.24 Are any operational or maintenance aspects (related to wastewater treatment and effluent quality) of the treatment works the responsibility of a contractor?

☐ Yes ☑ No ➔ SKIP to Section 2.

1.25 Provide location and contact information for each contractor in addition to a description of the contractor's operational and maintenance responsibilities.

Contractor Information			
	Contractor 1	**Contractor 2**	**Contractor 3**
Contractor name (company name)			
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			

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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?

☑ Yes ☐ 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
200,000 gpd

Indicate the steps the facility is taking to minimize inflow and infiltration.

Aggressive sewer rehab work in collection system, in which includes sewer pipe, manhole, sewer services, point repairs Ect.

Topographic Map

2.3 Have you attached a topographic map to this application that contains all the required information? (See instructions for specific requirements.)

☑ Yes ☐ 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.)

☑ Yes ☐ No

Scheduled Improvements and Schedules of Implementation

2.5 Are improvements to the facility scheduled?

☑ Yes ☐ No ➔ SKIP to Section 3.

Briefly list and describe the scheduled improvements.

1. Plant Upgrades, New Headworks, Barscreen, additional disinfection, and Additional Treatment Processes

2. Plant piping improvements

3.

4.

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.	001-1	03/31/2021	11/30/2022	11/30/2022	11/30/2022
2.	001-1	03/31/2021	11/30/2022	11/30/2022	11/30/2022
3.					
4.					

2.7 Have appropriate permits/clearances concerning other federal/state requirements been obtained? Briefly explain your response.

☐ Yes ☐ No ☑ 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 001-1, 001-2	Outfall Number _____	Outfall Number _____
State	Alabama		
County	Jackson		
City or town	Scottsboro		
Distance from shore	10,830 ft.	ft.	ft.
Depth below surface	36.0 ft.	ft.	ft.
Average daily flow rate	5.421 mgd	mgd	mgd
Latitude	34° 36′ 13″ N	° ′ ″	° ′ ″
Longitude	-86° 01′ 02″ W	° ′ ″	° ′ ″

Seasonal or Periodic Discharge Data

3.2 Do any of the outfalls described under Item 3.1 have seasonal or periodic discharges?

☐ Yes ☑ 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?

☑ Yes ☐ No ➔ SKIP to Item 3.6.

3.5 Briefly describe the diffuser type at each applicable outfall.

	Outfall Number 001-1, 001-2	Outfall Number _____	Outfall Number _____
	Five vertical riser tubes (16-inch diameter) with diffuser heads		

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?

☑ Yes ☐ 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 001-1, 001-2	Outfall Number ____	Outfall Number ____
Receiving water name	Tennessee River		
Name of watershed, river, or stream system	Guntersville/Sequatchie		
U.S. Soil Conservation Service 14-digit watershed code			
Name of state management/river basin			
U.S. Geological Survey 8-digit hydrologic cataloging unit code			
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 001-1, 001-2	Outfall Number ____	Outfall Number ____
Highest Level of Treatment (check all that apply per outfall)	☐ Primary ☐ Equivalent to secondary ☑ Secondary ☐ Advanced ☐ Other (specify) _____	☐ Primary ☐ Equivalent to secondary ☐ Secondary ☐ Advanced ☐ Other (specify) _____	☐ Primary ☐ Equivalent to secondary ☐ Secondary ☐ Advanced ☐ Other (specify) _____
Design Removal Rates by Outfall			
BOD_5 or $CBOD_5$	85 %	%	%
TSS	85 %	%	%
Phosphorus	☑ Not applicable %	☐ Not applicable %	☐ Not applicable %
Nitrogen	☑ Not applicable %	☐ Not applicable %	☐ Not applicable %
Other (specify) _____	☐ Not applicable %	☐ Not applicable %	☐ 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 Disinfection
Chlorine

	Outfall Number 001-1,001-2	Outfall Number _____	Outfall Number _____
Disinfection type	UV and Chlorine		
Seasons used	ALL		
Dechlorination used?	☐ Not applicable ☐ Yes ☑ No	☐ Not applicable ☐ Yes ☐ No	☐ Not applicable ☐ Yes ☐ 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 001-1,001-2		Outfall Number _____		Outfall Number _____	
	Acute	Chronic	Acute	Chronic	Acute	Chronic
Number of tests of discharge water	6					
Number of tests of receiving water	0					

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 additional sampling required by NPDES permitting authority.

Effluent Testing Data Continued

3.19 Has the POTW conducted either (1) minimum of four quarterly WET tests for one year preceding this permit application or (2) at least four annual WET tests in the past 4.5 years?

☑ Yes ☐ 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?

☑ Yes ☐ No ➔ Provide results in Table E and SKIP to Item 3.26.

3.21 Indicate the dates the data were submitted to your NPDES permitting authority and provide a summary of the results.

Date(s) Submitted (MM/DD/YYYY)	Summary of Results
11/23/16	PASS
11/28/17	PASS
11/27/18	PASS
11/26/19	PASS

3.22 Regardless of how you provided your WET testing data to the NPDES permitting authority, did any of the tests result in toxicity?

☐ Yes ☑ 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?

☐ Yes ☑ 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?

☑ Yes ☐ 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?

☑ Yes ☐ No ➔ SKIP to Item 4.7.

4.2 Indicate the number of SIUs and NSCIUs that discharge to the POTW.

Number of SIUs	Number of NSCIUs
5	

4.3 Does the POTW have an approved pretreatment program?

☑ Yes ☐ 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?

☑ Yes ☐ 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.

Scottsboro Pretreatment Program 06/01/1984

4.6 Have you completed and attached Table F to this application package?

☑ Yes ☐ No

Industrial Discharges and Hazardous Wastes Continued

4.7 Does the POTW receive, or has it been notified that it will receive, by truck, rail, or dedicated pipe, any wastes that are regulated as RCRA hazardous wastes pursuant to 40 CFR 261?

☐ Yes ☑ No ➔ SKIP to Item 4.9.

4.8 If yes, provide the following information:

Hazardous Waste Number	Waste Transport Method (check all that apply)	Annual Amount of Waste Received	Units
	☐ Truck ☐ Rail ☐ Dedicated pipe ☐ Other (specify) _____		
	☐ Truck ☐ Rail ☐ Dedicated pipe ☐ Other (specify) _____		
	☐ Truck ☐ Rail ☐ Dedicated pipe ☐ Other (specify) _____		

4.9 Does the POTW receive, or has it been notified that it will receive, wastewaters that originate from remedial activities, including those undertaken pursuant to CERCLA and Sections 3004(7) or 3008(h) of RCRA?

☐ Yes ☑ No ➔ SKIP to Section 5.

4.10 Does the POTW receive (or expect to receive) less than 15 kilograms per month of non-acute hazardous wastes as specified in 40 CFR 261.30(d) and 261.33(e)?

☐ Yes ➔ SKIP to Section 5. ☑ No

4.11 Have you reported the following information in an attachment to this application: identification and description of the site(s) or facility(ies) at which the wastewater originates; the identities of the wastewater's hazardous constituents; and the extent of treatment, if any, the wastewater receives or will receive before entering the POTW?

☐ Yes ☑ No

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

CSO Map and Diagram

5.1 Does the treatment works have a combined sewer system?

☐ Yes ☑ No ➔SKIP to Section 6.

5.2 Have you attached a CSO system map to this application? (See instructions for map requirements.)

☐ Yes ☐ No

5.3 Have you attached a CSO system diagram to this application? (See instructions for diagram requirements.)

☐ Yes ☐ No

CSO Outfall Description

5.4 For each CSO outfall, provide the following information. (Attach additional sheets as necessary.)

	CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
City or town			
State and ZIP code			
County			
Latitude	° ' "	° ' "	° ' "
Longitude	° ' "	° ' "	° ' "
Distance from shore	ft.	ft.	ft.
Depth below surface	ft.	ft.	ft.

CSO Monitoring

5.5 Did the POTW monitor any of the following items in the past year for its CSO outfalls?

	CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
Rainfall	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
CSO flow volume	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
CSO pollutant concentrations	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Receiving water quality	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
CSO frequency	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Number of storm events	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ 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 ☐ Actual or ☐ Estimated	hours ☐ Actual or ☐ Estimated	hours ☐ Actual or ☐ Estimated
Average volume per event	million gallons ☐ Actual or ☐ Estimated	million gallons ☐ Actual or ☐ Estimated	million gallons ☐ Actual or ☐ Estimated
Minimum rainfall causing a CSO event in last year	inches of rainfall ☐ Actual or ☐ Estimated	inches of rainfall ☐ Actual or ☐ Estimated	inches of rainfall ☐ Actual or ☐ Estimated

CSO Receiving Waters

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

	CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
Receiving water name			
Name of watershed/ stream system			
U.S. Soil Conservation Service 14-digit watershed code (if known)	☐ Unknown	☐ Unknown	☐ Unknown
Name of state management/river basin			
U.S. Geological Survey 8-Digit Hydrologic Unit Code (if known)	☐ Unknown	☐ Unknown	☐ Unknown
Description of known water quality impacts on receiving stream by CSO (see instructions for examples)			

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

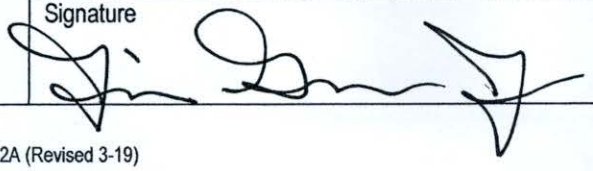
Checklist and Certification Statement

6.1 In Column 1 below, mark the sections of Form 2A that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.

Column 1	Column 2	
☑ Section 1: Basic Application Information for All Applicants	☐ w/ variance request(s)	☑ w/ additional attachments
☑ Section 2: Additional Information	☑ w/ topographic map ☑ w/ additional attachments	☑ w/ process flow diagram
☑ Section 3: Information on Effluent Discharges	☑ w/ Table A ☑ w/ Table B ☑ w/ Table C	☑ w/ Table D ☑ w/ Table E ☐ w/ additional attachments
☑ Section 4: Industrial Discharges and Hazardous Wastes	☑ w/ SIU and NSCIU attachments ☑ w/ additional attachments	☑ w/ Table F
☐ Section 5: Combined Sewer Overflows	☐ w/ CSO map ☐ w/ CSO system diagram	☐ w/ additional attachments
☑ Section 6: Checklist and Certification Statement	☐ w/ attachments	

6.2 **Certification Statement**

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

Name (print or type first and last name)	Official title
Jim Green Jr	General Manager
Signature	Date signed
	1/28/20

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL0031372	Southside WWTP	001-1 & 001-2

Form Approved 03/05/19
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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 ☐ BOD_5 or ☑ $CBOD_5$ (report one)	8.2	mg/L	3.3	mg/L	259	SM5210B	☐ ML ☐ MDL
Fecal coliform	>2419	col/100mL	16	col/100mL	104	SM9223B	☐ ML ☐ MDL
Design flow rate	15.111	MGD	5.525	MDG	365		
pH (minimum)	6.8	S.U.					
pH (maximum)	7.5	S.U.					
Temperature (winter)	13.5	C	16.8	C	365		
Temperature (summer)	26.6	C	23.8	C	365		
Total suspended solids (TSS)	10.3	mg/L	2.2	mg/L	365	SM2540D	☐ ML ☐ 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	Facility Name	Outfall Number
	AL0031372	Southside WWTP	001-1-& 001-2

Form Approved 03/05/19
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TABLE B. EFFLUENT PARAMETERS FOR ALL POTWS WITH A FLOW EQUAL TO OR GREATER THAN 0.1 MGD

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Ammonia (as N)	8.70	mg/L	1.12	mg/L	104	M4500-NH3 BG 1997	☐ ML ☐ MDL
Chlorine (total residual, TRC)[2]	0.97	mg/L	.059	mg/L	365	M4500-CL G	☐ ML ☐ MDL
Dissolved oxygen	7.2	mg/L	2.9	mg/L	104	M4500-O G	☐ ML ☐ MDL
Nitrate/nitrite	7.09	mg/L	4.29	mg/L	12	M4500-NO2 B	☐ ML ☐ MDL
Kjeldahl nitrogen	5.60	mg/L	1.76	mg/L	12	M4500-Norg BG	☐ ML ☐ MDL
Oil and grease	1.7	mg/L	1.1	mg/L	3	E1664A	☐ ML ☐ MDL
Phosphorus	3.20	mg/L	1.29	mg/L	12	M4500-P B5H	☐ ML ☐ MDL
Total dissolved solids	272	mg/L	183.66	mg/L	3	M2540 C	☐ ML ☐ 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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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
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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 $CaCO_3$)	118	mg/L	104.9	mg/L	3	E200.7	☐ ML ☐ MDL
Antimony, total recoverable	0.0006	mg/L	0.0002	mg/L	3	E200.8	☐ ML ☐ MDL
Arsenic, total recoverable	ND	mg/L	ND	mg/L	3	E200.8	☐ ML ☐ MDL
Beryllium, total recoverable	ND	mg/L	ND	mg/L	3	E200.8	☐ ML ☐ MDL
Cadmium, total recoverable	ND	mg/L	ND	mg/L	3	E200.8	☐ ML ☐ MDL
Chromium, total recoverable	0.0011	mg/L	0.0009	mg/L	3	E200.8	☐ ML ☐ MDL
Copper, total recoverable	0.0075	mg/L	0.0031	mg/L	3	E200.8	☐ ML ☐ MDL
Lead, total recoverable	0.0010	mg/L	0.0003	mg/L	3	E200.8	☐ ML ☐ MDL
Mercury, total recoverable	0.90	ng/L	0.74	ng/L	3	E1631	☐ ML ☐ MDL
Nickel, total recoverable	0.0049	mg/L	0.0024	mg/L	3	E200.8	☐ ML ☐ MDL
Selenium, total recoverable	ND	mg/L	ND	mg/L	3	E200.8	☐ ML ☐ MDL
Silver, total recoverable	ND	mg/L	ND	mg/L	3	E200.8	☐ ML ☐ MDL
Thallium, total recoverable	ND	mg/L	ND	mg/L	3	E200.8	☐ ML ☐ MDL
Zinc, total recoverable	0.0706	mg/L	0.0639	mg/L	3	E200.8	☐ ML ☐ MDL
Cyanide	ND	mg/L	ND	mg/L	3	M4500-CN CE	☐ ML ☐ MDL
Total phenolic compounds	ND	mg/L	ND	mg/L	3	M5330 BD 2005	☐ ML ☐ MDL
Volatile Organic Compounds							
Acrolein	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Acrylonitrile	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Benzene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Bromoform	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ 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	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Chlorobenzene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Chlorodibromomethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Chloroethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
2-chloroethylvinyl ether	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Chloroform	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Dichlorobromomethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,1-dichloroethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,2-dichloroethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
trans-1,2-dichloroethylene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,1-dichloroethylene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,2-dichloropropane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,3-dichloropropylene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Ethylbenzene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Methyl bromide	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Methyl chloride	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Methylene chloride	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,1,2,2-tetrachloroethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Tetrachloroethylene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Toluene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,1,1-trichloroethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,1,2-trichloroethane	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ 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	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Vinyl chloride	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
Acid-Extractable Compounds							
p-chloro-m-cresol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2-chlorophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2,4-dichlorophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2,4-dimethylphenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
4,6-dinitro-o-cresol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2,4-dinitrophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2-nitrophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
4-nitrophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Pentachlorophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Phenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2,4,6-trichlorophenol	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Base-Neutral Compounds							
Acenaphthene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Acenaphthylene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Anthracene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Benzidine	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Benzo(a)anthracene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Benzo(a)pyrene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
3,4-benzofluoranthene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Benzo(k)fluoranthene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Bis (2-chloroethoxy) methane	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Bis (2-chloroethyl) ether	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Bis (2-chloroisopropyl) ether	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Bis (2-ethylhexyl) phthalate	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
4-bromophenyl phenyl ether	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Butyl benzyl phthalate	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2-chloronaphthalene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
4-chlorophenyl phenyl ether	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Chrysene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
di-n-butyl phthalate	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
di-n-octyl phthalate	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Dibenzo(a,h)anthracene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
1,2-dichlorobenzene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,3-dichlorobenzene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
1,4-dichlorobenzene	ND	mg/L	ND	mg/L	3	E624	☐ ML ☐ MDL
3,3-dichlorobenzidine	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Diethyl phthalate	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Dimethyl phthalate	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2,4-dinitrotoluene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
2,6-dinitrotoluene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Fluoranthene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Fluorene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Hexachlorobenzene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Hexachlorobutadiene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Hexachlorocyclo-pentadiene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Hexachloroethane	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Indeno(1,2,3-cd)pyrene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Isophorone	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Naphthalene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Nitrobenzene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
N-nitrosodi-n-propylamine	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
N-nitrosodimethylamine	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
N-nitrosodiphenylamine	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Phenanthrene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
Pyrene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ MDL
1,2,4-trichlorobenzene	ND	mg/L	ND	mg/L	3	E625	☐ ML ☐ 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 D. ADDITIONAL POLLUTANTS AS REQUIRED BY NPDES PERMITTING AUTHORITY

Pollutant (list)	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
☑ No additional sampling is required by NPDES permitting authority.							
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
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							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ ML ☐ 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	Facility Name	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 1	Test Number 2	Test Number 3
Test Information			
Test species	Pimephales promelas and Ceriodaphnia dubia	Pimephales promelas and Ceriodaphnia dubia	Pimephales promelas and Ceriodaphnia dubia
Age at initiation of test	<72 Hours	<72	<72
Outfall number	001-1 and 001-2	001-1 and 001-2	001-1 and 001-2
Date sample collected	10/08/2014	10/14/2015	10/05/2016
Date test started	10/09/2014	10/15/2015	10/06/2016
Duration	48 Hours	48 Hours	48 Hours
Toxicity Test Methods			
Test method number	EPA-821-R-02-012	EPA-821-R-02-012	EPA-821-R-02-012
Manual title	Measuring the Acute Toxicity of Effluents	Measuring the Acute Toxicity of Effluents	Measuring the Acute Toxicity of Effluents
Edition number and year of publication	Fifth Edition 2002	Fifth Edition 2002	Fifth Edition 2002
Page number(s)	pp. 51-52 pp. 55-56	pp. 51-52 pp. 55-56	pp. 51-52 pp. 55-56
Sample Type			
Check one:	☐ Grab ☑ 24-hour composite	☐ Grab ☑ 24-hour composite	☐ Grab ☑ 24-hour composite
Sample Location			
Check one:	☐ Before Disinfection ☑ After Disinfection ☐ After Dechlorination	☐ Before Disinfection ☑ After Disinfection ☐ After Dechlorination	☐ Before disinfection ☑ After disinfection ☐ After dechlorination
Point in Treatment Process			
Describe the point in the treatment process at which the sample was collected for each test.	Effluent after all treatment processes including disinfection.	Effluent after all treatment processes including disinfection.	Effluent after all treatment processes including disinfection.
Toxicity Type			
Indicate for each test whether the test was performed to asses acute or chronic toxicity, or both. (Check one response.)	☑ Acute ☐ Chronic ☐ Both	☑ Acute ☐ Chronic ☐ Both	☑ Acute ☐ Chronic ☐ Both

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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 1	Test Number 2	Test Number 3
Test Type			
Indicate the type of test performed. (Check one response.)	☑ Static ☐ Static-renewal ☐ Flow-through	☑ Static ☐ Static-renewal ☐ Flow-through	☑ Static ☐ Static-renewal ☐ Flow-through
Source of Dilution Water			
Indicate the source of dilution water. (Check one response.)	☑ Laboratory water ☐ Receiving water	☑ Laboratory water ☐ Receiving water	☑ Laboratory water ☐ Receiving water
If laboratory water, specify type.	20% of Distilled and Mineral Waters	20% of Distilled and Mineral Waters	20% of Distilled and Mineral Waters
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.	☑ Fresh water ☐ Salt water (specify)	☑ Fresh water ☐ Salt water (specify)	☑ Fresh water ☐ Salt water (specify)
Percentage Effluent Used			
Specify the percentage effluent used for all concentrations in the test series.	4%	14%	14%

	Test Number 1		Test Number 2		Test Number 3	
Parameters Tested						
Check the parameters tested.	☑ pH ☐ Salinity ☐ Temperature	☐ Ammonia ☐ Dissolved oxygen	☑ pH ☐ Salinity ☐ Temperature	☐ Ammonia ☐ Dissolved oxygen	☑ pH ☐ Salinity ☐ Temperature	☐ Ammonia ☐ Dissolved oxygen
Acute Test Results						
Percent survival in 100% effluent	100 %		100 %		100 %	
LC_{50}	N/A		N/A		N/A	
95% confidence interval	N/A %		N/A %		N/A %	
Control percent survival	100 %		100 %		100 %	

EPA Identification Number	NPDES Permit Number	Facility Name	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 1		Test Number 2		Test Number 3	
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?	☑ Yes	☐ No	☑ Yes	☐ No	☑ Yes	☐ No
Was reference toxicant test within acceptable bounds?	☑ Yes	☐ No	☑ Yes	☐ No	☑ Yes	☐ No
What date was reference toxicant test run (MM/DD/YYYY)?	09/17/2014		09/30/2015		09/27/2016	
Other (describe)						

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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 4	Test Number 5	Test Number 6
Test Information			
Test species	Pimephales promelas and Ceriodaphnia dubia	Pimephales promelas and Ceriodaphnia dubia	Pimephales promelas and Ceriodaphnia dubia
Age at initiation of test	<72	<72	<72
Outfall number	001-1 and 001-2	001-1 and 001-2	001-1 and 001-2
Date sample collected	10/11/2017	10/03/2018	10/16/2019
Date test started	10/12/2017	10/04/2018	10/17/2019
Duration	48 Hours	48 Hours	48 Hours
Toxicity Test Methods			
Test method number	EPA-821-R-02-012	EPA-821-R-02-012	EPA-821-R-02-012
Manual title	Measuring the Acute Toxicity of Effluents	Measuring the Acute Toxicity of Effluents	Measuring the Acute Toxicity of Effluents
Edition number and year of publication	Fifth Edition 2002	Fifth Edition 2002	Fifth Edition 2002
Page number(s)	pp. 51-52 pp. 55-56	pp. 51-52 pp. 55-56	pp. 51-52 pp. 55-56
Sample Type			
Check one:	☐ Grab ☑ 24-hour composite	☐ Grab ☑ 24-hour composite	☐ Grab ☑ 24-hour composite
Sample Location			
Check one:	☐ Before Disinfection ☑ After Disinfection ☐ After Dechlorination	☐ Before Disinfection ☑ After Disinfection ☐ After Dechlorination	☐ Before disinfection ☑ After disinfection ☐ After dechlorination
Point in Treatment Process			
Describe the point in the treatment process at which the sample was collected for each test.	Effluent after all treatment processes including disinfection.	Effluent after all treatment processes including disinfection.	Effluent after all treatment processes including disinfection.
Toxicity Type			
Indicate for each test whether the test was performed to asses acute or chronic toxicity, or both. (Check one response.)	☑ Acute ☐ Chronic ☐ Both	☑ Acute ☐ Chronic ☐ Both	☑ Acute ☐ Chronic ☐ Both

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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 4	Test Number 5	Test Number 6
Test Type			
Indicate the type of test performed. (Check one response.)	☑ Static ☐ Static-renewal ☐ Flow-through	☑ Static ☐ Static-renewal ☐ Flow-through	☑ Static ☐ Static-renewal ☐ Flow-through
Source of Dilution Water			
Indicate the source of dilution water. (Check one response.)	☑ Laboratory water ☐ Receiving water	☑ Laboratory water ☐ Receiving water	☑ Laboratory water ☐ Receiving water
If laboratory water, specify type.	20% of Distilled and Mineral Waters	20% of Distilled and Mineral Waters	20% of Distilled and Mineral Waters
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.	☑ Fresh water ☐ Salt water (specify)	☑ Fresh water ☐ Salt water (specify)	☑ Fresh water ☐ Salt water (specify)
Percentage Effluent Used			
Specify the percentage effluent used for all concentrations in the test series.	14%	14%	14%

	Test Number 4		Test Number 5		Test Number 6	
Parameters Tested						
Check the parameters tested.	☑ pH ☐ Salinity ☐ Temperature	☐ Ammonia ☐ Dissolved oxygen	☑ pH ☐ Salinity ☐ Temperature	☐ Ammonia ☐ Dissolved oxygen	☑ pH ☐ Salinity ☐ Temperature	☐ Ammonia ☐ Dissolved oxygen
Acute Test Results						
Percent survival in 100% effluent	95 %		100 %		100 %	
LC_{50}	N/A		N/A		N/A	
95% confidence interval	N/A %		N/A %		N/A %	
Control percent survival	100 %		100 %		100 %	

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 4		Test Number 5		Test Number 6	
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?	☑ Yes	☐ No	☑ Yes	☐ No	☐ Yes	☐ No
Was reference toxicant test within acceptable bounds?	☑ Yes	☐ No	☑ Yes	☐ No	☐ Yes	☐ No
What date was reference toxicant test run (MM/DD/YYYY)?	09/28/2017		09/12/2018			
Other (describe)						

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EPA Identification Number	NPDES Permit Number	Facility Name
	AL0031372	Southside WWTP

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

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU 1	SIU 2	SIU 3
Name of SIU	Lozier Corporation	Polymide	SafeTweave
Mailing address (street or P.O. box)	401 Taylor Street	300 Serano Way	302 Serano Way
City, state, and ZIP code	Scottsboro, AL 35768	Scottsboro, AL 35769	Scottsboro, AL 35769
Description of all industrial processes that affect or contribute to the discharge.	Wood and Metal Store Fixtures and Painting	Manufacture a woven fabric from industrial nylon yarn for use in the manufacture of automotive airbags	Manufacture a woven fabric from industrial nylon yarn for use in the manufacture of automotive airbags
List the principal products and raw materials that affect or contribute to the SIU's discharge.	Wood and Metal Store Fixtures Plywood, Particle Board, Sheet Steel and Coil Steel.	Industrial Nylon Yarn Nylon 66 Chips	Woven Fabric From Industrial Nylon Yarn Nylon 66 Yarn
Indicate the average daily volume of wastewater discharged by the SIU.	57,006 gpd	93,000 gpd	169,800 gpd
How much of the average daily volume is attributable to process flow?	49,000 gpd	53,000 gpd	166,000 gpd
How much of the average daily volume is attributable to non-process flow?	8006 gpd	40,000 gpd	3,800 gpd
Is the SIU subject to local limits?	☑ Yes ☐ No	☑ Yes ☐ No	☑ Yes ☐ No
Is the SIU subject to categorical standards?	☐ Yes ☑ No	☐ Yes ☑ No	☐ Yes ☑ No

EPA Identification Number	NPDES Permit Number	Facility Name
	AL0031372	Southside WWTP

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

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

	SIU 1	SIU 2	SIU 3
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?	☐ Yes ☑ No	☐ Yes ☑ No	☐ Yes ☑ No
If yes, describe.			

EPA Identification Number	NPDES Permit Number	Facility Name
	AL0031372	Southside WWTP

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

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

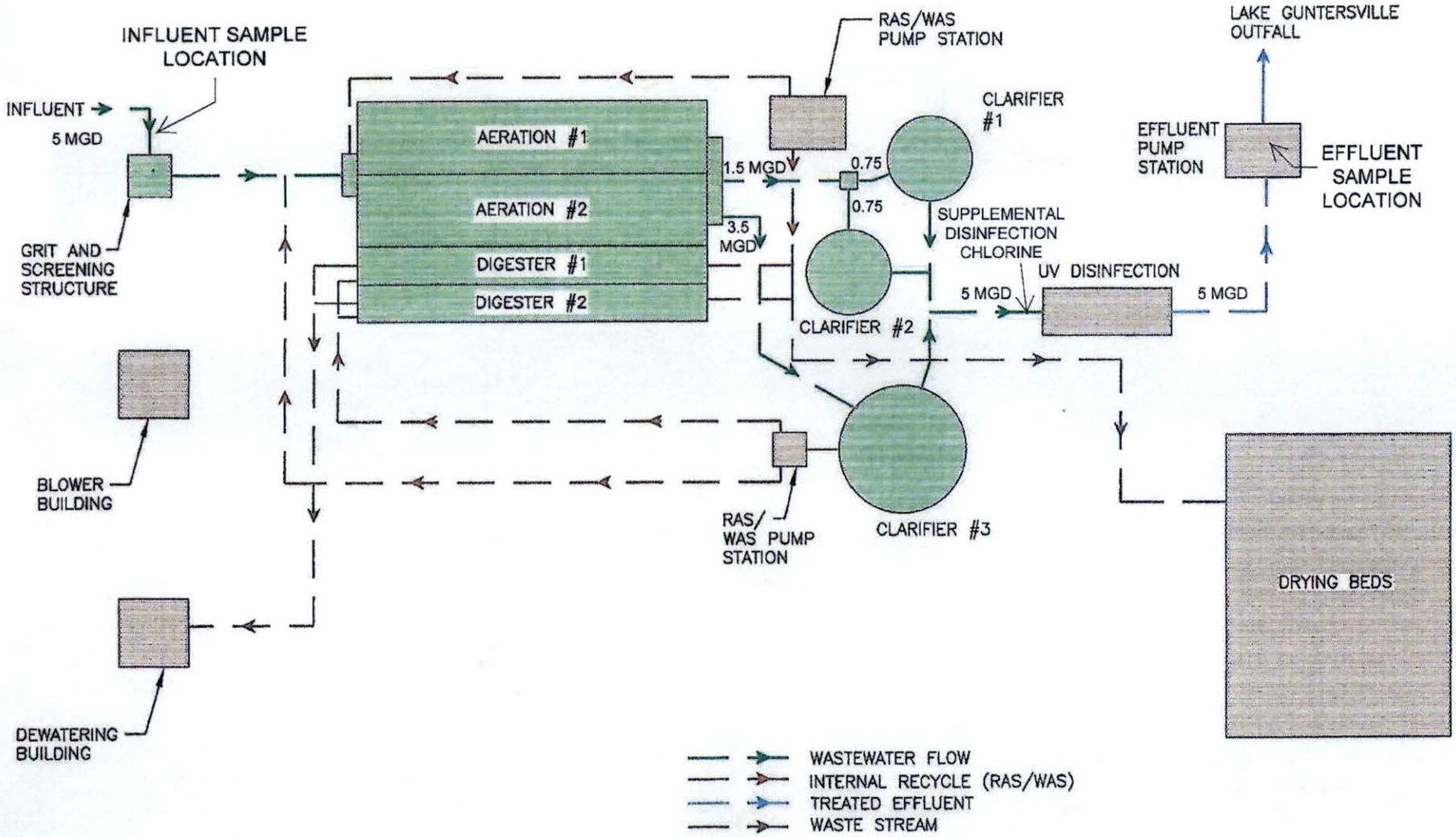
	SIU 4	SIU 5	SIU ___
Name of SIU	Maples Industries Plant # 1	Maples Industries Plant #2	
Mailing address (street or P.O. box)	PO Box 40	PO Box 40	
City, state, and ZIP code	Scottsboro, AL 35768	Scottsboro, AL 35769	
Description of all industrial processes that affect or contribute to the discharge.	Bath Rug and Carpet Sets, water with dyes for rug coloring.	Bath Rug and Carpet Sets, water with dyes for rug coloring.	
List the principal products and raw materials that affect or contribute to the SIU's discharge.	Bath Rugs and Carpet Sets Polyester, Nylon and Cotton Yams; Synthetic and cotton duct for backing of sets	Bath Rugs and Carpet Sets Polyester, Nylon and Cotton Yams; Synthetic and cotton duct for backing of sets	
Indicate the average daily volume of wastewater discharged by the SIU.	245,083 gpd	308,687 gpd	gpd
How much of the average daily volume is attributable to process flow?	187,000 gpd	281,000 gpd	gpd
How much of the average daily volume is attributable to non-process flow?	58,083 gpd	27,687 gpd	gpd
Is the SIU subject to local limits?	☑ Yes ☐ No	☑ Yes ☐ No	☐ Yes ☐ No
Is the SIU subject to categorical standards?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

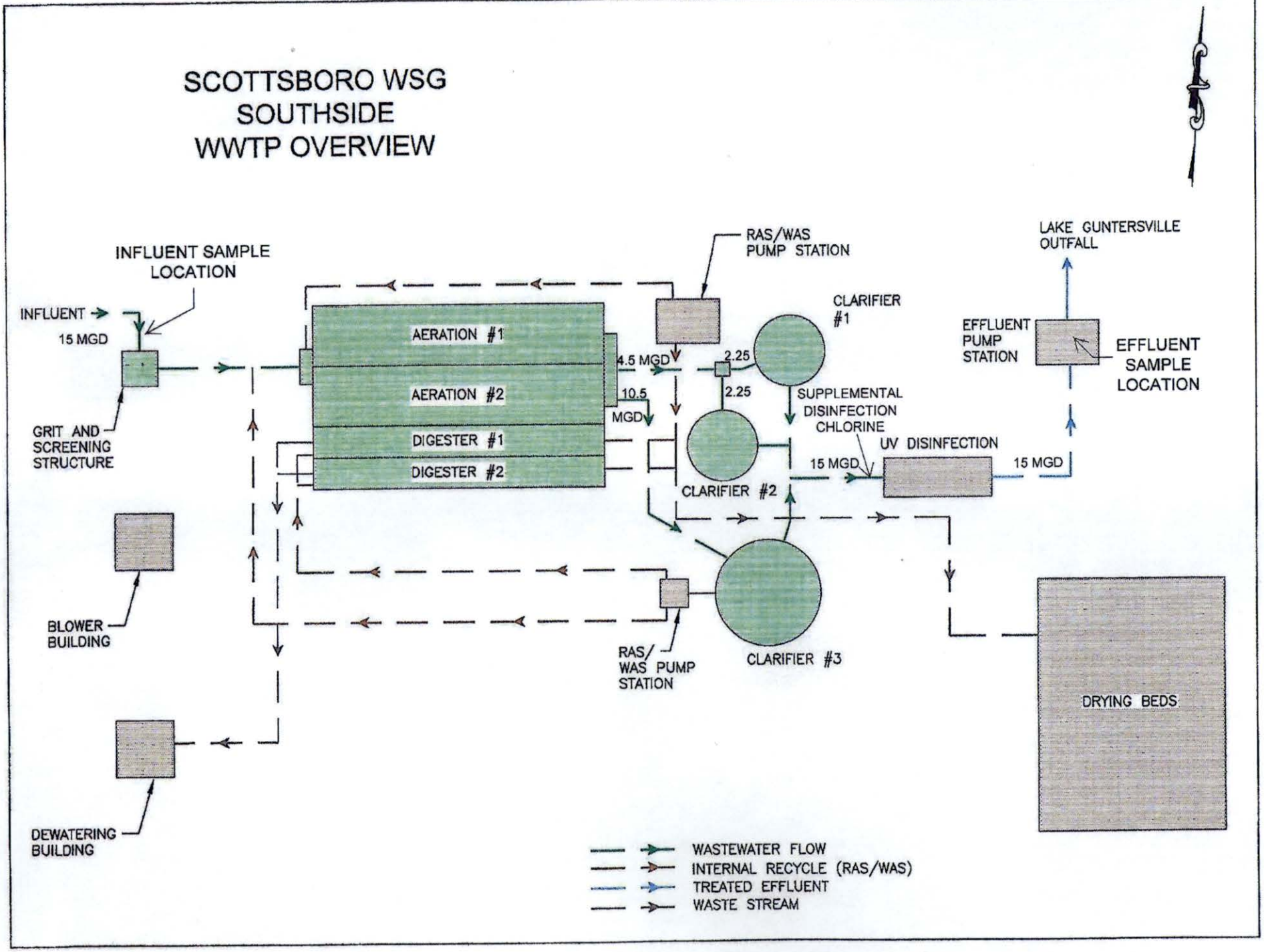
Response space is provided for three SIUs. Copy the table to report information for additional SIUs.

	SIU 4	SIU 5	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?	☐ Yes ☑ No	☐ Yes ☑ No	☐ Yes ☐ No
If yes, describe.			

SCOTTSBORO WSG
SOUTHSIDE
WWTP OVERVIEW



SCOTTSBORO WSG
SOUTHSIDE
WWTP OVERVIEW



3516 Greensboro Avenue
P. O. Drawer 1128 (35403)
Tuscaloosa, AL 35401

Pace Analytical®

205.345.0816 tel
205.343.0635 fax
www.pacelabs.com

Date: 12-Mar-19

CLIENT: Scottsboro Water, Sewer & Gas Board
Project: Southside WWTP - EPA Form 2A - Sample #2
Lab Order: 190211010

Analyses	Result	Limit	Units	DF	Date Analyzed
OIL AND GREASE BY 1664A		E1664A	Prep:		Analyst: CRS
Oil and Grease	1.6	1.4	mg/L	1	02/20/2019 17:00
PHENOLS, TOTAL		M5330 BD 2005	Prep:		Analyst: KMC
Phenols	< 0.10	0.10	mg/L	1	02/26/2019 8:00

Lab ID: 190211010-003 Collection Date: 02/11/2019 10:05
Client Sample ID: LL-Hg - Effluent Matrix: Aqueous

Analyses	Result	Limit	Units	DF	Date Analyzed
MERCURY LOW LEVEL		E1631	Prep:		Analyst: PACE
Mercury, Low Level as Hg	0.90	0.50	ng/L	1	02/20/2019 11:06

Lab ID: 190211010-004 Collection Date: 02/11/2019 10:05
Client Sample ID: LL-Hg - Spike Matrix: Aqueous

Analyses	Result	Limit	Units	DF	Date Analyzed
MERCURY LOW LEVEL		E1631	Prep:		Analyst: PACE
Mercury, Low Level as Hg	124	0.50	%	1	02/20/2019 11:06

Lab ID: 190211010-005 Collection Date: 02/11/2019 10:05
Client Sample ID: LL-Hg - Spike/Duplicate Matrix: Aqueous

Analyses	Result	Limit	Units	DF	Date Analyzed
MERCURY LOW LEVEL		E1631	Prep:		Analyst: PACE
Mercury, Low Level as Hg	82	0.50	%	1	02/20/2019 11:06

Lab ID: 190211010-006 Collection Date: 02/11/2019 10:05
Client Sample ID: LL-Hg - Field Blank Matrix: Aqueous

Analyses	Result	Limit	Units	DF	Date Analyzed
MERCURY LOW LEVEL		E1631	Prep:		Analyst: PACE
Mercury, Low Level as Hg	< 0.50	0.50	ng/L	1	02/20/2019 11:06

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Southside WWTP	

Form 2F NPDES

EPA

U.S Environmental Protection Agency
Application for NPDES Permit to Discharge Wastewater

STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))

Outfall Location

1.1 Provide information on each of the facility's outfalls in the table below

Outfall Number	Receiving Water Name	Latitude	Longitude
002-S	Trib. to Tennessee River	34° 36′ 47.35″ N	-86° 3′ 16.24″ W
003-S	Trib. to Tennessee River	34° 36′ 44.07″ N	-86° 3′ 7.58″ W
		° ′ ″	° ′ ″
		° ′ ″	° ′ ″
		° ′ ″	° ′ ″
		° ′ ″	° ′ ″

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

Improvements

2.1 Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application?

☐ Yes ☑ No → SKIP to Section 3.

2.2 Briefly identify each applicable project in the table below.

Brief Identification and Description of Project	Affected Outfalls (list outfall numbers)	Source(s) of Discharge	Final Compliance Dates	
			Required	Projected

2.3 Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (Optional Item)

☐ Yes ☐ No

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

Site Drainage Map

3.1 Have you attached a site drainage map containing all required information to this application? (See instructions for specific guidance.)

☑ Yes ☐ No

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

Pollutant Sources

4.1 Provide information on the facility's pollutant sources in the table below.

Outfall Number	Impervious Surface Area (within a mile radius of the facility)		Total Surface Area Drained (within a mile radius of the facility)	
002-S	0.88	*specify units* Ac	1.70	*specify units* Ac
003-S	2.59	*specify units* Ac	4.62	*specify units* Ac
		specify units		*specify units*
		specify units		*specify units*
		specify units		*specify units*
		specify units		*specify units*

4.2 Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.)

No significant materials are or have been treated, stored, or disposed of in a manner to allow exposure to stormwater. All solids handling facilities are self-contained areas. Untreated components of domestic wastewater plant are contained within pipe, structures, etc. and not exposed to stormwater.

4.3 Provide the location and a description of existing structural and non-structural control measures to reduce pollutants in stormwater runoff. (See instructions for specific guidance.)

Stormwater Treatment		
Outfall Number	**Control Measures and Treatment**	**Codes from Exhibit 2F–1 (list)**
002-S, 003-S	Erosion is controlled at each outfall by appropriate BMP measures. All basins and	
	significant material handling areas have self-contained areas by concrete or berms or are	
	located under rooftop. Nonstructural control measures will be described in the SWPP.	

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

Non-Stormwater Discharges

5.1 *I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-stormwater discharges. Moreover, I certify that the outfalls identified as having non-stormwater discharges are described in either an accompanying NPDES Form 2C, 2D, or 2E application.*

Name (print or type first and last name)	Official title
Jim Green Jr.	General Manager
Signature	**Date signed**
	1/28/20

5.2 Provide the testing information requested in the table below.

Outfall Number	Description of Testing Method Used	Date(s) of Testing	Onsite Drainage Points Directly Observed During Test

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

Significant Leaks or Spills

6.1 Describe any significant leaks or spills of toxic or hazardous pollutants in the last three years.

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

Discharge Information

See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.

7.1 Is this a new source or new discharge?

☐ Yes ➔ See instructions regarding submission of *estimated* data.

☑ No ➔ See instructions regarding submission of *actual* data.

Tables A, B, C, and D

7.2 Have you completed Table A for each outfall?

☑ Yes ☐ No

Discharge Information Continued

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

Discharge Information Continued

Used or Manufactured Toxics

7.18 Is any pollutant listed on Exhibits 2F–2 through 2F–4 a substance or a component of a substance used or manufactured as an intermediate or final product or byproduct?

☐ Yes ☑ No ➔ SKIP to Section 8.

7.19 List the pollutants below, including TCDD if applicable.

1.	4.	7.
2.	5.	8.
3.	6.	9.

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

Biological Toxicity Testing Data

8.1 Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last three years?

☐ Yes ☑ No ➔ SKIP to Section 9.

8.2 Identify the tests and their purposes below.

Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?	Date Submitted
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	

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

Contract Analysis Information

9.1 Were any of the analyses reported in Section 7 (on Tables A through C) performed by a contract laboratory or consulting firm?

☑ Yes ☐ No ➔ SKIP to Section 10.

9.2 Provide information for each contract laboratory or consulting firm below.

	Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
Name of laboratory/firm	Pace Analytical		
Laboratory address	2220 Beltline Rd. SW Decatur, AL 35601		
Phone number	(256) 350-0846		
Pollutant(s) analyzed	E Coli; Oil & Grease; Nitrate-Nitrite; Kjeldahl Nitrogen, TKN; CBOD; Phosphorous; Ammonia Nitrogen; Suspended Solids		

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

Checklist and Certification Statement

10.1 In Column 1 below, mark the sections of Form 2F that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.

Column 1	Column 2
☑ Section 1	☐ w/ attachments (e.g., responses for additional outfalls)
☑ Section 2	☐ w/ attachments
☑ Section 3	☑ w/ site drainage map
☑ Section 4	☐ w/ attachments
☐ Section 5	☐ w/ attachments
☑ Section 6	☐ w/ attachments
☑ Section 7	☑ Table A ☐ w/ small business exemption request ☐ Table B ☐ w/ analytical results as an attachment ☐ Table C ☐ Table D
☑ Section 8	☐ w/attachments
☑ Section 9	☐ w/attachments (e.g., responses for additional contact laboratories or firms)
☑ Section 10	☐

10.2 **Certification Statement**

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

Name (print or type first and last name)	Official title
Jim Green Jr	General Manager
Signature	**Date signed**
	1/28/20

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL0031372	Southside WWTP	002S

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

TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))[1]

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

	Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
		Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1.	Oil and grease	ND				1	
2.	Biochemical oxygen demand (BOD_5)	NA				1	
3.	Chemical oxygen demand (COD)	NA				1	
4.	Total suspended solids (TSS)	NA				1	
5.	Total phosphorus	ND				1	
6.	Total Kjeldahl nitrogen (TKN)	3.27 mg/L				1	
7.	Total nitrogen (as N)	NA				1	
8.	pH (minimum)	NA				1	
	pH (maximum)	NA				1	

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

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL 0031372	Southside WWTP	003S

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

TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))[1]

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

	Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
		Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1.	Oil and grease	ND				1	
2.	Biochemical oxygen demand (BOD_5)	NA				1	
3.	Chemical oxygen demand (COD)	NA				1	
4.	Total suspended solids (TSS)	NA				1	
5.	Total phosphorus	ND				1	
6.	Total Kjeldahl nitrogen (TKN)	ND				1	
7.	Total nitrogen (as N)	NA				1	
8.	pH (minimum)	NA				1	
	pH (maximum)	NA				1	

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

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL0031372	Southside WWTP	002S

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TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(A))[1]

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

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
N/A						

[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).

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL 0031372	Southside WWTP	003S

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TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(A))[1]

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

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
N/A						

[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	Facility Name	Outfall Number
	AL0031372	Southside WWTP	002S

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

TABLE C. TOXIC POLLUTANTS, CERTAIN HAZARDOUS SUBSTANCES, AND ASBESTOS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(B) and (vii))[1]

List each pollutant shown in Exhibits 2F–2, 2F–3, and 2F–4 that you know or have reason to believe is present. Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
N/A						

[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).

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL 0031372	Southside WWTP	003S

Form Approved 03/05/19
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TABLE C. TOXIC POLLUTANTS, CERTAIN HAZARDOUS SUBSTANCES, AND ASBESTOS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(B) and (vii))[1]

List each pollutant shown in Exhibits 2F–2, 2F–3, and 2F–4 that you know or have reason to believe is present. Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
N/A						

[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	Facility name	Outfall Number
	AL0031372	Southside WWTP	002S

Form Approved 03/05/19
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TABLE D. STORM EVENT INFORMATION (40 CFR 122.26(c)(1)(i)(E)(6))

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

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

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

EPA Identification Number	NPDES Permit Number	Facility name	Outfall Number
	AL 0031372	Southside WWTP	003S

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

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

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

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

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Scottsboro Southside WWTP	

Form 2S NPDES

EPA

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?

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

PART 1 — LIMITED BACKGROUND INFORMATION (40 CFR 122.21(c)(2)(ii))

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

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

Facility Information

1.1

Facility name			
Mailing address (street or P.O. box)			
City or town		State	ZIP code
Contact name (first and last)	Title	Phone number	Email address
Location address (street, route number, or other specific identifier) ☐ Same as mailing address			
City or town		State	ZIP code

1.2 **Ownership Status**

☐ Public—federal ☐ Public—state ☐ Other public (specify)_____

☐ Private ☐ 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?

☐ Yes ☐ No ➔ SKIP to Item 2.3 (Part 1, Section 2).

2.2

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

2.3 Is the applicant the facility's owner, operator, or both? (Check only one response.)

☐ Owner ☐ Operator ☐ Both

2.4 To which entity should the NPDES permitting authority send correspondence? (Check only one response.)

☐ Facility ☐ Applicant ☐ Facility and applicant (they are one and the same)

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

Sewage Sludge Amount

3.1 Provide the total dry metric tons per the latest 365-day period of sewage sludge generated, treated, used, and disposed of:

Practice	Dry Metric Tons per 365-Day Period
Amount generated at the facility	
Amount treated at the facility	
Amount used (i.e., received from off site) at the facility	
Amount disposed of at the facility	

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MUNICIPAL SECTION

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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PART 1, SECTION 4. POLLUTANT CONCENTRATIONS (40 CFR 122.21(c)(2)(i)(E))

Pollutant Concentrations

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	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)			

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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PART 1, SECTION 5. TREATMENT PROVIDED AT YOUR FACILITY (40 CFR 122.21(c)(2)(ii)(C))

Treatment Provided at Your Facility

5.1 For each sewage sludge use or disposal practice, indicate the amount of sewage sludge used or disposed of, the applicable pathogen class and reduction alternative, and the applicable vector attraction reduction option. Attach additional pages, as necessary.

Use or Disposal Practice (check one)	Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
☐ Land application of bulk sewage ☐ Land application of biosolids (bulk) ☐ Land application of biosolids (bags) ☐ Surface disposal in a landfill ☐ Other surface disposal ☐ Incineration		☐ Not applicable ☐ Class A, Alternative 1 ☐ Class A, Alternative 2 ☐ Class A, Alternative 3 ☐ Class A, Alternative 4 ☐ Class A, Alternative 5 ☐ Class A, Alternative 6 ☐ Class B, Alternative 1 ☐ Class B, Alternative 2 ☐ Class B, Alternative 3 ☐ Class B, Alternative 4 ☐ Domestic septage, pH adjustment	☐ Not applicable ☐ Option 1 ☐ Option 2 ☐ Option 3 ☐ Option 4 ☐ Option 5 ☐ Option 6 ☐ Option 7 ☐ Option 8 ☐ Option 9 ☐ Option 10 ☐ Option 11

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.)

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery
- ☐ 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)?

☐ Yes ➔ SKIP to Part 1, Section 8 (Certification). ☐ No

6.2 Is sewage sludge from your facility provided to another facility for treatment, distribution, use, or disposal?

☐ Yes ☐ 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.)

- ☐ Treatment or blending
- ☐ Sale or give-away in bag or other container
- ☐ Land application
- ☐ Surface disposal
- ☐ Incineration
- ☐ Other (describe)
- ☐ Composting

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Scottsboro Southside WWTP	

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.

☐ 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: AL	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: AL	ZIP code
County		County code	☐ Not available

7.2 Site type (check all that apply)

☐ Agricultural	☐ Lawn or home garden	☐ Forest
☐ Surface disposal	☐ Public contact	☐ Incineration
☐ Reclamation	☐ Municipal solid waste landfill	☐ 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
☑ Section 1: Facility Information	☑ w/ attachments
☑ Section 2: Applicant Information	☐ w/ attachments
☐ Section 3: Sewage Sludge Amount	☐ w/ attachments
☐ Section 4: Pollutant Concentrations	☐ w/ attachments
☐ Section 5: Treatment Provided at Your Facility	☐ w/ attachments
☐ Section 6: Sewage Sludge Sent to Other Facilities	☐ w/ attachments
☐ Section 7: Use and Disposal Sites	☐ w/ attachments
☐ Section 8: Checklist and Certification Statement	

Checklist and Certification Statement Continued

8.2 **Certification Statement**

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

Name (print or type first and last name)	Official title	Phone number

Signature	Date signed

PART 1 APPLICANTS STOP HERE.

Submit completed application package to your NPDES permitting authority.

This page intentionally left blank.

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

General Information

All Part 2 applicants must complete this section.

Facility Information

1.1 Facility name
Scottsboro Southside WWTP

Mailing address (street or P.O. box)
P.O. Box 550

City or town	State	ZIP code	Phone number
Scottsboro	AL	35768	(256) 574-1515

Contact name (first and last)	Title	Email address
Jimmy Green, Jr.	General Manager	jimmy@scottsboro.org

Location address (street, route number, or other specific identifier) ☐ Same as mailing address
318 Camille Street

City or town	State	ZIP code
Scottsboro	AL	35769

1.2 Is this facility a Class I sludge management facility?
☑ Yes ☐ No

1.3 **Facility Design Flow Rate** 5.0 million gallons per day (mgd)

1.4 **Total Population Served** 15,000

1.5 **Ownership Status**
☐ Public—federal ☐ Public—state ☑ Other public (specify) Local Government Ei
☐ Private ☐ Other (specify)

Applicant Information

1.6 Is applicant different from entity listed under Item 1.1 above?
☐ Yes ☑ No ➔SKIP to Item 1.8 (Part 2, Section 1).

1.7 Applicant name

Applicant mailing address (street or P.O. box)

City or town	State	ZIP code

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

1.8 Is the applicant the facility's owner, operator, or both? (Check only one response.)
☐ Operator ☐ Owner ☑ Both

1.9 To which entity should the NPDES permitting authority send correspondence? (Check only one response.)
☐ Facility ☐ Applicant ☑ Facility and applicant (they are one and the same)

1.10	Facility's NPDES permit number ☐ Check here if you do not have an NPDES permit but are otherwise required to submit Part 2 of Form 2S.	AL0031372

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.

☐ RCRA (hazardous wastes)	☐ Nonattainment program (CAA)	☐ NESHAPs (CAA)
☐ PSD (air emissions)	☐ Dredge or fill (CWA Section 404)	☐ Other (specify)
☐ Ocean dumping (MPRSA)	☐ UIC (underground injection of fluids)	

Indian Country

1.12 Does any generation, treatment, storage, application to land, or disposal of sewage sludge from this facility occur in Indian Country?

☐ Yes ☑ 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.)

☑ Yes ☐ 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.)

☑ Yes ☐ 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?

☐ Yes ☑ No → SKIP to Item 1.18 (Part 2, Section 1) below.

1.17 Provide the following information for each contractor.

☐ 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.		Contractor 1	Contractor 2	Contractor 3
	Responsibilities of contractor			

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

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
☑ Section 1 (General Information)	☑ w/ attachments
☑ Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)	☑ w/ attachments
☐ Section 3 (Land Application of Bulk Sewage Sludge)	☐ w/ attachments
☐ Section 4 (Surface Disposal)	☐ w/ attachments
☐ Section 5 (Incineration)	☐ 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)	Official title
Jim Green, Jr.	General Manager
Signature	Date signed 11/2/21
Telephone number (256) 574-1515	

Upon the request of the NPDES permitting authority, you must submit any other information the authority deems necessary to assess sewage sludge use or disposal practices at your facility and identify appropriate permitting requirements.

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

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

2.1 Does your facility generate sewage sludge or derive a material from sewage sludge?

☑ 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:	402.71

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
	☐ Not applicable ☐ Class A, Alternative 1 ☐ Class A, Alternative 2 ☐ Class A, Alternative 3 ☐ Class A, Alternative 4 ☐ Class A, Alternative 5 ☐ Class A, Alternative 6 ☐ Class B, Alternative 1 ☐ Class B, Alternative 2 ☐ Class B, Alternative 3 ☐ Class B, Alternative 4 ☐ Domestic septage, pH adjustment	☐ Not applicable ☐ Option 1 ☐ Option 2 ☐ Option 3 ☐ Option 4 ☐ Option 5 ☐ Option 6 ☐ Option 7 ☐ Option 8 ☐ Option 9 ☐ Option 10 ☐ Option 11

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.)

☐ Preliminary operations (e.g., sludge grinding and degritting)	☐ Thickening (concentration)
☐ Stabilization	☐ Anaerobic digestion
☐ Composting	☐ Conditioning
☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
☐ Heat drying	☐ Thermal reduction
☐ Methane or biogas capture and recovery	☐ Other (specify) _____

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued

Treatment Provided at Your Facility

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

Use or Disposal Practice (check one)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
☐ Land application of bulk sewage	☑ Not applicable	☑ Not applicable
☐ Land application of biosolids (bulk)	☐ Class A, Alternative 1	☐ Option 1
☐ Land application of biosolids (bags)	☐ Class A, Alternative 2	☐ Option 2
☑ Surface disposal in a landfill	☐ Class A, Alternative 3	☐ Option 3
☐ Other surface disposal	☐ Class A, Alternative 4	☐ Option 4
☐ Incineration	☐ Class A, Alternative 5	☐ Option 5
	☐ Class A, Alternative 6	☐ Option 6
	☐ Class B, Alternative 1	☐ Option 7
	☐ Class B, Alternative 2	☐ Option 8
	☐ Class B, Alternative 3	☐ Option 9
	☐ Class B, Alternative 4	☐ Option 10
	☐ Domestic septage, pH adjustment	☐ 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.)

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☑ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery

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

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

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

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

☐ Yes ☑ No ➔ SKIP to Item 2.14 (Part 2, Section 2) below.

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

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

☐ Yes ☐ No

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

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
☐ Not applicable	☐ Not applicable
☐ Class A, Alternative 1	☐ Option 1
☐ Class A, Alternative 2	☐ Option 2
☐ Class A, Alternative 3	☐ Option 3
☐ Class A, Alternative 4	☐ Option 4
☐ Class A, Alternative 5	☐ Option 5
☐ Class A, Alternative 6	☐ Option 6
☐ Class B, Alternative 1	☐ Option 7
☐ Class B, Alternative 2	☐ Option 8
☐ Class B, Alternative 3	☐ Option 9
☐ Class B, Alternative 4	☐ Option 10
☐ Domestic septage, pH adjustment	☐ 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.)

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery
- ☐ 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).

☐ 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?

☐ Yes ☐ 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.

☐ Check here to indicate that you have attached material.

☐ 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?

☐ Yes ☐ No ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

2.28 Total dry metric tons per 365-day period of sewage sludge applied to all land application sites:

2.29 Did you identify all land application sites in Part 2, Section 3 of this application?

☐ Yes ☐ 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?

☐ Yes ☐ 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.

☐ Check here if you have attached the explanation to the application package.

☐ 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?

☐ Yes ☑ No ➔ SKIP to Item 2.39 (Part 2, Section 2) below.

2.33 Total dry metric tons of sewage sludge from your facility placed on all surface disposal sites per 365-day period:

2.34 Do you own or operate all surface disposal sites to which you send sewage sludge for disposal?

☐ Yes ➔ SKIP to Item 2.39 (Part 2, Section 2) below. ☐ 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.)

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

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

2.36	Site name or number of surface disposal site you do not own or operate			
	Mailing address (street or P.O. box)			
	City or Town		State	ZIP Code
	Contact Name (first and last)	Title	Phone Number	Email Address
2.37	Site Contact (Check all that apply.) ☐ Owner ☐ Operator			
2.38	Total dry metric tons of sewage sludge from your facility placed on this surface disposal site per 365-day period:			

Incineration

2.39	Is sewage sludge from your facility fired in a sewage sludge incinerator? ☐ Yes ☑ 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? ☐ Yes ➔ SKIP to Item 2.46 (Part 2, Section 2) below. ☐ 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.) ☐ 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) ☐ Same as mailing address			
	City or town		State	ZIP code
2.44	Contact (check all that apply) ☐ Incinerator owner ☐ 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? ☑ Yes ☐ 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.) ☐ Check here if you have attached additional sheets to the application package.	1

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

2.48 Name of landfill
Scottsboro Sanitary Balefill Landfill

Mailing address (street or P.O. box)
27150 John T. Reid Parkway

City or town	State	ZIP code
Scottsboro	AL	35768

Contact name (first and last)	Title	Phone number	Email address
Stacy Ledwell	Director	(256) 259-5548	

Location address (street, route number, or other specific identifier) ☐ Same as mailing address
650 County Road 412

County	County code	
Jackson		☐ Not available

City or town	State	ZIP code
Hollywood	AL	35752

2.49 Total dry metric tons of sewage sludge from your facility placed in this municipal solid waste landfill per 365-day period: 402.71

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
36-02	A.D.E.M. Municipal Solid Waste Landfill

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).

☑ 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?

☑ Yes ☐ No

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Scottsboro Southside WWTP	

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?

☐ Yes ☑ No ➔ SKIP to Part 2, Section 4.

3.2 Do any of the following conditions apply?

- 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.

☐ Yes ➔ SKIP to Part 2, Section 4. ☐ No

3.3 Complete Section 3 for every site on which the sewage sludge is applied.

☐ 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) ☐ Same as mailing address

County	County code ☐ Not available

City or town	State	ZIP code

Latitude/Longitude of Land Application Site (see instructions)

Latitude	Longitude
° ′ ″	° ′ ″

Method of Determination

☐ USGS map ☐ Field survey ☐ Other (specify) _____

3.5 Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location.

☐ 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?

☐ Yes ➔ SKIP to Item 3.8 (Part 2, Section 3) below. ☐ 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?

☐ Yes ➔ SKIP to Item 3.10 (Part 2, Section 3) below. ☐ No

3.9 Applier's name

Mailing address (street or P.O. box)

City or town		State	ZIP code
Contact name (first and last)	Title	Phone number	Email address

Land Application of Bulk Sewage Sludge Continued

Site Type

3.10 Type of land application:

☐ Agricultural land ☐ Forest

☐ Reclamation site ☐ Public contact site

☐ Other (describe)

Crop or Other Vegetation Grown on Site

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

3.12 What is the nitrogen requirement for this crop or vegetation?

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?

☐ Yes ☐ 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.)

☐ Option 9 (injection below land surface) ☐ 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)?

☐ Yes ☐ 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?

☐ Yes ☐ 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?

☐ Yes ☐ 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

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Scottsboro Southside WWTP	

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?

☐ Yes ☑ 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.

☐ 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) ☐ Same as mailing address

County		County code ☐ Not available	
City or town		State	ZIP code

Latitude/Longitude of Active Sewage Sludge Unit (see instructions)

Latitude	Longitude
° ′ ″	° ′ ″

Method of Determination

☐ USGS map ☐ Field survey ☐ Other (specify) _____

4.4 Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location.

☐ 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)?

☐ Yes ☐ No ➔ SKIP to Item 4.9 (Part 2, Section 4) below.

4.8 Describe the liner.

☐ 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?

☐ Yes ☐ 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.

☐ Check here to indicate that you have attached the description to the application package.

Surface Disposal Continued

4.11	Is the boundary of the active sewage sludge unit less than 150 meters from the property line of the surface disposal site? ☐ Yes ☐ 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. ☐ 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? ☐ Yes ☐ 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.) ☐ 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
☐ Not applicable	☐ Not applicable
☐ Class A, Alternative 1	☐ Option 1
☐ Class A, Alternative 2	☐ Option 2
☐ Class A, Alternative 3	☐ Option 3
☐ Class A, Alternative 4	☐ Option 4
☐ Class A, Alternative 5	☐ Option 5
☐ Class A, Alternative 6	☐ Option 6
☐ Class B, Alternative 1	☐ Option 7
☐ Class B, Alternative 2	☐ Option 8
☐ Class B, Alternative 3	☐ Option 9
☐ Class B, Alternative 4	☐ Option 10
☐ Domestic septage, pH adjustment	☐ 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.)

☐ Preliminary operations (e.g., sludge grinding and degritting)	☐ Thickening (concentration)
☐ Stabilization	☐ Anaerobic digestion
☐ Composting	☐ Conditioning
☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
☐ Heat drying	☐ Thermal reduction
☐ Methane or biogas capture and recovery	☐ Other (specify) _____

Surface Disposal Continued

Vector Attraction Reduction

4.21 Which vector attraction reduction option, if any, is met when sewage sludge is placed on this active sewage sludge unit?

☐ Option 9 (Injection below and surface)
☐ Option 10 (Incorporation into soil within 6 hours)
☐ Option 11 (Covering active sewage sludge unit daily)
☐ None

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

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

Groundwater Monitoring

4.23 Is groundwater monitoring currently conducted at this active sewage sludge unit, or are groundwater monitoring data otherwise available for this active sewage sludge unit?

☐ Yes
☐ No ➔ SKIP to Item 4.26 (Part 2, Section 4) below.

4.24 Provide a copy of available groundwater monitoring data.

☐ Check here to indicate you have attached the monitoring data.

4.25 Describe the well locations, the approximate depth to groundwater, and the groundwater monitoring procedures used to obtain these data.

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

4.26 Has a groundwater monitoring program been prepared for this active sewage sludge unit?

☐ Yes
☐ No ➔ SKIP to Item 4.28 (Part 2, Section 4) below.

4.27 Submit a copy of the groundwater monitoring program with this permit application.

☐ Check here to indicate you have attached the monitoring program.

4.28 Have you obtained a certification from a qualified groundwater scientist that the aquifer below the active sewage sludge unit has not been contaminated?

☐ Yes
☐ No ➔ SKIP to Item 4.30 (Part 2, Section 4) below.

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

☐ Check here to indicate you have attached the certification to the application package.

Site-Specific Limits

4.30 Are you seeking site-specific pollutant limits for the sewage sludge placed on the active sewage sludge unit?

☐ Yes
☐ No ➔ SKIP to Part 2, Section 5.

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

☐ Check here to indicate you have attached the requested information.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0031372	Scottsboro Southside WWTP	

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

Incineration

Incinerator Information

5.1 Do you fire sewage sludge in a sewage sludge incinerator?

☐ Yes ☑ No ➔ SKIP to END.

5.2 Indicate the total number of incinerators used at your facility. (Complete the remainder of Section 5 for each such incinerator.)

☐ Check here to indicate that you have attached information for one or more incinerators.

5.3 Incinerator name or number

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

County	County code	☐ Not available
City or town	State	ZIP code

Latitude/Longitude of Incinerator (see instructions)

Latitude	Longitude
° ′ ″	° ′ ″

Method of Determination

☐ USGS map ☐ Field survey ☐ Other (specify) _____

Amount Fired

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

Beryllium NESHAP

5.5 Submit information, test data, and a description of measures taken that demonstrate whether the sewage sludge incinerated is beryllium-containing waste and will continue to remain as such.

☐ Check here to indicate that you have attached this material to the application package.

5.6 Is the sewage sludge fired in this incinerator "beryllium-containing waste" as defined at 40 CFR 61.31?

☐ Yes ☐ No ➔ SKIP to Item 5.8 (Part 2, Section 5) below.

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

☐ Check here to indicate that you have attached this information.

Mercury NESHAP

5.8 Is compliance with the mercury NESHAP being demonstrated via stack testing?

☐ Yes ☐ No ➔ SKIP to Item 5.11 (Part 2, Section 5) below.

5.9 Submit a complete report of stack testing and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit.

☐ Check here to indicate that you have attached this information.

5.10 Provide copies of mercury emission rate tests for the two most recent years in which testing was conducted.

☐ Check here to indicate that you have attached this information.

5.11 Do you demonstrate compliance with the mercury NESHAP by sewage sludge sampling?

☐ Yes ☐ No ➔ SKIP to Item 5.13 (Part 2, Section 5) below.

5.12 Submit a complete report of sewage sludge sampling and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit.

☐ Check here to indicate that you have attached this information.

Incineration Continued

Dispersion Factor

5.13	Dispersion factor in micrograms/cubic meter per gram/second:	
5.14	Name and type of dispersion model:	
5.15	Submit a copy of the modeling results and supporting documentation. ☐ Check here to indicate that you have attached this information.	

Control Efficiency

5.16 Provide the control efficiency, in hundredths, for each of the pollutants listed below.

Pollutant	Control Efficiency, in Hundredths
Arsenic	
Cadmium	
Chromium	
Lead	
Nickel	

5.17	Attach a copy of the results or performance testing and supporting documentation (including testing dates). ☐ Check here to indicate that you have attached this information.	

Risk-Specific Concentration for Chromium

5.18	Provide the risk-specific concentration (RSC) used for chromium in micrograms per cubic meter:	
5.19	Was the RSC determined via Table 2 in 40 CFR 503.43? ☐ Yes ☐ No ➔ SKIP to Item 5.21 (Part 2, Section 5) below.	
5.20	Identify the type of incinerator used as the basis. ☐ Fluidized bed with wet scrubber ☐ Other types with wet scrubber ☐ Fluidized bed with wet scrubber and wet electrostatic precipitator ☐ Other types with wet scrubber and wet electrostatic precipitator	
5.21	Was the RSC determined via Table 6 in 40 CFR 503.43 (site-specific determination)? ☐ Yes ☐ No ➔ SKIP to Item 5.23 (Part 2, Section 5) below.	
5.22	Provide the decimal fraction of hexavalent chromium concentration to total chromium concentration in stack exit gas:	
5.23	Attach the results of incinerator stack tests for hexavalent and total chromium concentrations, including the date(s) of any test(s), with this application. ☐ Check here to indicate that you have attached this information. ☐ Not applicable	

Incinerator Parameters

5.24	Do you monitor total hydrocarbons (THC) in the exit gas of the sewage sludge incinerator? ☐ Yes ☐ No	
5.25	Do you monitor carbon monoxide (CO) in the exit gas of the sewage sludge incinerator? ☐ Yes ☐ No	
5.26	Indicate the type of sewage sludge incinerator.	
5.27	Incinerator stack height in meters:	
5.28	Indicate whether the value submitted in Item 5.27 is (check only one response): ☐ Actual stack height ☐ Creditable stack height	

Incineration Continued

Performance Test Operating Parameters

5.29	Maximum performance test combustion temperature:	
5.30	Performance test sewage sludge feed rate, in dry metric tons/day	
5.31	Indicate whether value submitted in Item 5.30 is (check only one response): ☐ Average use ☐ Maximum design	
5.32	Attach supporting documents describing how the feed rate was calculated. ☐ Check here to indicate that you have attached this information.	
5.33	Submit information documenting the performance test operating parameters for the air pollution control device(s) used for this sewage sludge incinerator. ☐ Check here to indicate that you have attached this information.	

Monitoring Equipment

5.34 List the equipment in place to monitor the listed parameters.

Parameter	Equipment in Place for Monitoring
Total hydrocarbons or carbon monoxide	
Percent oxygen	
Percent moisture	
Combustion temperature	
Other (describe)	

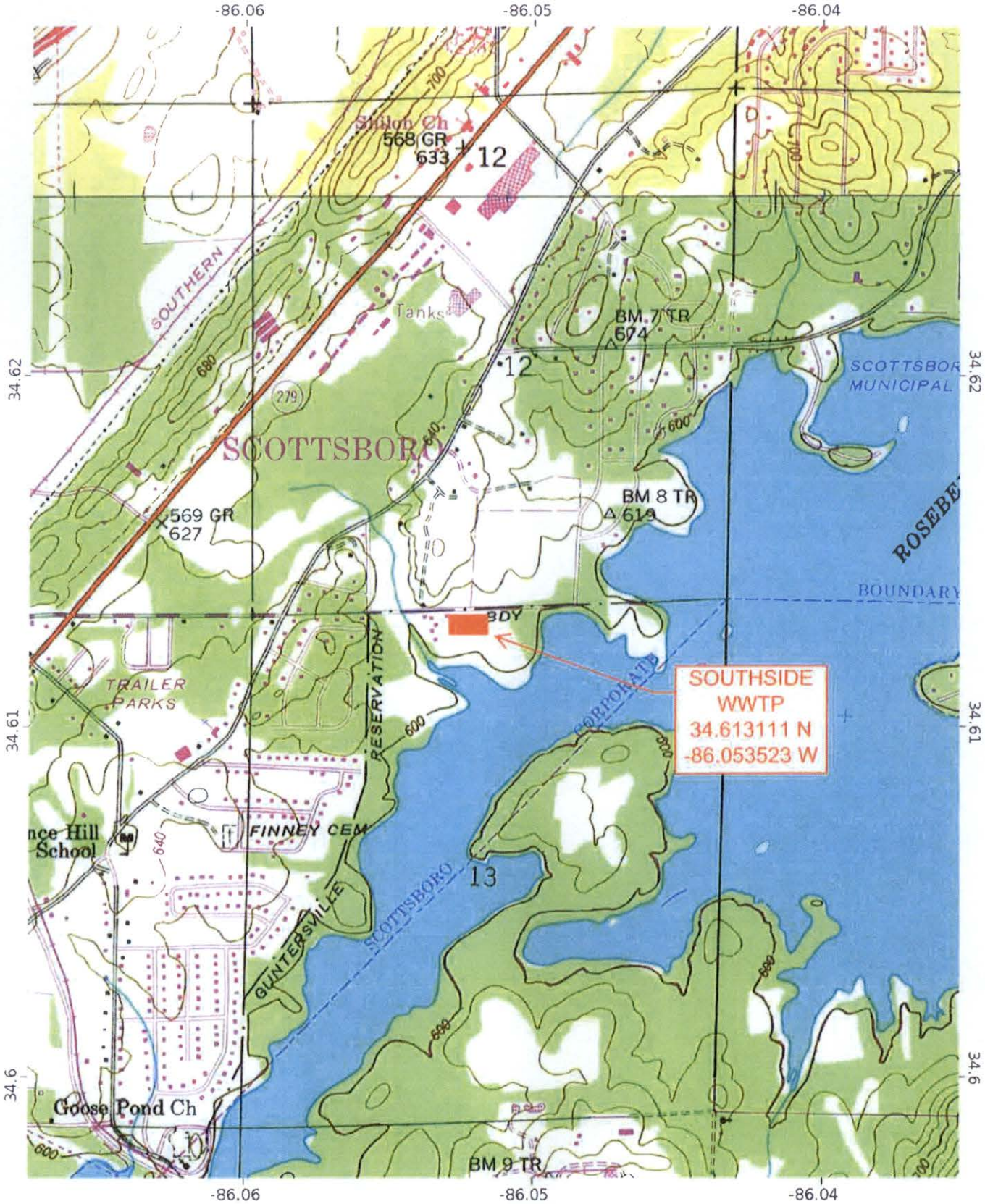
Air Pollution Control Equipment

5.35 List all air pollution control equipment used with this sewage sludge incinerator.

☐ Check here if you have attached the list to the application package for the noted incinerator.

END of PART 2

Submit completed application package to your NPDES permitting authority.



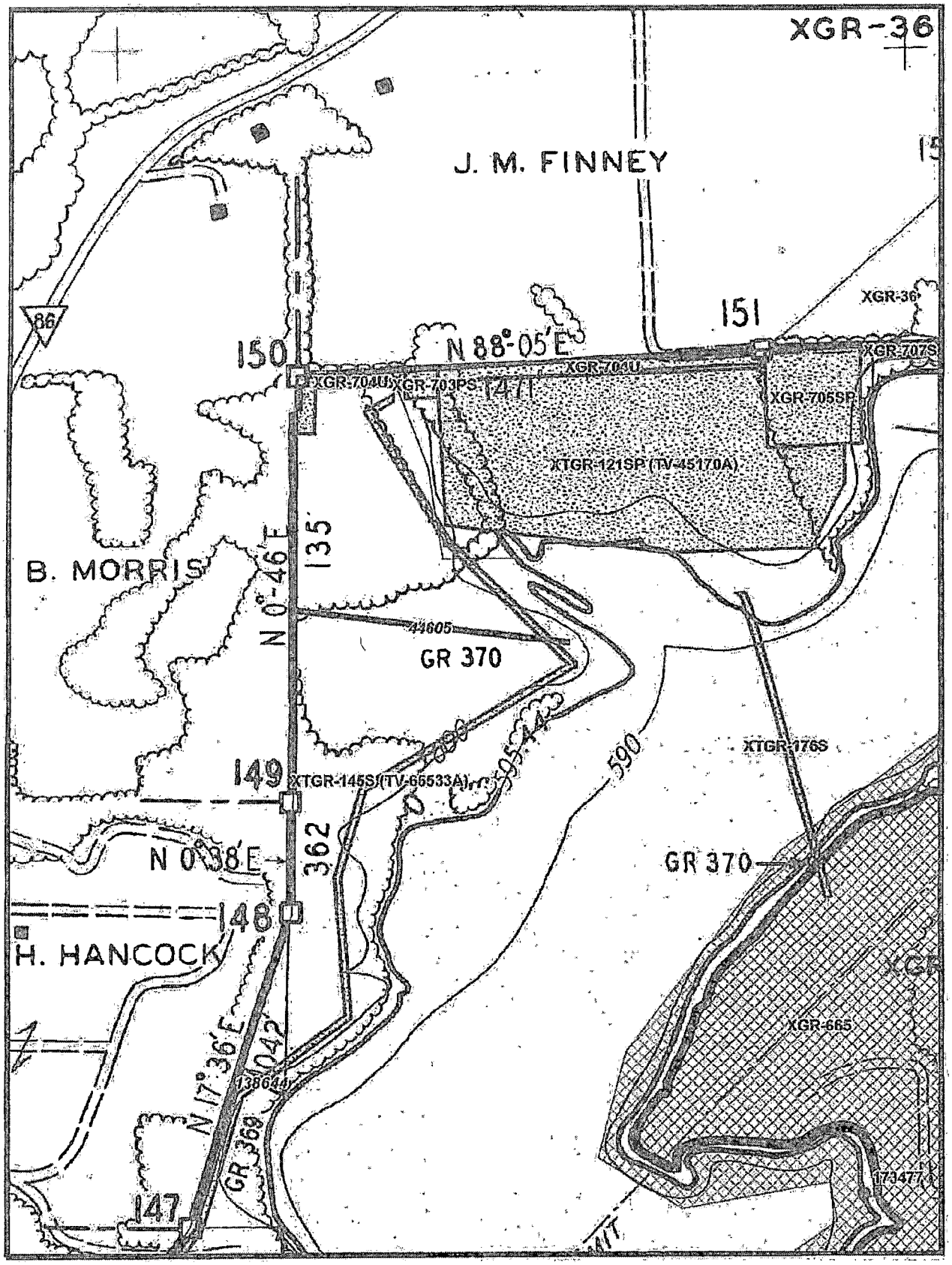
Southside WWTP
WGS84
USNG Zone 16SED

CalTopo

0.5 1.0 1.5 km
0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9 mi

Scale **1:16000** 1 inch = 1333 feet

MN
-4°
N


XGR-36
J. M. FINNEY
151
XGR-36
N 88°-05'E
150
XGR-704U
XGR-703PS
1471
XGR-707S
XGR-704U
XGR-705SP
XTGR-121SP (TV-45170A)
B. MORRIS
N 0°-46'E
135'
44605
GR 370
149
XTGR-145S (TV-65533A)
N 0°38'E
362'
XTGR-176S
590'
GR 370
148
H. HANCOCK
XGR-665
N 17°-36'E
138644
GR 368
147
173477

Scottsboro Southside WWTP Sludge Narrative

Wastewater treatment processes utilized at the Scottsboro Southside WWTP include Conventional Activated Sludge, Grit Removal, Bar Screening, Aeration, Clarification, Aerobic Digestion, UV Disinfection and Chlorine Disinfection. Sludge is processed through an Aerobic Digester and then dewatered either through a Belt Press to an Average Content of 15%-18% or through Drying Beds to an Average Content of 35%. Sludge is then transferred to Scottsboro Sanitary Balefill Landfill in Hollywood, Alabama.

Pace Analytical Services, LLC
3516 Greensboro Avenue
Tuscaloosa, AL 35401
(205)614-6630

ANALYTICAL RESULTS

Project: Annual sludge testing TCLP Met
Pace Project No.: 20137497

Sample: Belt Press Dewatered Sludge **Lab ID: 20137497001** Collected: 01/08/20 11:40

Results reported on a "wet-weight" basis

Parameters	Results	Units	Report Limit	DF	Qualifiers
Arsenic	ND	mg/L	0.20	1	
Barium	ND	mg/L	2.0	1	
Cadmium	ND	mg/L	0.10	1	
Chromium	ND	mg/L	0.20	1	
Lead	ND	mg/L	0.20	1	
Selenium	ND	mg/L	0.20	1	
Silver	ND	mg/L	0.20	1	
Mercury	ND	mg/L	0.00020	1	

Pace Analytical Services, LLC
3516 Greensboro Avenue
Tuscaloosa, AL 35401
(205)614-6630

ANALYTICAL RESULTS

Project: Annual Sludge TCLP Metals
Pace Project No.: 20151661

Sample: Belt Press Dewatered Sludge **Lab ID: 20151661001** Collected: 04/22/20 09:30

Results reported on a "wet-weight" basis

Parameters	Results	Units	Report Limit	DF	Qualifiers
Arsenic	ND	mg/L	0.20	1	
Barium	ND	mg/L	2.0	1	
Cadmium	ND	mg/L	0.10	1	
Chromium	ND	mg/L	0.20	1	
Lead	ND	mg/L	0.20	1	
Selenium	ND	mg/L	0.20	1	
Silver	ND	mg/L	0.20	1	
Mercury	ND	mg/L	0.00020	1	

Pace Analytical Services, LLC
3516 Greensboro Avenue
Tuscaloosa, AL 35401
(205)614-6630

ANALYTICAL RESULTS

Project: Annual sludge testing TCLP Met
Pace Project No.: 20162477

Sample: Belt Filter Press Sludge **Lab ID: 20162477001** Collected: 07/12/20 17:00

Results reported on a "wet-weight" basis

Parameters	Results	Units	Report Limit	DF	Qualifiers
Arsenic	ND	mg/L	0.20	1	
Barium	ND	mg/L	2.0	1	
Cadmium	ND	mg/L	0.10	1	
Chromium	ND	mg/L	0.20	1	
Lead	ND	mg/L	0.20	1	
Selenium	ND	mg/L	0.20	1	
Silver	ND	mg/L	0.20	1	
Mercury	ND	mg/L	0.00020	1	

Pace Analytical Services, LLC
3516 Greensboro Avenue
Tuscaloosa, AL 35401
(205)614-6630

ANALYTICAL RESULTS

Project: Annual sludge testing TCLP Met
Pace Project No.: 20174494

Sample: Belt Press Dewatered Sludge **Lab ID: 20174494001** Collected: 10/05/20 22:15

Results reported on a "wet-weight" basis

Parameters	Results	Units	Report Limit	DF	Qualifiers
Arsenic	ND	mg/L	0.20	1	
Barium	ND	mg/L	2.0	1	
Cadmium	ND	mg/L	0.10	1	
Chromium	ND	mg/L	0.20	1	
Lead	ND	mg/L	0.20	1	
Selenium	ND	mg/L	0.20	1	
Silver	ND	mg/L	0.20	1	
Mercury	ND	mg/L	0.00020	1	

REPORT OF LABORATORY ANALYSIS

paint filter. ③ If any portion of sample drains into cup after sitting 5 minutes, measure in graduated cylinder and record. ④ If any drainage occurs the sludge is deemed to contain free liquids.

Paint Filter Liquids Test

DATE	(✓ ONE) No Drainage	Drainage	ml collected	DATE	(✓ ONE) No Drainage	Drainage	ml collected
1-9-2020	✓	—	—	4-6-20	✓	—	—
1-10-20	✓	—	—	4-20-20	✓	—	—
1-10-20	✓	—	—	4-21-20	✓	—	—
1-13-20	✓	—	—	4-22-20	✓	—	—
1-16-20	✓	—	—	4-23-20	✓	—	—
1-17-20	✓	—	—	4-24-20	✓	—	—
1-22-20	✓	—	—	5-5-20	✓	—	—
1-23-20	✓	—	—	5-6-20	✓	—	—
1-27-20	✓	—	—	5-7-20	✓	—	—
1-28-20	✓	—	—	5-9-20	✓	—	—
1-29-20	✓	—	—	5-11-20	✓	—	—
1-30-20	✓	—	—	5-18-20	✓	—	—
1-31-20	✓	—	—	5-20-20	✓	—	—
2-3-20	✓	—	—	5-26-20	✓	—	—
2-4-20	✓	—	—	5-27-20	✓	—	—
2-5-20	✓	—	—	5-28-20	✓	—	—
2-7-20	✓	—	—	5-29-20	✓	—	—
2-10-20	✓	—	—	6-1-20	✓	—	—
2-18-20	✓	—	—	6-2-20	✓	—	—
3-9-20	✓	—	—	6-3-20	✓	—	—
3-17-20	✓	—	—	6-4-20	✓	—	—
3-18-20	✓	—	—	6-5-20	✓	—	—
3-19-20	✓	—	—	6-22-20	✓	—	—
3-20-20	✓	—	—	6-23-20	✓	—	—
3-23-20	✓	—	—	6-24-20	✓	—	—
3-24-20	✓	—	—	6-25-20	✓	—	—
3-25-20	✓	—	—	6-26-20	✓	—	—
3-26-20	✓	—	—	6-29-20	✓	—	—
3-31-20	✓	—	—	7-13-20	✓	—	—
4-1-20	✓	—	—	7-27-20	✓	—	—
4-2-20	✓	—	—	7-30-20	✓	—	—
4-3-20	✓	—	—	7-31-20	✓	—	—

paint Filter. ③ If any portion of sample drains into cup after sitting 5 minutes, measure in graduated cylinder and record. ④ If any drainage occurs the sludge is deemed to contain free liquids.

Paint Filter Liquids Test

DATE	No Drainage (✓)	Drainage (LINE)	ml collected	DATE	No Drainage (✓)	Drainage (LINE)	ml collected
8-3-20	✓	—	—	12-17-20	✓	—	—
8-8-20	✓	—	—	12-18-20	✓	—	—
8-9-20	✓	—	—	12-21-20	✓	—	—
9-15-20	✓	—	—	12-22-20	✓	—	—
9-25-20	✓	—	—	12-23-20	✓	—	—
9-28-20	✓	—	—	12-29-20	✓	—	—
9-29-20	✓	—	—	12-30-20	✓	—	—
9-30-20	✓	—	—				
10-1-20	✓	—	—				
10-6-20	✓	—	—				
10-7-20	✓	—	—				
10-8-20	✓	—	—				
10-9-20	✓	—	—				
10-12-20	✓	—	—				
10-21-20	✓	—	—				
10-22-20	✓	—	—				
11-2-20	✓	—	—				
11-12-20	✓	—	—				
11-13-20	✓	—	—				
11-23-20	✓	—	—				
11-24-20	✓	—	—				
11-25-20	✓	—	—				
11-30-20	✓	—	—				
12-2-20	✓	—	—				
12-3-20	✓	—	—				
12-7-20	✓	—	—				
12-8-20	✓	—	—				
12-9-20	✓	—	—				
12-10-20	✓	—	—				
12-11-20	✓	—	—				
12-15-20	✓	—	—				
12-16-20	✓	—	—				