LANCE R. LEFLEUR
DIRECTOR

KAY IVEY
GOVERNOR

Alabama Department of Environmental Management
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Montgomery, Alabama 36130-1463
(334) 271-7700 ▪ FAX (334) 271-7950

FEBRUARY 3, 2025

Edward A. Turner, General Manager
The Water Works and Sewer Board of the City of Anniston
PO Box 2268
Anniston, AL 36202

RE: Revised Draft Permit
NPDES Permit No. AL0024520
McClellan WWTP
Calhoun County, Alabama

Dear Mr. Turner:

Transmitted herein is a revised 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.H of your permit requires that you develop, implement, and maintain a Sanitary Sewer Overflow Response Plan.

The Alabama Department of Environmental Management encourages you to voluntarily consider pollution prevention practices and alternatives at your facility. Pollution Prevention may assist you in complying with effluent limitations, and possibly reduce or eliminate monitoring requirements.

Should you have any questions, please contact the undersigned by email michael.simmons@adem.alabama.gov or by phone at (334) 274-4220.

Sincerely,

Michael N. Simmons
Municipal Section
Water Division

Enclosure

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

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

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

Mobile Branch
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)

Alabama Department of Environmental Management

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: THE WATER WORKS AND SEWER BOARD OF THE CITY OF ANNISTON
PO BOX 2268
ANNISTON, AL 36202

FACILITY LOCATION: MCCLELLAN WWTP (2.2 MGD)
6112 MCCLELLAN BOULEVARD
ANNISTON, ALABAMA
CALHOUN COUNTY

PERMIT NUMBER: AL0024520

RECEIVING WATERS: CANE CREEK

In accordance with and subject to the provisions of the Federal Water Pollution Control Act, as amended, 33 U.S.C. §§1251-1388 (the "FWPCA"), the Alabama Water Pollution Control Act, as amended, ***Code of Alabama 1975****, §§ 22-22-1 to 22-22-14 (the "AWPCA"), the Alabama Environmental Management Act, as amended,* ***Code of Alabama 1975****, §§22-22A-1 to 22-22A-17, and rules and regulations adopted thereunder, and subject further to the terms and conditions set forth in this permit, the Permittee is hereby authorized to discharge into the above-named receiving waters.*

ISSUANCE DATE:

EFFECTIVE DATE:

EXPIRATION DATE:

Draft

Alabama Department of Environmental Management

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PART I: DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS

A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS

1. DSN 0012: Municipal Effluent Monitoring

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	*****	mg/l	3X Weekly test	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	8.5 Maximum Daily	S.U.	3X Weekly test	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	550 Monthly Average	825 Weekly Average	lbs/day	*****	30.0 Monthly Average	45.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	18.3 Monthly Average	27.5 Weekly Average	lbs/day	*****	1.0 Monthly Average	1.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	45.8 Monthly Average	68.8 Weekly Average	lbs/day	*****	2.5 Monthly Average	3.75 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
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
Copper Total Recoverable (01119) Effluent Gross Value	*****	*****	*****	*****	22.9 Monthly Average	31.2 Maximum Daily	ug/l	Monthly	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 (May - November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)

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

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

(5) See Part IV.G for Peracetic Acid (PAA). Monitoring for PAA is applicable if Peracetic Acid is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter "*9" on the monthly DMR.

1. DSN 0012 (continued): Municipal Effluent Monitoring

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	*****	*****	*****	*****	0.015 Monthly Average	0.026 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	298 Maximum Daily	col/100mL	3X Weekly test	Grab	ECS
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	548 Monthly Average	2507 Maximum Daily	col/100mL	3X Weekly test	Grab	ECW
Peracetic Acid (51674) See Note (5) Effluent Gross Value	*****	*****	*****	*****	*****	1.0 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	367 Monthly Average	550 Weekly Average	lbs/day	*****	20.0 Monthly Average	30.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	220 Monthly Average	330 Weekly Average	lbs/day	*****	12.0 Monthly Average	18.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent 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 (May - November)
W = Winter (December - April)

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

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

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

(5) See Part IV.G for Peracetic Acid (PAA). Monitoring for PAA is applicable if Peracetic Acid is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter "*9" on the monthly DMR.

2. DSN 001Q: Quarterly Mercury Monitoring

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Mercury Total Recoverable (71901) See Notes (3,4) Effluent Gross Value	*****	*****	*****	*****	0.016 Monthly Average	3.03 Maximum Daily	ug/l	Quarterly	Grab	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.F

(2) S = Summer (May - November)
W = Winter (December - April)

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

(3) EPA Method 1631E/1669 or an alternative method approved by the Department shall be used for the testing of Mercury

3. DSN 001T: Toxicity Monitoring

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Toxicity, Ceriodaphnia Chronic (61426) See Note (3) Effluent Gross Value	*****	0 Single Sample	pass=0;fail=1	*****	*****	*****	*****	See Permit Requirements	24-Hr Composite	Feb, May, Aug, Nov
Toxicity, Pimephales Chronic (61428) See Note (3) Effluent Gross Value	*****	0 Single Sample	pass=0;fail=1	*****	*****	*****	*****	See Permit Requirements	24-Hr Composite	Feb, May, Aug, Nov

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

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

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

(3) See Parts IV.B.2.d and e (Toxicity testing without PAA utilization and with PAA utilization). Toxicity testing shall be required quarterly after initial utilization of PAA as stated in Part IV.B.2.e. Prior to initial utilization of PAA, toxicity testing shall be required annually as stated in Part IV.B.2.d of the Permit. If monitoring is not applicable during a quarterly period, enter "*9" on the DMRs when toxicity testing is not required. Please indicate on the toxicity test reports the method of disinfection utilized during the test.

4. DSN 002S: Stormwater Monitoring

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 002S, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	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	Grab	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

(2) See Permit Requirements for Stormwater Monitoring in Part IV.F.

B. DISCHARGE MONITORING AND RECORD KEEPING REQUIREMENTS

1. Representative Sampling

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

2. Measurement Frequency

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

a. Seven days per week shall mean daily.

b. Five days per week shall mean any five days of discharge during a calendar weekly period of Sunday through Saturday.

c. Three days per week shall mean any three days of discharge during a calendar week.

d. Two days per week shall mean any two days of discharge during a calendar week

e. One day per week shall mean any day of discharge during a calendar week.

f. Two days per month shall mean any two days of discharge during the month that are no less than seven days apart. However, if discharges occur only during one seven-day period in a month, then two days per month shall mean any two days of discharge during that seven day period.

g. One day per month shall mean any day of discharge during the calendar month.

h. Quarterly shall mean any day of discharge during each calendar quarter.

i. The Permittee may increase the frequency of sampling, listed in Provisions I.B.2.a through I.B.2.h; however, all sampling results are to be reported to the Department.

3. Test Procedures

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

a. For parameters with an EPA established Minimum Level (ML), report the measured value if the analytical result is at or above the ML and report "0" or "*B" for values below the ML. Test procedures for the analysis of pollutants shall conform to 40 CFR Part 136 and guidelines published pursuant to Section 304(h) of the FWPCA, 33 U.S.C. Section 1314(h). If more than one method for analysis of a substance is approved for use, a method having a minimum level lower than the permit limit shall be used. If the minimum level of all methods is higher than the permit limit, the method having the lowest minimum level shall be used and a report of less than the minimum level shall be reported as zero and will constitute compliance, however should EPA approve a method with a lower minimum level during the term of this permit the permittee shall use the newly approved method.

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

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

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

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

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

4. **Recording of Results**

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

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

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

   c. The dates and times the analyses were performed;

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

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

   f. The results of all required analyses.

5. Records Retention and Production

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

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

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

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

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

7. **Monitoring Equipment and Instrumentation**

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

C. DISCHARGE REPORTING REQUIREMENTS

1. **Reporting of Monitoring Requirements**

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

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

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

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

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

b. The permittee shall submit discharge monitoring reports (DMRs) in accordance with the following schedule:

(1) **REPORTS OF MORE FREQUENTLY THAN MONTHLY AND MONTHLY TESTING** shall be submitted on a monthly basis. The first report is due on the 28th day of the month following the month the permit becomes effective. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.

(2) **REPORTS OF QUARTERLY TESTING** shall be submitted on a quarterly basis. The first report is due on the 28th day of the month following the first complete calendar quarter the permit becomes effective. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.

(3) **REPORTS OF SEMIANNUAL TESTING** shall be submitted on a semiannual basis. The reports are due on the 28th day of JANUARY and the 28th day of JULY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.

(4) **REPORTS OF ANNUAL TESTING** shall be submitted on an annual basis. Unless specified elsewhere in the permit, the first report is due on the 28th day of JANUARY. The reports shall be submitted so that they are received by the Department no later than the 28th day of the month following the reporting period, unless otherwise directed by the Department.

c. Except as allowed by Provision I.C.1.c.(1) or (2), the permittee shall submit all Discharge Monitoring Reports (DMRs) required by Provision I.C.1.b. electronically.

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

If the Department's electronic system is down on the 28th day of the month in which the DMR is due or is down for an extended period of time, as determined by the Department, when a DMR is required to be submitted, the permittee may submit the data in an alternate manner and format acceptable to the Department. Preapproved alternate acceptable methods include faxing, e-mailing, mailing, or hand-delivery of data such that they are received by the required reporting date. Within five calendar days of the Department's electronic system resuming operation, the permittee shall enter the data into the Department's electronic system, unless an alternate timeframe is approved by the Department. A comment should be included on the electronic DMR submittal verifying the original submittal date (date of the fax, copy of dated e-mail, or hand-delivery stamped date), if applicable.

(2) The permittee may submit a request to the Department for a temporary electronic reporting waiver for DMR submittals. The waiver request should include the permit number; permittee name; facility/site name; facility address; name, address, and contact information for the responsible official or duly authorized representative; a detailed statement regarding the basis for requesting such a waiver; and the duration for which the waiver is requested. Approved electronic reporting waivers are not transferrable.

(3) A permittee with an approved electronic reporting waiver for DMRs may submit hard copy DMRs for the period that the approved electronic reporting waiver request is effective. The permittee shall submit the Department-approved DMR forms to the address listed in Provision I.C.1.e.

(4) If a permittee is allowed to submit a hard copy DMR, the DMR must be legible and bear an original signature. Photo and electronic copies of the signature are not acceptable and shall not satisfy the reporting requirements of this permit.

(5) If the permittee, using approved analytical methods as specified in Provision I.B.2, monitors any discharge from a point source for a limited substance identified in Provision I.A. of this permit more frequently than required by this permit, the results of such monitoring shall be included in the calculation and reporting of values on the DMR and the increased frequency shall be indicated on the DMR.

(6) In the event no discharge from a point source identified in Provision I.A. of this permit and described more fully in the permittee's application occurs during a monitoring period, the permittee shall report "No Discharge" for such period on the appropriate DMR.

d. All reports and forms required to be submitted by this permit, the AWPCA and the Department's Rules and Regulations, shall be electronically signed (or, if allowed by the Department, traditionally signed) by a "responsible official" of the permittee as defined in ADEM Administrative Code Rule 335-6-6-.09 or a "duly authorized representative" of such official as defined in ADEM Administrative Code Rule 335-6-6-.09 and shall bear the following certification:

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

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

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

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

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

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

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

Certified and Registered Mail shall be addressed to:

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

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

2. **Noncompliance Notifications and Reports**

a. The Permittee shall notify the Department if, for any reason, the Permittee's discharge:

(1) Does not comply with any daily minimum or maximum discharge limitation for an effluent characteristic specified in Provision I.A. of this permit which is denoted by an "(X)";

(2) Potentially threatens human health or welfare;

(3) Threatens fish or aquatic life;

(4) Causes an in-stream water quality criterion to be exceeded;

(5) Does not comply with an applicable toxic pollutant effluent standard or prohibition established under Section 307(a) of the FWPCA, 33 U.S.C. Section 1317(a);

(6) Contains a quantity of a hazardous substance that may be harmful to public health or welfare under Section 311(b)(4) of the FWPCA, 33 U.S.C. Section 1321(b)(4);

(7) Exceeds any discharge limitation for an effluent parameter listed in Part I.A. as a result of an unanticipated bypass or upset; or

(8) Is an unpermitted direct or indirect discharge of a pollutant to a water of the state. (Note that unpermitted discharges properly reported to the Department under any other requirement are not required to be reported under this provision.)

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

b. If, for any reason, the Permittee's discharge does not comply with any limitation of this permit, then the Permittee shall submit a written report to the Director or Designee, as provided in Provision I.C.2.c below. This report must be submitted with the next Discharge Monitoring Report required to be submitted by Provision I.C.1 of this permit after becoming aware of the occurrence of such noncompliance.

c. Except for notifications and reports of notifiable SSOs which shall be submitted in accordance with the applicable Provisions of this permit, the Permittee shall submit the reports required under Provisions I.C.2.a. and b. to the Director or Designee on ADEM Form 421, available on the Department's website (http://www.adem.state.al.us/DeptForms/Form421.pdf). The completed Form must document the following information:

(1) A description of the discharge and cause of noncompliance;

(2) The period of noncompliance, including exact dates, times, and duration of the noncompliance. If the noncompliance is not corrected by the due date of the written report, then the Permittee shall provide an estimated date by which the noncompliance will be corrected; and

(3) A description of the steps taken by the Permittee and the steps planned to be taken by the Permittee to reduce or eliminate the noncompliant discharge and to prevent its recurrence.

d. Immediate notification

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

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

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

f. The Permittee shall maintain a record of all known wastewater discharge points that are not authorized as permitted outfalls, including but not limited to SSOs. The Permittee shall include this record in its **Municipal Water Pollution Prevention (MWPP) Annual Reports**, which shall be submitted to the Department each year by May 31st for the prior calendar year period beginning January 1st and ending December 31st. The MWPP Annual Reports shall contain a list of all known wastewater discharge points that are not authorized as permitted outfalls and any discharges that occur prior to the headworks of the wastewater treatment plant covered by this permit. The Permittee shall also provide in the MWPP Annual Reports a list of any discharges reported during the applicable time period in accordance with Provision I.C.2.a. The Permittee shall include in its MWPP Annual Reports the following information for each known unpermitted discharge that occurred:

(1) The cause of the discharge;

(2) Date, duration and volume of discharge (estimate if unknown);

(3) Description of the source (e.g., manhole, lift station);

(4) Location of the discharge, by latitude and longitude (or other appropriate method as approved by the Department);

(5) The ultimate destination of the flow (e.g., surface waterbody, municipal separate storm sewer to surface waterbody). Location should be shown on a USGS quad sheet or copy thereof; and

(6) Corrective actions taken and/or planned to eliminate future discharges.

D. OTHER REPORTING AND NOTIFICATION REQUIREMENTS

1. **Anticipated Noncompliance**

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

2. **Termination of Discharge**

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

3. **Updating Information**

a. The permittee shall inform the Director of any change in the permittee's mailing address or telephone number or in the permittee's designation of a facility contact or office having the authority and responsibility to prevent and abate violations of the AWPCA, the Department's Rules and the terms and conditions of this permit, in writing, no later than ten (10) days after such change. Upon request of the Director or his designee, the permittee shall furnish the Director with an update of any information provided in the permit application.

b. If the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Director, it shall promptly submit such facts or information with a written explanation for the mistake and/or omission.

4. **Duty to Provide Information**

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

E. SCHEDULE OF COMPLIANCE

1. **Compliance with discharge limits**

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

   COMPLIANCE SHALL BE ATTAINED ON THE EFFECTIVE DATE OF THIS PERMIT

2. **Schedule**

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

PART II: OTHER REQUIREMENTS, RESPONSIBILITIES, AND DUTIES

A. OPERATIONAL AND MANAGEMENT REQUIREMENTS

1. **Facilities Operation and Maintenance**

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

2. **Best Management Practices**

a. Dilution water shall not be added to achieve compliance with discharge limitations except when the Director or his designee has granted prior written authorization for dilution to meet water quality requirements.

b. The permittee shall prepare, implement, and maintain a Spill Prevention, Control and Countermeasures (SPCC) Plan in accordance with 40 C.F.R. Section 112 if required thereby.

c. The permittee shall prepare, submit for approval and implement a Best Management Practices (BMP) Plan for containment of any or all process liquids or solids, in a manner such that these materials do not present a significant potential for discharge, if so required by the Director or his designee. When submitted and approved, the BMP Plan shall become a part of this permit and all requirements of the BMP Plan shall become requirements of this permit.

3. **Certified Operator**

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

B. OTHER RESPONSIBILITIES

1. **Duty to Mitigate Adverse Impacts**

The permittee shall promptly take all reasonable steps to mitigate and minimize or prevent any adverse impact on human health or the environment resulting from noncompliance with any discharge limitation specified in Provision I. A. of this permit, including such accelerated or additional monitoring of the discharge and/or the receiving waterbody as necessary to determine the nature and impact of the noncomplying discharge.

2. **Right of Entry and Inspection**

a. The permittee shall allow the Director, or an authorized representative, upon the presentation of proper credentials and other documents as may be required by law to:

(1) Enter upon the permittee's premises where a regulated facility or activity or point source is located or conducted, or where records must be kept under the conditions of the permit;

(2) Have access to and copy, at reasonable times, any records that must be kept under the conditions of the permits;

(3) Inspect any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under the permit; and

(4) Sample or monitor, for the purposes of assuring permit compliance or as otherwise authorized by the AWPCA, any substances or parameters at any location.

C. BYPASS AND UPSET

1. **Bypass**

a. Any bypass is prohibited except as provided in b. and c. below:

b. A bypass is not prohibited if:

(1) It does not cause any discharge limitation specified in Provision I. A. of this permit to be exceeded;

(2) It enters the same receiving stream as the permitted outfall; and

(3) It is necessary for essential maintenance of a treatment or control facility or system to assure efficient operation of such facility or system.

c. A bypass is not prohibited and need not meet the discharge limitations specified in Provision I. A. of this permit if:

(1) It is unavoidable to prevent loss of life, personal injury, or severe property damage;

(2) There are no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime (this condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance); and

(3) The permittee submits a written request for authorization to bypass to the Director at least ten (10) days prior to the anticipated bypass (if possible), the permittee is granted such authorization, and the permittee complies with any conditions imposed by the Director to minimize any adverse impact on human health or the environment resulting from the bypass.

d. The permittee has the burden of establishing that each of the conditions of Provision II. C. 1. b. or c. have been met to qualify for an exception to the general prohibition against bypassing contained in a. and an exemption, where applicable, from the discharge limitations specified in Provision I. A. of this permit.

2. **Upset**

a. A discharge which results from an upset need not meet the discharge limitations specified in Provision I. A. of this permit if:

(1) No later than 24-hours after becoming aware of the occurrence of the upset, the Permittee orally reports the occurrence and circumstances of the upset to the Director or his designee; and

(2) No later than five (5) days after becoming aware of the occurrence of the upset, the Permittee furnishes the Director with evidence, including properly signed, contemporaneous operating logs, or other relevant evidence, demonstrating that:

(i) An upset occurred;

(ii) The Permittee can identify the specific cause(s) of the upset;

(iii) The Permittee's facility was being properly operated at the time of the upset; and

(iv) The Permittee promptly took all reasonable steps to minimize any adverse impact on human health or the environment resulting from the upset.

b. The permittee has the burden of establishing that each of the conditions of Provision II. C. 2. a. of this permit have been met to qualify for an exemption from the discharge limitations specified in Provision I. A. of this permit.

D. DUTY TO COMPLY WITH PERMIT, RULES, AND STATUTES

1. **Duty to Comply**

a. The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of the AWPCA and the FWPCA and is grounds for enforcement action, permit termination, revocation and reissuance, suspension, modification, or denial of a permit renewal application.

b. The necessity to halt or reduce production or other activities in order to maintain compliance with the conditions of the permit shall not be a defense for a permittee in an enforcement action.

c. The discharge of a pollutant from a source not specifically identified in the permit application for this permit and not specifically included in the description of an outfall in this permit is not authorized and shall constitute noncompliance with this permit.

d. The permittee shall take all reasonable steps, including cessation of production or other activities, to minimize or prevent any violation of this permit or to minimize or prevent any adverse impact of any permit violation.

e. Nothing in this permit shall be construed to preclude or negate the Permittee's responsibility to apply for, obtain, or comply with other Federal, State, or Local Government permits, certifications,or licenses or to preclude from obtaining other federal, state, or local approvals, including those applicable to other ADEM programs and regulations.

2. **Removed Substances**

Solids, sludges, filter backwash, or any other pollutant or other waste removed in the course of treatment or control of wastewaters shall be disposed of in a manner that complies with all applicable Department Rules.

3. **Loss or Failure of Treatment Facilities**

Upon the loss or failure of any treatment facilities, including but not limited to the loss or failure of the primary source of power of the treatment facility, the permittee shall, where necessary to maintain compliance with the discharge limitations specified in Provision I. A. of this permit, or any other terms or conditions of this permit, cease, reduce, or otherwise control production and/or all discharges until treatment is restored. If control of discharge during loss or failure of the primary source of power is to be accomplished by means of alternate power sources, standby generators, or retention of inadequately treated effluent, the permittee must furnish to the Director within six months a certification that such control mechanisms have been installed.

4. **Compliance with Statutes and Rules**

a. This permit has been issued under ADEM Administrative Code, Chapter 335-6-6. All provisions of this chapter, that are applicable to this permit, are hereby made a part of this permit. A copy of this chapter may be obtained for a small charge from the Office of General Counsel, Alabama Department of Environmental Management, 1400 Coliseum Boulevard Montgomery, Alabama 36110-2059.

b. This permit does not authorize the noncompliance with or violation of any Laws of the State of Alabama or the United States of America or any regulations or rules implementing such laws, FWPCA, 33 U.S.C. Section 1319, and Code of Alabama 1975, Section 22-22-14.

E. PERMIT TRANSFER, MODIFICATION, SUSPENSION, REVOCATION, AND REISSUANCE

1. **Duty to Reapply or Notify of Intent to Cease Discharge**

a. If the permittee intends to continue to discharge beyond the expiration date of this permit, the permittee shall file a complete permit application for reissuance of this permit at least 180 days prior to its expiration. If the permittee does not intend to continue discharge beyond the expiration of this permit, the permittee shall submit written notification of this intent which shall be signed by an individual meeting the signatory requirements for a permit application as set forth in ADEM Administrative Code Rule 335-6-6-.09.

b. Failure of the permittee to apply for reissuance at least 180 days prior to permit expiration will void the automatic continuation of the expiring permit provided by ADEM Administrative Code Rule 335-6-6-.06 and should the permit not be reissued for any reason any discharge after expiration of this permit will be an unpermitted discharge.

2. **Change in Discharge**

Prior to any facility expansion, process modification or any significant change in the method of operation of the permittee's treatment works, the permittee shall provide the Director with information concerning the planned expansion, modification or change. The permittee shall apply for a permit modification at least 180 days prior to any facility expansion, process modification, significant change in the method of operation of the permittee's treatment works, or other actions that could result in the discharge of additional pollutants or increase the quantity of a discharged pollutant or could result in an additional discharge point. This condition applies to pollutants that are or that are not subject to discharge limitations in this permit. No new or increased discharge may begin until the Director has authorized it by issuance of a permit modification or a reissued permit.

3. **Transfer of Permit**

This permit may not be transferred or the name of the permittee changed without notice to the Director and subsequent modification or revocation and reissuance of the permit to identify the new permittee and to incorporate any other changes as may be required under the FWPCA or AWPCA. In the case of a change in name, ownership or control of the permittee's premises only, a request for permit modification in a format acceptable to the Director is required at least 30 days prior to the change. In the case of a change in name, ownership, or control of the permittee's premises accompanied by a change or proposed change in effluent characteristics, a complete permit application is required to

be submitted to the Director at least 180 days prior to the change. Whenever the Director is notified of a change in name, ownership, or control, he may decide not to modify the existing permit and require the submission of a new permit application.

4. **Permit Modification and Revocation**

a. This permit may be modified or revoked and reissued, in whole or in part, during its term for cause, including but not limited to, the following:

(1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to revoke and reissue this permit instead of terminating the permit;

(2) If a request to transfer this permit has been received, the Director may decide to revoke and reissue or to modify the permit; or

(3) If modification or revocation and reissuance is requested by the permittee and cause exists, the Director may grant the request.

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

(1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to modify this permit instead of terminating this permit;

(2) There are material and substantial alterations or additions to the facility or activity generating wastewater which occurred after permit issuance which justify the application of permit conditions that are different or absent in the existing permit;

(3) The Director has received new information that was not available at the time of permit issuance and that would have justified the application of different permit conditions at the time of issuance;

(4) A new or revised requirement(s) of any applicable standard or limitation is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA;

(5) Errors in calculation of discharge limitations or typographical or clerical errors were made;

(6) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, when the standards or regulations on which the permit was based have been changed by promulgation of amended standards or regulations or by judicial decision after the permit was issued;

(7) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, permits may be modified to change compliance schedules;

(8) To agree with a granted variance under 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 FOR CHRONIC TOXICITY

1. Chronic Toxicity Test

a. The permittee shall perform short-term chronic toxicity tests on the wastewater at Outfall 0012.

b. The samples shall be diluted using appropriate control water to the Instream Waste Concentration (IWC) which is **74 percent** effluent. The IWC is the actual concentration of effluent, after mixing, in the receiving stream during a 7-day, 10-year low flow period.

c. Any test result that shows a statistically significant reduction in survival, growth, or reproduction between the control and test samples at the 95% confidence level indicates chronic toxicity and shall constitute noncompliance with this permit.

2. General Test Requirements

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

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

b. Test results shall be deemed unacceptable and the Permittee shall rerun the tests as soon as practical within the monitoring period for the following:

(1) For testing with P. promelas: effluent toxicity tests with control survival of less than 80% or if dry weight per surviving control organism is less than 0.25 mg;

(2) For testing with C. dubia: if the number of young per surviving control organism is less than 15 or if less than 60% of surviving control females produce three broods; or

(3) If the other requirements of the EPA Test Procedure are not met.

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

d. Prior to initial use of Peracetic Acid (PAA), toxicity tests shall be conducted in the month of **AUGUST**. Should results from the annual toxicity test indicate that Outfall 001T exhibits chronic toxicity, then the Permittee must conduct the follow-up testing described in Part IV.B.4.a. In addition, the Permittee may then also be required to conduct toxicity testing in the months of **FEBRUARY**, **MAY**, **AUGUST**, and **NOVEMBER**.

e. **Within 30 days from initial utilization of PAA the Permittee must perform a toxicity test and submit the report to the Department, as required by Provision IV.B. The Permittee also must perform a toxicity test and submit the report to the Department, as required by Provision IV.B when PAA is used intermittently.** Toxicity tests shall be conducted quarterly in the months of **FEBRUARY, MAY, AUGUST, and NOVEMBER.** Should results from the quarterly toxicity tests indicate that Outfall 001T exhibits chronic toxicity, then the Permittee must conduct the follow-up testing described in Parts IV.B.4.a and b. Should results from four consecutive testing periods indicate that Outfall 001T does not exhibit chronic toxicity while utilizing PAA, the Permittee may provide a written request to reduce the testing frequency. **The Permittee may also request reduced toxicity testing frequency if PAA usage is not utilized for an extended period of time. Any reduction in test frequency must be approved by the Department in writing and shall be no less than frequent than annually.**

3. **Reporting Requirements**

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

b. Biomonitoring test results obtained during each monitoring period shall be summarized and reported using the appropriate Discharge Monitoring Report (DMR) form approved by the Department. In accordance with Section 2 of this part, an effluent toxicity report containing the information in Sections 2 and 6 shall be included with the DMR. The test results must be submitted to the Department no later than 28 days after the month that tests were performed.

4. **Additional Testing Requirements**

a. If chronic toxicity is indicated (i.e., noncompliance with permit limit), then the Permittee must perform two additional valid chronic toxicity tests in accordance with these procedures to determine the extent and duration of the toxic condition. The toxicity tests shall run consecutively beginning on the first calendar week following the date that the Permittee became aware of the permit noncompliance. The results of these follow-up tests shall be submitted to the Department no later than 28 days following the month the tests were performed.

b. If the additional chronic toxicity tests are performed when PAA is being utilized, then the Permittee must analyze the effluent test solution each day immediately prior to test initiation or daily test renewal for hydrogen peroxide when the appropriately diluted composite samples are added. **The concentrations of hydrogen peroxide shall be reported in the toxicity test report.**

c. After evaluation of the results of the follow-up tests, the Department will determine if additional action is appropriate and may require additional testing and/or toxicity reduction measures. The permittee may be required to perform a Toxicity Identification Evaluation (TIE) and/or a Toxicity Reduction Evaluation (TRE). The TIE/TRE shall be performed in accordance with the most recent protocols and guidance outlined by EPA (e.g., EPA/600/2-88/062, EPA/600/R-92/080, EPA/600/R-91-003, EPA/600/R-92/081, EPA/833/B-99/022, and/or EPA/600/6-91/005F)

5. **Test Methods**

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

6. **Effluent Toxicity Testing Reports**

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

a. Introduction

(1) Facility name, location and county

(2) Permit number

(3) Toxicity testing requirements of permit

(4) Name of receiving water body

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

(i) Name of firm

(ii) Telephone number

(iii) Address

(6) Objective of test

b. Plant Operations

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

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

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

c. Source of Effluent and Dilution Water

(1) Effluent samples

(2) Sampling point

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

(4) Sample collection method

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

(6) Lapsed time from sample collection to delivery

(7) Lapsed time from sample collection to test initiation

(8) Sample temperature when received at the laboratory

(9) Dilution Water

(10) Source

(11) Collection/preparation date(s) and time(s)

(12) Pretreatment (if applicable)

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

d. Test Conditions

(1) Toxicity test method utilized

(2) End point(s) of test

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

(4) Date and time test started

(5) Date and time test terminated

(6) Type and volume of test chambers

(7) Volume of solution per chamber

(8) Number of organisms per test chamber

(9) Number of replicate test chambers per treatment

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

(11) Specify if aeration was needed

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

(13) Specify if (and how) pH control measures were implemented

(14) Light intensity (mean)

e. Test Organisms

(1) Scientific name

(2) Life stage and age

(3) Source

(4) Disease(s) treatment (if applicable)

f. Quality Assurance

(1) Reference toxicant utilized and source

(2) Date and time of most recent chronic reference toxicant test(s), raw data, and current control chart(s). (The most recent chronic reference toxicant test shall be conducted within 30 days of the routine.)

(3) Dilution water utilized in reference toxicant test

(4) Results of reference toxicant test(s) (NOEC, IC25, etc.); report concentration-response relationship and evaluate test sensitivity

(5) Physical and chemical methods utilized

g. Results

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

(2) Provide table of endpoints: NOECs, IC25s, PASS/FAIL, etc. (as required in the applicable NPDES permit)

(3) Indicate statistical methods used to calculate endpoints

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

(5) Results of test(s) (NOEC, IC25, PASS/FAIL, etc.), report concentration-response relationship (definitive test only), report percent minimum significant difference (PMSD) calculated for sublethal endpoints determined by hypothesis testing.

h. Conclusions and Recommendations

(1) Relationship between test endpoints and permit limits

(2) Actions to be taken

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

C. TOTAL RESIDUAL CHLORINE (TRC) REQUIREMENTS

1. If chlorine is not utilized for disinfection purposes, TRC monitoring under Part I of this Permit is not required. If TRC monitoring is not required (conditional monitoring), "*9" should be reported on the DMR forms.
2. Testing for TRC shall be conducted according to either the amperometric titration method or the DPD colorimetric method as specified in Section 408(C) or (E), Standards Methods for the Examination of Water and Wastewater, 18th edition. If 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. PERACETIC ACID (PAA) REQUIREMENTS

1. The Permittee shall monitor PAA daily, but not required to exceed three days per week.

2. This permit contains a maximum allowable PAA level in the effluent. The Permittee is responsible for determining the minimum PAA level needed in the contact chamber to comply with E.coli limits.

3. The sample collection point for effluent PAA shall be at a point downstream of the contact chamber and shall be representative of the discharge.

4. Within 45 days of the effective date of this reissuance, the Permittee shall investigate and submit to the Department the PAA disinfection results in regards to neutralizing infectious agents, particularly viruses, as the discharge is to a waterbody that carries a Fish and Wildlfe classification for incidental water contact and whole body water-contact (ADEM Administrative Code, Rule 335-6-10-.09).

H. 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.

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

FACT SHEET

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

Date Prepared: January 30, 2025 **By:** Michael Simmons

NPDES Permit No. AL0024520

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

   The Water Works and Sewer Board of the City of Anniston
   PO Box 2268
   Anniston, AL 36202

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

   McClellan WWTP
   6112 McClellan Boulevard
   Anniston, AL 36206

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
0012	Cane Creek	Fish and Wildlife
002S	Cane Creek	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:

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

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

b. Public Hearing

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

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

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: **AL0024520**

Date: May 2, 2024
Revision: August 22, 2024
October 17, 2024
January 30, 2025

Permit Applicant: The Water Works and Sewer Board of the City of Anniston
PO Box 2268
Anniston, AL 36202

Location: **McClellan WWTP**
6112 McClellan Boulevard
Anniston, AL 36206

Draft Permit is:

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

Basis for Limitations:

Water Quality Model:	$CBOD_5$, DO, NH_3-N
Reissuance with no modification:	$CBOD_5$, $CBOD_5$ % Removal, DO, E. Coli, NH_3-N, pH, Total Recoverable Copper, TRC, TSS, TSS % Removal
Instream calculation at 7Q10:	74%
Toxicity based:	TRC
Secondary Treatment Levels:	$CBOD_5$ % Removal, TSS, TSS % Removal
Other (described below):	E. Coli, Peracetic Acid, pH, Total Recoverable Copper, Mercury

Design Flow in Million Gallons per Day: 2.2 MGD

Major: Yes

Description of Discharge:

Feature ID	Description	Receiving Water	WBC	303(d)	TMDL
001	Municipal Effluent Monitoring	Cane Creek	Fish and Wildlife	Yes	No
002S	Stormwater Monitoring	Cane Creek	Fish and Wildlife	Yes	No

Discussion:

This is a permit reissuance due to expiration. Limits for Five Day Carbonaceous Biochemical Oxygen Demand ($CBOD_5$), Dissolved Oxygen (DO), and Total Ammonia-Nitrogen (NH_3-N) were developed based on a Waste Load Allocation (WLA) model that was completed by ADEM's Water Quality Branch (WQB) on July 1, 2022. The monthly average limits for $CBOD_5$ summer (May - November) and winter (December - April) are 12.0 mg/L and 20.0 mg/L, respectively. The monthly average limits for NH_3-N summer (May - November) and winter (December - April) are 1.0 mg/L and 2.5 mg/L, respectively. The daily minimum DO limit is 6.0 mg/L.

The pH daily minimum and daily maximum limits of 6.0 and 8.5 S.U, respectively, were developed to be supportive of the water-use classification of the receiving stream. The Total Residual Chlorine (TRC) limits of 0.011 mg/L (monthly average) and 0.019 mg/L (daily maximum) are based on EPA's recommended water quality values and on the current Toxicity Rationale, which considers the available dilution in the receiving stream. In accordance with a letter dated August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental

Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes. Monitoring for TRC is only applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter "*9" on the monthly DMR.

The Permittee has requested that Peracetic Acid (PAA) be included as a method of disinfection in the Permit. The PAA limit of 1.0 mg/L (daily maximum) is consistent with other Permit limits. Monitoring for PAA is only applicable if peracetic acid is utilized for disinfection purposes. Monitoring for PAA is required three days per week.

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

The Total Suspended Solids (TSS) and TSS % removal limits of 30.0 mg/L monthly average and 85.0%, respectively, are based on the requirements of 40 CFR part 133.102 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.

The Municipal Section, in consultation with the Department's Water Quality Branch, has conducted a narrative nutrient reasonable potential analysis. Based on a review of the facility's current levels of nutrients in the discharge and current assessments of the available information, the Permittee is required to monitor and report effluent test results for Total Kjeldahl Nitrogen (TKN), Nitrite plus Nitrate (NO2+NO3), 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 additional nutrient limits on this discharge.

Storm water runoff monitoring is being imposed by this permit based on 40 CFR Part 122. The outfall for storm water runoff monitoring is 002S. In this reissuance, the Permittee indicated that construction at the plant eliminated the previous 003S, 004S, 005S, and 006S stormwater outfalls. 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.

Because this is a major facility (design capacity greater than 1 MGD) treating municipal wastewater, chronic toxicity testing with two species (Ceriodaphnia and Pimephales) is being imposed on this permit. Toxicity testing is imposed for both survival and life-cycle impairment (i.e., growth and reproduction). If water has been withdrawn from Cane Creek for irrigation purposes since the last toxicity test was conducted, and any instream flow was below 1.170 cfs, the toxicity test shall be performed using undiluted effluent. If water has been withdrawn from Cane Creek for irrigation purposes since the last toxicity test was conducted and all instream flow was at or above 1.170 cfs, the toxicity test shall be diluted using appropriate control water to the Instream Waste Concentration (IWC) of 75 percent effluent. If the toxicity tests of the effluent from Outfall 001T indicate chronic toxicity, then toxicity tests may be required to be conducted during the months of February, May, August and November. However, the Permittee will be required to conduct chronic toxicity tests on a quarterly basis when utilizing PAA. If monitoring is not applicable during the quarterly monitoring period enter "*9" on the DMRs when toxicity testing is not required.

The Department completed a numerical reasonable potential analysis (RPA) of the discharge based on the application data and DMR data. The Department also considers background data upstream of the point of discharge in the RPA; however, there is no available background data for this discharge. The RPA indicates whether pollutants in treated effluent have potential to contribute to excursions of Alabama's in-stream water quality standards. Based on the analytical data submitted by the Permittee, it appears reasonable potential may exist to cause an in-stream water quality criteria exceedance for Copper and Mercury. The limits for Cu are 22.9 µg/L (monthly average) and 31.2 µg/L (maximum daily). There was no current background data for hardness for the station CNCC-2. The limits for Cu will remain from the last reissuance to maintain the current water quality standards in the receiving stream. Since this facility does not accept waste from any significant industrial dischargers that are expected to contribute mercury, this Permit shall require continued quarterly monitoring for Total Recoverable Mercury (Hg) and the establishment and implementation of a Mercury Minimization Plan as stated in Part IV.G of the Permit.

The monitoring frequency for $CBOD_5$, DO, E. coli, NH_3-N, PAA, pH, TRC and TSS is three times per week. The monitoring frequency for nutrient-related parameters NO_2+NO_3-N, TKN, and TP is once per month. $CBOD_5$ % removal and TSS % removal and are to be calculated once per month. Total Recoverable Copper is to be monitored monthly. Flow is to be continuously monitored daily.

Cane Creek is a Tier I stream and is listed on the most recent 303(d) list for pathogens (E. Coli). The discharge from this facility should not be causing the impairment since the E. Coli limits are consistent with the E. Coli WQ criteria for the Fish and Wildlife classification for Cane Creek. Development and implementation of a Storm Water Pollution Prevention Plan (SWPP) should minimize the pollutants in the stormwater. There are no TMDLs affecting this discharge.

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

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

Revision: August 15, 2024

Per the WQ Memo from July 3, 2024, since the Cane Creek Golf Course is no longer using water from Cane Creek for irrigation purposes and the Certificate of USE No. 0765 was deactivated with the Office of Water Resources on June 26, 2024, the updated flows for Cane Creek will be used for chronic toxicity. The effluent limits provided in the July 2022 WLA are still applicable.

Chronic toxicity at the IWC of 74 percent is required once per year during the month of August. The decreasd IWC is not backsliding since the decrease would result in water quality standards being obtained and the revision is consistent with the Department's anti-degradation policy. If the toxicity tests of the effluent from Outfall 001T indicate chronic toxicity, then toxicity tests may be required to be conducted during the months of February, May, August and November. However, the Permittee will be required to conduct chronic toxicity tests on a quarterly basis when utilizing PAA. If monitoring is not applicable during the quarterly monitoring period enter "*9" on the DMRs when toxicity testing is not required.

Revision: October 17, 2024

At the request of the Permittee in lieu of implementation of a Mercury Minimization Plan, the limits for Hg are 0.016 µg/L (monthly average) and 3.03 µg/L (maximum daily).

Revision: January 30, 2025

The Total Residual Chlorine (TRC) limits of 0.015 mg/L (monthly average) and 0.026 mg/L (daily maximum) are based on EPA's recommended water quality values and on the current Toxicity Rationale, which considers the available dilution in the receiving stream. In accordance with a letter dated August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes. The increased TRC limitation is not backsliding since the increase would result in water quality standards being obtained and the revision is consistent with the Department's anti-degradation policy. Monitoring for TRC is only applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter "*9" on the monthly DMR.

Prepared by: Michael N. Simmons

Facility Name: **McClellan WWTP**

NPDES No.: **AL0024520**

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

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	0	-
2	**Arsenic*,****	YES	Metals	0	0	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0	0	-
4	Cadmium**		Metals	0	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	0	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	0	0	
7	Copper**		Metals	0	0	0	0	12.5	6.1088	0.388
8	Lead**		Metals	0	0	0	0	0	0	0.208
9	Mercury**		Metals	0	0	0	0	0.021	0.0037	0.302
10	Nickel**		Metals	0	0	0	0	0	0	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	26.9	13.47	0.330
15	Cyanide		Metals	0	0	0	0	0	0	-
16	Total Phenolic Compounds		Metals	0	0	0	0	56	18.67	-
17	Hardness (As CaCO3)		Metals	0	0	0	0	176000	141000	-
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	**Trichloroethylene***	YES	VOC	0	0	0	0	0	0	-
53	**Vinyl Chloride***	YES	VOC	0	0	0	0	0	0	-
54	P-Chloro-M-Cresol		Acids	0	0	0	0	0	0	-
55	2-Chlorophenol		Acids	0	0	0	0	0	0	-
56	2, 4-Dichlorophenol		Acids	0	0	0	0	0	0	-
57	2, 4-Dimethylphenol		Acids	0	0	0	0	0	0	-
58	4, 6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	-
59	2, 4-Dinitrophenol		Acids	0	0	0	0	0	0	-
60	**4,6-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	HexachlorocyclоPentadiene		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	-

2.2	Enter Q_d = wastewater discharge flow from facility (MGD)
3.4039038	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)
1.2	Enter 7Q10, Q_s = background stream flow in cfs above point of discharge
0.9	Enter or estimated, 1Q10, Q_s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
20.16	Enter Mean Annual Flow, Q_s = background stream flow in cfs above point of discharge
1.9	Enter 7Q2, Q_s = background stream flow in cfs above point of discharge (For LWF class streams)
Enter in 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)
100	Enter, Background Hardness above point of discharge (assumed 50 South of Birmingham and 100 North of Birmingham)
7.00 s.u.	Enter, Background pH above point of discharge
YES	Enter, Is discharge to a stream? "YES" Other option would be to a Lake. (This changes the partition coefficients for the metals)

** Using Partition Coefficients

January 30, 2025

Facility Name: McClellan WWTP

NPDES No.: AL0024520

Freshwater F&W classification.					Max Daily Discharge as reported by Applicant (C_{max})	Freshwater Acute (µg/l) Q_s =1Q10					Avg Daily Discharge as reported by Applicant (C_{avg})	Freshwater Chronic (µg/l) Q_s = 7Q10					Human Health Consumption Fish only (µg/l) Carcinogen Q_s = Annual Average Non-Carcinogen Q_s = 7Q10			
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (Cd2) Daily Max		Water Quality Criteria (C_s)	Draft Permit Limit (C_{max})	20% of Draft Permit Limit	RP?	Background from upstream source (Cd2) Monthly Ave		Water Quality Criteria (C_s)	Draft Permit Limit (C_{avg})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C_s)	Draft Permit Limit (C_{avg})	20% of Draft Permit Limit	RP?
1	Antimony			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.05E+02	1.01E+02	No
2	Arsenic		YES	0	0	[illegible]	748.949	149.790	No	0	0	[illegible]	353.450	70.690	No	3.03E-01	2.10E+00	4.20E-01	No
3	Beryllium			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
4	Cadmium			0	0	[illegible]	10.789	2.158	No	0	0	[illegible]	1.410	0.282	No	-	-	-	-
5	Chromium/ Chromium III			0	0	[illegible]	3430.525	686.105	No	0	0	[illegible]	477.346	95.469	No	-	-	-	-
6	Chromium/ Chromium VI			0	0	[illegible]	20.230	4.046	No	0	0	[illegible]	14.678	2.976	No	-	-	-	-
7	Copper	YES		0	12.5	[illegible]	43.795	8.759	Yes	0	6.1088	[illegible]	31.219	6.244	No	-	-	-	-
8	Lead			0	0	[illegible]	396.392	79.278	No	0	0	[illegible]	16.524	3.305	No	-	-	-	-
9	Mercury	YES		0	0.021	[illegible]	3.035	0.607	No	0	0.0037	[illegible]	0.016	0.003	Yes	4.24E-02	5.74E-02	1.15E-02	No
10	Nickel			0	0	[illegible]	1172.353	234.471	No	0	0	[illegible]	139.289	27.858	No	9.93E+02	1.34E+03	2.69E+02	No
11	Selenium			0	0	[illegible]	25.288	5.058	No	0	0	[illegible]	6.763	1.353	No	[illegible]	3.29E+03	6.57E+02	No
12	Silver			0	0	[illegible]	4.067	0.813	No	0	0	-	-	-	-	-	-	-	-
13	Thallium			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.70E-01	7.40E-02	No
14	Zinc			0	26.9	[illegible]	448.980	89.796	No	0	13.47	[illegible]	484.204	96.841	No	1.49E+04	2.01E+04	4.03E+03	No
15	Cyanide			0	0	[illegible]	27.817	5.563	No	0	0	[illegible]	7.033	1.407	No	[illegible]	1.26E+04	2.52E+03	No
16	Total Phenolic Compounds			0	58	-	-	-	-	0	18.67	-	-	-	-	-	-	-	-
17	Hardness (As CaCO3)			0	176000	-	-	-	-	0	141000	-	-	-	-	-	-	-	-
18	Acrolein			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.34E+00	1.47E+00	No
19	Acrylonitrile		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.97E-01	1.99E-01	No
20	Aldrin		YES	0	0	[illegible]	3.793	0.759	No	0	0	-	-	-	-	[illegible]	2.03E-04	4.07E-05	No
21	Benzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.07E+02	2.14E+01	No
22	Bromoform		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.45E+02	1.09E+02	No
23	Carbon Tetrachloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.63E+00	1.33E+00	No
24	Chlordane		YES	0	0	[illegible]	3.035	0.607	No	0	0	[illegible]	0.006	0.001	No	[illegible]	3.27E-03	6.55E-04	No
25	Clorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.23E+03	2.45E+02	No
26	Chlorodibromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.13E+01	1.03E+01	No
27	Chloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
28	2-Chloro-Ethylvinyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
29	ChloroForm		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.06E+02	1.41E+02	No
30	4,4' - DDD		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.28E-03	2.51E-04	No
31	4,4' - DDE		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.88E-04	1.77E-04	No
32	4,4' - DDT		YES	0	1.100	1.391	0.278	No	0	0	0.001	0.001	0.000	No	[illegible]	8.88E-04	1.77E-04	No
33	Dichlorobromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.95E+01	1.39E+01	No
34	1, 1-Dichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
35	1, 2-Dichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.48E+02	2.96E+01	No
36	Trans-1, 2-Dichloro-Ethylene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.99E+03	1.60E+03	No
37	1, 1-Dichloroethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.88E+04	5.77E+03	No
38	1, 2-Dichloropropane			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.15E+01	2.30E+00	No
39	1, 3-Dichloro-Propylene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.66E+01	3.32E+00	No
40	Dieldrin		YES	0	[illegible]	[illegible]	0.303	0.061	No	0	0	[illegible]	0.076	0.015	No	[illegible]	2.16E-04	4.32E-05	No
41	Ethylbenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.88E+03	3.37E+02	No
42	Methyl Bromide			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.18E+03	2.36E+02	No
43	Methyl Chloride			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
44	Methylene Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.39E+03	4.79E+02	No
45	1, 1, 2, 2-Tetrachloro-Ethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.62E+01	3.23E+00	No
46	Tetrachloro-Ethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.33E+01	2.65E+00	No
47	Toluene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.18E+04	2.36E+03	No
48	Toxaphene		YES	0	[illegible]	[illegible]	0.923	0.185	No	0	0	[illegible]	0.000	0.000	No	[illegible]	1.12E-03	2.24E-04	No
49	Tributyltin (TBT)		YES	0	0	[illegible]	0.582	0.116	No	0	0	[illegible]	0.097	0.019	No	-	-	-	-
50	1, 1, 1-Trichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
51	1, 1, 2-Trichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.30E+01	1.26E+01	No
52	Trichlorethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.21E+02	2.42E+01	No
53	Vinyl Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.86E+00	1.97E+00	No
54	P-Chloro-M-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
55	2-Chlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.18E+02	2.36E+01	No
56	2, 4-Dichlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.33E+02	4.65E+01	No
57	2, 4-Dimethylphenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.73E+02	1.35E+02	No
58	4, 6-Dinitro-O-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
59	2, 4-Dinitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.21E+03	8.42E+02	No
60	4,6-Dinitro-2-methylphenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.15E+03	2.29E+02	No
61	Dioxin (2,3,7,8-TCDD)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.85E-07	3.69E-08	No
62	2-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
63	4-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
64	Pentachlorophenol		YES	0	[illegible]	[illegible]	11.030	2.206	No	0	0	[illegible]	9.052	1.810	No	[illegible]	1.22E+01	2.45E+00	No
65	Phenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.76E+05	1.35E+05	No
66	2, 4, 6-Trichlorophenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.79E+00	1.96E+00	No
67	Acenaphthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.82E+02	1.56E+02	No
68	Acenaphthylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
69	Anthracene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.16E+04	6.31E+03	No
70	Benzidine			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.57E-04	3.14E-05	No
71	Benzo(A)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.38E-02	1.48E-02	No
72	Benzo(A)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.38E-02	1.48E-02	No
73	Benzo(b)fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
74	Benzo(GHI)Perylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
75	Benzo(K)Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
76	Bis (2-Chloroethoxy) Methane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
77	Bis (2-Chloroethyl)-Ether		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.13E+00	4.26E-01	No
78	Bis (2-Chloroiso-Propyl) Ether			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.11E+04	1.02E+04	No
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.88E+00	1.78E+00	No
80	4-Bromophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
81	Butyl Benzyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.52E+03	3.05E+02	No
82	2-Chloronaphthalene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.25E+03	2.50E+02	No
83	4-Chlorophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
84	Chrysene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.38E-02	1.48E-02	No
85	Di-N-Butyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.55E+03	7.09E+02	No
86	Di-N-Octyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
87	Dibenzo(A,H)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.38E-02	1.48E-02	No
88	1, 2-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.02E+03	2.04E+02	No
89	1, 3-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.61E+02	1.52E+02	No
90	1, 4-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.52E+02	3.04E+01	No
91	3, 3-Dichlorobenzidine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.15E-01	2.30E-02	No
92	Diethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.48E+04	6.92E+03	No
93	Dimethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.77E+05	1.75E+05	No
94	2, 4-Dinitrotoluene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.37E+01	2.74E+00	No
95	2, 6-Dinitrotoluene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
96	1,2-Diphenylhydrazine			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.58E-01	3.17E-02	No
97	Endosulfan (alpha)		YES	0	0	[illegible]	0.278	0.056	No	0	0	[illegible]	0.076	0.015	No	[illegible]	3.59E+02	7.18E+01	No
98	Endosulfan (beta)		YES	0	0	[illegible]	0.278	0.056	No	0	0	[illegible]	0.076	0.015	No	[illegible]	3.59E+02	7.18E+01	No
99	Endosulfan sulfate		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.59E+02	7.18E+01	No
100	Endrin		YES	0	0	[illegible]	0.109	0.022	No	0	0	[illegible]	0.049	0.010	No	[illegible]	2.44E-01	4.88E-02	No
101	Endrin Aldeyhde		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.22E+00	2.44E-01	No
102	Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.10E+02	2.20E+01	No
103	Fluorene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.21E+03	8.42E+02	No
104	Heptochlor		YES	0	0	[illegible]	0.557	0.131	No	0	0	[illegible]	0.005	0.001	No	[illegible]	3.20E-04	6.41E-05	No
105	Heptachlor Epoxide		YES	0	0	[illegible]	0.557	0.131	No	0	0	[illegible]	0.005	0.001	No	[illegible]	1.58E-04	3.17E-05	No
106	Hexachlorobenzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.18E-03	2.32E-04	No
107	Hexachlorobutadiene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.45E+01	1.49E+01	No
108	Hexachlorocyclohexan (alpha)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.97E-02	3.94E-03	No
109	Hexachlorocyclohexan (beta)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.90E-02	1.38E-02	No
110	Hexachlorocyclohexan (gamma)		YES	0	[illegible]	[illegible]	1.201	0.240	No	0	0	[illegible]	0.019	0.004	No	[illegible]	7.48E+00	1.49E+00	No
111	HexachlorocycloPentadiene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.73E+02	1.75E+02	No
112	Hexachloroethane			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.59E+00	5.19E-01	No
113	Indeno(1, 2, 3-CK)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.38E-02	1.48E-02	No
114	Isophorone			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.58E+02	1.52E+02	No
115	Naphthalene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
116	Nitrobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.48E+02	1.09E+02	No
117	N-Nitrosodi-N-Propylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.04E+00	4.08E-01	No
118	N-Nitrosodimethylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.22E+01	2.44E+00	No
119	N-Nitrosodiphenylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.42E+01	4.65E+00	No
120	PCB-1016		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
121	PCB-1221		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
122	PCB-1232		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
123	PCB-1242		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
124	PCB-1248		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
125	PCB-1254		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
126	PCB-1260		YES	0	0	-	-	-	-	0	0	[illegible]	0.019	0.004	No	[illegible]	2.59E-04	5.18E-05	No
127	Phenanthrene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
128	Pyrene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.16E+03	6.31E+02	No
129	1, 2, 4-Trichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.54E+01	1.11E+01	No

McClellan WWTP (AL0024520)

Total Recoverable Copper DMR Data

Monitor Period End Date	*Monthly Average (mg/l)*	*Daily Maximum (mg/l)*
9/30/2017	2.310	2.310
10/31/2017	1.650	1.650
11/30/2017	4.340	4.340
12/31/2017	4.010	4.010
1/31/2018	6.360	6.360
2/28/2018	5.220	5.220
3/31/2018	2.940	2.940
4/30/2018	0.402	0.402
5/31/2018	3.480	3.480
6/30/2018	4.480	4.480
7/31/2018	4.240	4.240
8/31/2018	3.980	3.980
9/30/2018	6.520	6.520
10/31/2018	5.390	5.390
11/30/2018	6.200	6.200
12/31/2018	5.840	5.840
1/31/2019	5.100	5.100
2/28/2019	6.180	6.180
3/31/2019	1.000	1.000
4/30/2019	9.340	9.340
5/31/2019	3.430	3.430
6/30/2019	3.430	3.430
7/31/2019	2.470	2.470
8/31/2019	4.830	4.830
9/30/2019	6.280	6.280
10/31/2019	8.880	8.880
11/30/2019	6.560	6.560
12/31/2019	12.500	12.500
1/31/2020	6.340	6.340
2/29/2020	7.300	7.300
3/31/2020	0.000	0.000
4/30/2020	10.200	10.200
5/31/2020	8.100	8.100
6/30/2020	8.500	8.500
7/31/2020	7.600	7.600
8/31/2020	9.500	9.500
9/30/2020	11.900	11.900
10/31/2020	12.400	12.400
11/30/2020	5.400	5.400
12/31/2020	5.700	5.700
1/31/2021	10.200	10.200
2/28/2021	6.300	6.300
3/31/2021	6.300	6.300
4/30/2021	0.000	0.000
5/31/2021	0.000	0.000
6/30/2021	5.600	5.600
7/31/2021	5.200	5.200
8/31/2021	5.000	5.000
9/30/2021	6.000	6.000
10/31/2021	8.300	8.300
11/30/2021	7.700	7.700
12/31/2021	6.600	6.600
1/31/2022	7.200	7.200
2/28/2022	7.002	7.002
3/31/2022	5.600	5.600
4/30/2022	5.000	5.000
5/31/2022	5.000	5.000
6/30/2022	6.300	6.300
7/31/2022	6.700	6.700
8/31/2022	5.000	5.000
9/30/2022	9.400	9.400
10/31/2022	8.300	8.300
11/30/2022	7.000	7.000
12/31/2022	5.000	5.000
1/31/2023	5.000	5.000
2/28/2023	5.400	5.400
3/31/2023	5.300	5.300
4/30/2023	9.900	9.900
5/31/2023	5.600	5.600
6/30/2023	8.100	8.100
7/31/2023	5.000	5.000
8/31/2023	6.600	6.600
9/30/2023	8.000	8.000
10/31/2023	8.100	8.100
11/30/2023	7.800	7.800
12/31/2023	5.200	5.200
1/31/2024	5.400	5.400
2/28/2024	6.400	6.400
3/31/2024	5.200	5.200
4/30/2024	5.700	5.700
5/31/2024	7.300	7.300
6/30/2024	9.300	9.300
7/31/2024	5.000	5.000
8/31/2024	6.200	6.200
9/30/2024	8.500	8.500
10/31/2024	8.500	8.500
11/30/2024	6.500	6.500
12/31/2024	6.500	6.500
October 18, 2019 Test	11.800	11.800
April 14, 2020 Test	8.600	8.600
Feburary 17, 2021 Test	0.000	0.000

Monthly Average (mg/l)	6.1088
Daily Maximum (mg/l)	12.50

McClellan WWTP (AL0024520)

Total Recoverable Mercury DMR Data

Monitor Period End Date	*Monthly Average (mg/l)*	*Daily Maximum (mg/l)*
3/31/2018	0.00564	0.00564
6/30/2018	0.00379	0.00379
9/30/2018	0.00474	0.00474
12/31/2018	0.00442	0.00442
3/31/2019	0.021	0.021
6/30/2019	0.00265	0.00265
9/30/2019	0.00167	0.00167
12/31/2019	0.00095	0.00095
3/31/2020	0.009	0.009
6/30/2020	0.00323	0.00323
9/30/2020	0.000717	0.000717
12/31/2020	0.00304	0.00304
3/31/2021	0.0028	0.0028
6/30/2021	0.00297	0.00297
9/30/2021	0.00158	0.00158
12/31/2021	0.00118	0.00118
3/31/2022	0.00000	0.00000
6/30/2022	0.00375	0.00375
9/30/2022	0.00342	0.00342
12/31/2022	0.00315	0.00315
3/31/2023	0.00322	0.00322
6/30/2023	0.00252	0.00252
9/30/2023	0.00430	0.00430
12/31/2023	0.00221	0.00221
3/31/2024	0.00207	0.00207
6/30/2024	0.00290	0.00290
9/30/2024	0.00334	0.00334
12/31/2024	0.00217	0.00217

Monthly Average (mg/l)	0.0037
Daily Maximum (mg/l)	0.021

McClellan WWTP (AL0024520)

Raw Data Calculations

Copper (µg/l)	11.80	*October 18, 2019 Test*
	8.60	*April 14, 2020 Test*
	0.00	*Feburary 17, 2021 Test*
Avg.	6.80	
Max	11.80	

Zinc (µg/l)	26.90	*October 18, 2019 Test*
	13.50	*April 14, 2020 Test*
	0.00	*Feburary 17, 2021 Test*
Avg.	13.47	
Max	26.90	

Hardness (µg/l)	176000.00	*October 18, 2019 Test*
	104000.00	*April 14, 2020 Test*
	143000.00	*Feburary 17, 2021 Test*
Avg.	141000.00	
Max	176000.00	

Total Phenolic Compounds (µg/l)	0.00	*October 18, 2019 Test*
	0.00	*April 14, 2020 Test*
	56.00	*Feburary 17, 2021 Test*
Avg.	18.67	
Max	56.00	

p-chloro-m-cresol (µg/l)	0.00	*October 18, 2019 Test*
	0.00	*April 14, 2020 Test*
	0.00	*Feburary 17, 2021 Test*
Avg.	0.00	
Max	0.00	

3,4-benzofluoranthene (µg/l)	0.00	*October 18, 2019 Test*
	0.00	*April 14, 2020 Test*
	0.00	*Feburary 17, 2021 Test*
Avg.	0.00	
Max	0.00	

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	**McClellan WWTP**	
NPDES Permit Number:	**AL0024520**	
Receiving Stream:	**Cane Creek**	
Facility Design Flow (Q_w):	**2.200 MGD**	
Receiving Stream $7Q_{10}$:	**1.200 cfs**	
Receiving Stream $1Q_{10}$:	**0.900 cfs**	
Winter Headwater Flow (WHF):	**1.90 cfs**	
Summer Temperature for CCC:	**28 deg. Celsius**	
Winter Temperature for CCC:	**18 deg. Celsius**	
Headwater Background NH_3-N Level:	**0.11 mg/l**	
Receiving Stream pH:	**7.0 s.u.**	
Headwater Background FC Level (summer):	**N./A.**	**(Only applicable for facilities with diffusers.)**
(winter)	**N./A.**	

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

$$\text{Stream Dilution Ration (SDR)} = \frac{Qw}{7Q10 + Qw} = \textbf{73.94\%}$$

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.

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

= **73.94%** **Effluent-Dominated, CCC Applies**

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

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

	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**	**4.72 mg/l**

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

= **3.4 mg/l NH3-N at 7Q10**

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

= **7.3 mg/l NH3-N at Winter Flow**

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

	DO-based NH3-N limit	Toxicity-based NH3-N limit
Summer	**1.00 mg/l NH3-N**	**3.40 mg/l NH3-N**
Winter	**2.50 mg/l NH3-N**	**7.30 mg/l NH3-N**

Summer: The DO based limit of 1.00 mg/l NH3-N applies.
Winter: The DO based limit of 2.50 mg/l NH3-N applies.

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

The following factors trigger toxicity testing requirements:

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

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

Chronic toxicity testing is required

Instream Waste Concentration (IWC) = $\frac{Qw}{7Q10 + Qw}$ = **73.94%** Note: This number will be rounded up for toxicity testing purposes.

DISINFECTION REQUIREMENTS

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

See the attached Disinfection Guidance for applicable stream standards.

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

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)		
Monthly limit as monthly average (November through April):	548	**548**
Monthly limit as monthly average (May through October):	126	**126**
Daily Max (November through April):	2507	**2507**
Daily Max (May through October):	298	**298**
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:	0.015 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.026 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: 1/30/2025

Waste Load Allocation Summary

REQUEST INFORMATION

Request Number: 3854

From: Michael Simmons In Branch/Section: Municipal

Date Submitted: 3/3/2022 Date Required: 4/2/2022 FUND Code: 605

Date Permit application received by NPDES program: 3/3/2022

Receiving Waterbody: Cane Creek

Previous Stream Name:

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

Previous Discharger Name:

River Basin: Coosa Outfall Latitude: 33.727277 (decimal degrees)

*County: Calhoun Outfall Longitude: -85.809883 (decimal degrees)

Permit Number: AL0024520 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: 2.2 MGD

Proposed Discharge Design Flow: 2.2 MGD

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

Comments Included: ☐ Yes ☑ No

Information Verified By: SH

Year File Was Created:

Response ID Number: 1878

Lat/Long Method: GPS

12 Digit HUC Code: 031501060407

Use Classification: F&W

Site Visit Completed? ☑ Yes ☐ No

Date of Site Visit: 3/24/2022

Waterbody Impaired? ☑ Yes ☐ No

Date of WLA Response: 7/1/2022

Antidegradation ☐ Yes ☑ No

Approved TMDL? ☐ Yes ☑ No

Waterbody Tier Level: Tier I

Use Support Category: 5

Approval Date of TMDL:

Waste Load Allocation Information

Modeled Reach Length: 10.47 Miles

Date of Allocation: 7/1/2022

Name of Model Used: SWQM

Allocation Type: 2 Seasons

Model Completed by: SH

Type of Model Used: Desk-top

Allocation Developed by: Water Quality Branch

Waste Load Allocation Summary

Annual Effluent Limits		Conventional Parameters		Conventional Parameters		Other Parameters		Other Parameters	
Qw	MGD	Qw 2.2	MGD	Qw 2.2	MGD	Qw	MGD	Qw	MGD
		Season Summer		Season Winter		Season		Season	
		From May		From Dec		From		From	
		Through Nov		Through Apr		Through		Through	
CBOD5		CBOD5 12		CBOD5 20		TP		TP	
NH3-N		NH3-N 1		NH3-N 2.5		TN		TN	
TKN		TKN		TKN		TSS		TSS	
D.O.		D.O. 6		D.O. 6					

"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	2	mg/l
NH3-N	0.11	mg/l	0.11	mg/l
Temperature	28	°C	18	°C
pH	7	su	7	su

Hydrology at Discharge Location

Drainage Area Qualifier			Method Used to Calculate
Exact	14.4	sq mi	
	0	cfs	Observation
	0	cfs	Observation
	0	cfs	Observation
	20.16	cfs	ADEM Estimate w/USGS Gage Data

Comments and/or Notations

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

July 3, 2024

Memorandum:

TO: Michael Simmons
Industrial/Municipal Branch

FROM: Shae Holley
Water Quality Branch

RE: Updated Low Flow Estimates for Cane Creek – McClellan WWTP

The Department has been notified that the Cane Creek Golf Course, located just upstream of the McClellan WWTP (AL0024520) outfall, is no longer withdrawing water from Cane Creek for irrigation purposes. The Certificate of Use No. 0765 was deactivated with the Office of Water Resources on June 26, 2024. Updated flows for Cane Creek at the McClellan WWTP discharge location, estimated from the partial record gage USGS 02401902 (Cane Creek near Anniston), are shown in the table below. The effluent limits provided in the July 2022 WLA are still applicable.

McClellan WWTP discharge location	
Drainage Area (mi2):	14.40
7Q10 (cfs):	1.20
7Q2 (cfs):	1.90
1Q10 (cfs):	0.90
Annual Average (cfs):	20.16

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)

The Water Works and Sewer Board of the City of Anniston, Alabama
931 Noble Street, Suite 200 -- P.O. Box 2268
Anniston, AL 36202
www.awwsb.org

September 6, 2024

Michael Simmons
Senior Environmental Engineering Specialist
Water Division
1400 Coliseum Blvd.

Re: Mercury Minimization Plan

Dear Michael,

The Anniston Water Works and Sewer Board has provided water and sewer service to Ft. McClellan for many years. In 1999 Ft. McClellan closed due to the Department of Defense Base Realignment and Closure (BRAC). Between 2000 and 2015 many construction projects began to renovate former Army facilities. After 2018 construction slowed and projects were mainly on National Guard property. The reduction in mercury coincides with the reduction in construction projects. This along with the recent flow studies have contributed to lower mercury levels. Attached is a spreadsheet to show the time frame for when the construction projects occurred.

If you have any questions, please do not hesitate to contact me at (256)-241-2000.

By Clifton Osborne
Clifton Osborne, P.E.
Project Engineer

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 22 2022
MUNICIPAL SECTION

PURPOSE OF THIS APPLICATION

- ☐ Initial Permit Application for New Facility*
- ☐ Initial Permit Application for Existing Facility*
- ☐ Modification of Existing Permit
- ■ Reissuance of Existing Permit
- ☐ Revocation & 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: McClellan WWTP Facility County: Calhoun

   a. Operator Name: The Water Works and Sewer Board of the City of Anniston

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

   If No, provide the following information:

   Operator Name: _____

   Operator Address (Street or PO Box): _____

   City: _____ _____ Zip: _____

   Phone Number: _____ Email Address: _____

   Operator Status:

   ☐ Public-federal ☐ Public-state ☒ Public-other (please specify): _____
   ☐ Private ☐ Other (please specify): _____

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

   c. Name of Permittee* if different than Operator: _____

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

2. NPDES Permit Number: AL 0024520 (Not applicable if initial permit application)

3. Facility Location (Front Gate): Latitude: 85 48 32 Longitude: 33 43 37

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

   Name and Title: Edward A. Turner

   Address: PO Box 2268

   City: Anniston State: AL Zip: 36202

   Phone Number: 256.241.2000 Email Address: eturner@awwsb.org

5. Designated Facility/DMR Contact:

Name: Gregory Moon Title: Wastewater Treatment Plant Operations Supervisor

Phone Number: 256.310.3619 Email Address: gmoon@awwsb.org

6. Designated Emergency Contact:

Name: Edward A. Turner Title: General Manager

Phone Number: 256.241.2000 Email Address: eturner@awwsb.org

7. Please complete this section if the Applicant's business entity is a Proprietorship or Limited Liability Company (LLC) with a responsible official not listed in A.4.

Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

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

Facility Name	Permit Number	Type of Action	Date of Action
Choccolocco Creek WWTP	AL0022195	Notice of Violation	
McClellan WWTP	AL0024520	Notice of Violation	

SECTION B – WASTEWATER DISCHARGE INFORMATION

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

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

For each shared outfall, provide the following:

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

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

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

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

The plant currently has influent and effluent parshall flumes for flow measurement and influent and effluent composite samplers.

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

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

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
Municipal Wastewater Sludge	Drying Beds, Sludge Storage Area
Sludge/Grease/Screenings	Drying Beds

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

SECTION D – INDUSTRIAL INDIRECT DISCHARGE CONTRIBUTORS

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

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No
				☐ Yes ■ No

2. Are industrial wastewater contributions regulated via a locally approved sewer use ordinance? ☐ Yes ■ No

If yes, please attach a copy of the ordinance.

SECTION E – COASTAL ZONE INFORMATION

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

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

SECTION H– ENGINEERING REPORT/BMP PLAN REQUIREMENTS

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

SECTION I– RECEIVING WATERS

Outfall No.	Receiving Water(s)	303(d) Segment?	Included in TMDL?*
0012	Cane Creek	■ 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: 3-1-2022

Name: Edward A. Turner Title: General Manager

If the Responsible Official signing this application is <u>not</u> identified in Section A.4 or A.7, provide the following information:

Mailing Address: PO Box 2268

City: Anniston State: AL Zip: 36202

Phone Number: 256.241.2000 Email Address: eturner@awwsb.org

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

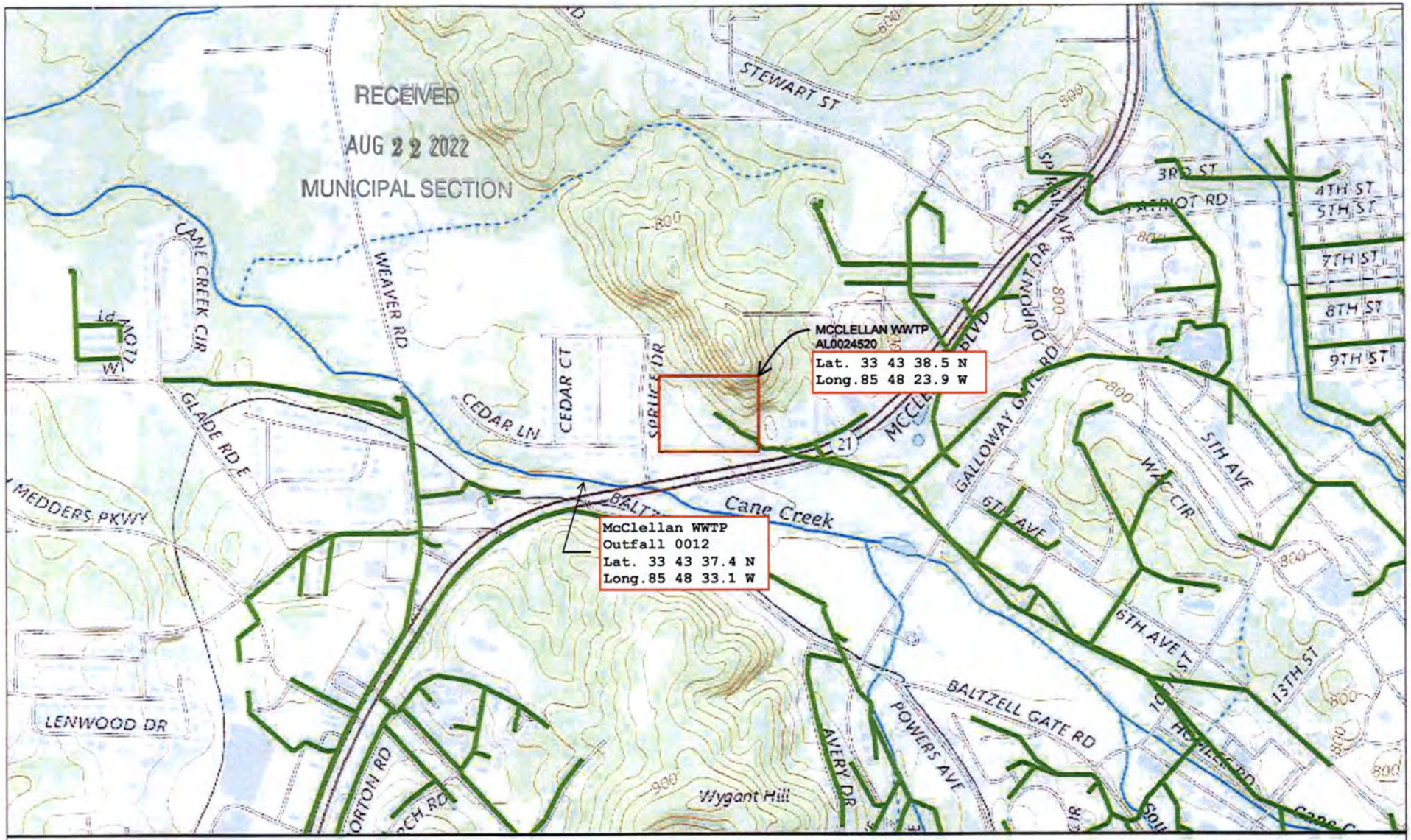
(1) The application for an NPDES permit shall be signed by a responsible official, as indicated below:

(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.



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0 0.2 0.4 0.8 km

ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD
MCCLELLAN WWTP 35 FRIENDSHIP ROAD OXFORD, AL 36203	

SHEET TITLE: TOPOGRAPHY PLAN		SHEET NUMBER
ISSUE DATE: 02/22/2022	SCALE: NOT TO SCALE	TO-1
PROJECT NUMBER: —	DRAWN BY: LF	
SEQUENCE: 1 OF 1	CHECKED BY: CO	

ANNISTON WATER WORKS AND SEWER BOARD *931 NOBLE STREET STE 200* *ANNISTON, AL 36202*	ANNISTON WATER WORKS & SEWER BOARD	**MCCLELLAN WWTP** *35 FRIENSHIP ROAD* *OXFORD, AL 36203*	SHEET TITLE: LOCATION MAP ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: --- DRAWN BY: LF SEQUENCE: OF 6 CHECKED BY: CO	SHEET EXHIBIT A

RECEIVED

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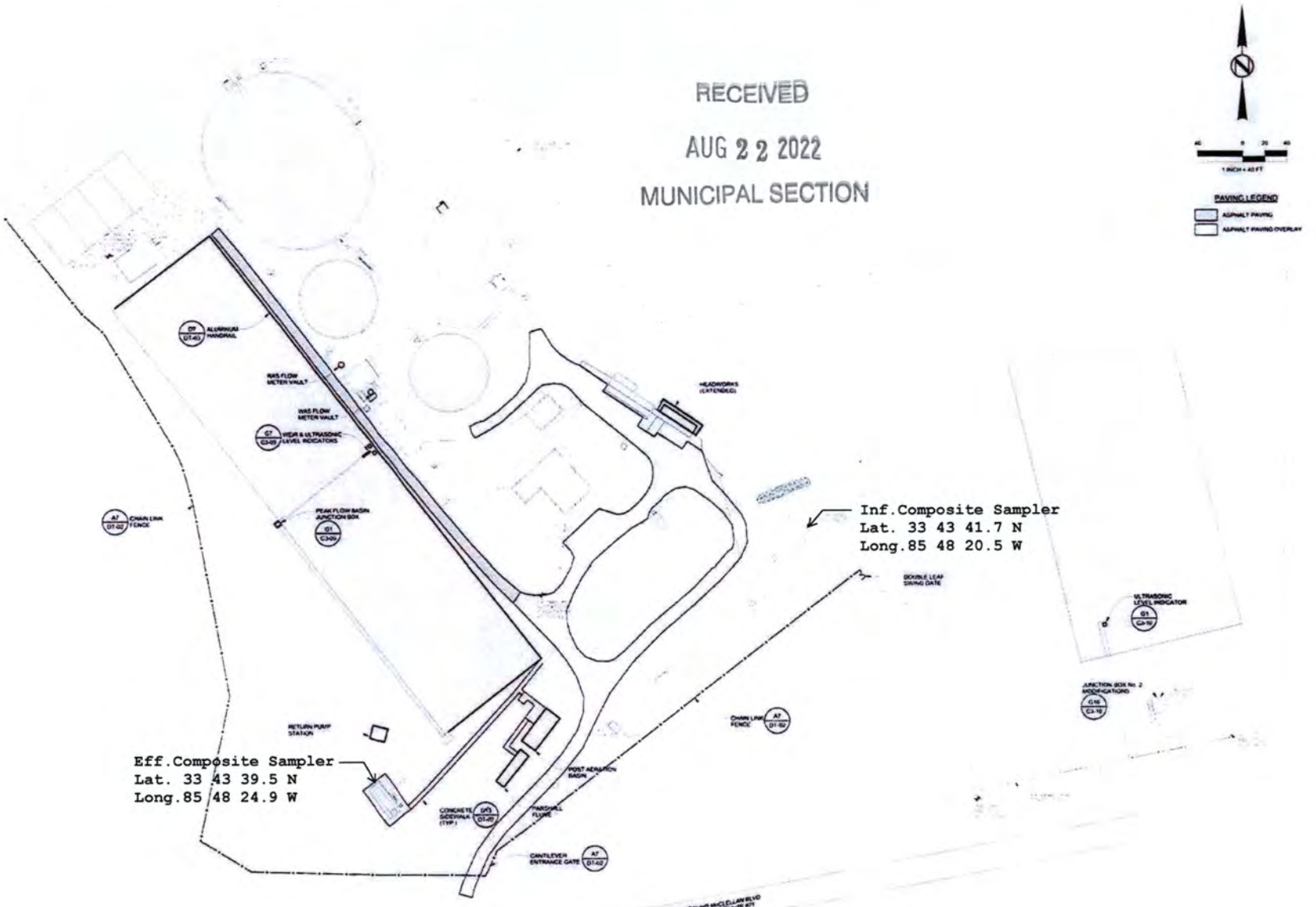
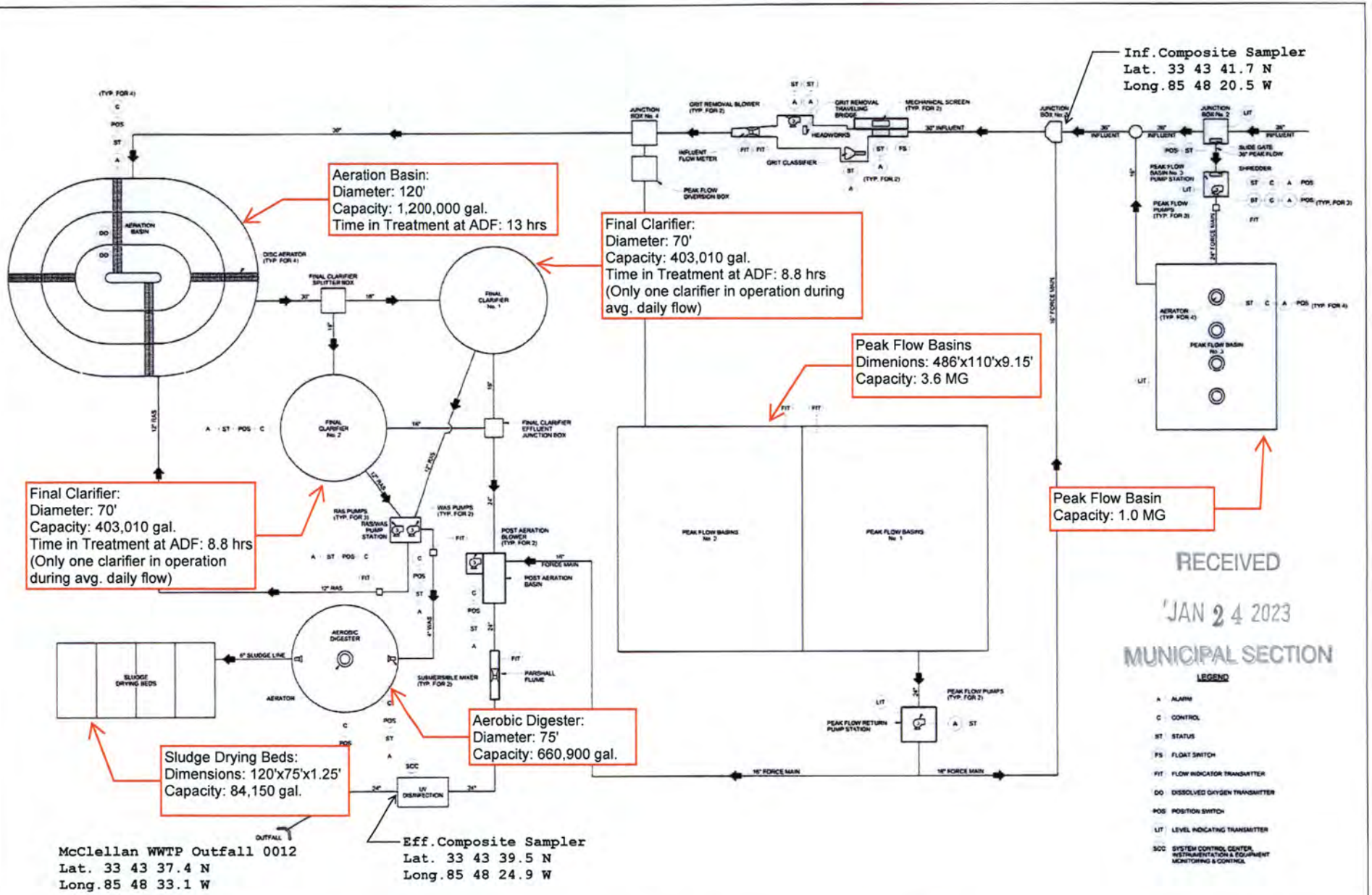
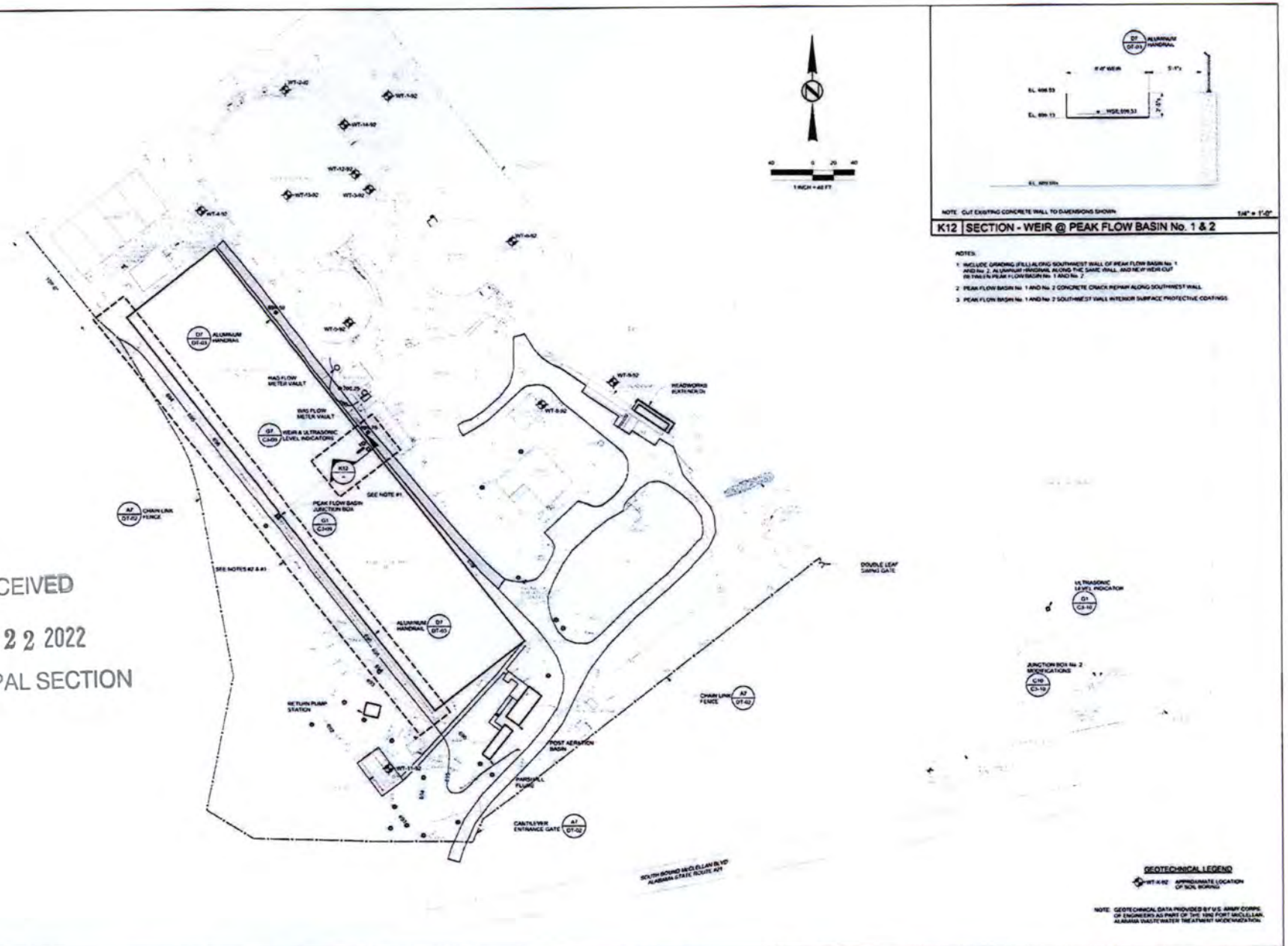
MUNICIPAL SECTION



ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	MCCLELLAN WWTP 35 FRIENDSHIP ROAD OXFORD, AL 36203	SHEET TITLE: SITE PLAN ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: — DRAWN BY: LF SEQUENCE: 1 OF 1 CHECKED BY: CO	SHEET NUMBER SP-1



ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	MCCLELLAN WWTP 35 FRIENDSHIP ROAD OXFORD, AL 36203	SHEET TITLE: PROCESS FLOW DIAGRAM ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: — DRAWN BY: LF SEQUENCE: 1 OF 1 CHECKED BY: CO	SHEET NUMBER PF-1



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MUNICIPAL SECTION

ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	**MCCLELLAN WWTP** 35 FRIENDSHIP ROAD OXFORD, AL 36203	SHEET TITLE: GRADING AND DRAINAGE ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: — DRAWN BY: LF SEQUENCE: 1 OF 1 CHECKED BY: CO SHEET NUMBER: **GD-1**

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

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Form 2A NPDES | **EPA**

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

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

Facility Information

1.1 Facility name
McClellan WWTP AL0022195

Mailing address (street or P.O. box)
PO Box 2268

City or town	State	ZIP code
Anniston	AL	36202-2268

Contact name (first and last)	Title	Phone number	Email address
Edward A. Turner	General Manager	(256) 241-2000	eturner@awwsb.org

Location address (street, route number, or other specific identifier) ☐ Same as mailing address
6112 McClellan Boulevard

City or town	State	ZIP code
Anniston	AL	36206

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
The Water Works and Sewer Board of the City of Anniston

Applicant address (street or P.O. box)
PO Box 2268

City or town	State	ZIP code
Anniston	AL	36202-2268

Contact name (first and last)	Title	Phone number	Email address
Edward A.Turner	General Manager	(256) 241-2000	eturner@awwsb.org

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) AL0024520	☐ 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
	AL0024520	McClellan 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
Lenlock	1030 +/-	100 % separate sanitary sewer	☑ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
Ft. McClellan	870 +/-	100 % 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	1900 +/-		

	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
2.2 mgd

Annual Average Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
1.04 mgd	1.3 mgd	1.02 mgd

Maximum Daily Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
5.3 mgd	5.2 mgd	5.3 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

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			

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

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
629,000 gpd

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

Developed and implemented an EPA approved Continuing Sewer Assessment Plan (CSAP) and Infrastructure Rehabilitation Plan (IRP).

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.

2.

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.					
2.					
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:

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

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

Description of Outfalls

3.1 Provide the following information for each outfall. (Attach additional sheets if you have more than three outfalls.)

	Outfall Number 0012	Outfall Number ____	Outfall Number ____
State	Alabama		
County	Calhoun		
City or town	Anniston		
Distance from shore	N/A ft.	ft.	ft.
Depth below surface	N/A ft.	ft.	ft.
Average daily flow rate	mgd	mgd	mgd
Latitude	33° 43′ 37″ N	° ′ ″	° ′ ″
Longitude	-85° 48′ 32″ 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 ____	Outfall Number ____	Outfall Number ____

Waters of the U.S.

3.6 Does the treatment works discharge or plan to discharge wastewater to waters of the United States from one or more discharge points?

☑ Yes ☐ No → SKIP to Section 6.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

Receiving Water Description

3.7 Provide the receiving water and related information (if known) for each outfall.

	Outfall Number 0011	Outfall Number _____	Outfall Number _____
Receiving water name	Cane Creek		
Name of watershed, river, or stream system	Middle Coosa		
U.S. Soil Conservation Service 14-digit watershed code			
Name of state management/river basin	Coosa River Basin		
U.S. Geological Survey 8-digit hydrologic cataloging unit code	03150106		
Critical low flow (acute)	0.88 cfs	cfs	cfs
Critical low flow (chronic)	1.77 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 0011	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 $CBOD_5$	95 %	%	%
TSS	95 %	%	%
Phosphorus	☑ Not applicable %	☐ Not applicable %	☐ Not applicable %
Nitrogen	☐ Not applicable 98 %	☐ 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.

UV Disinfection and Peracetic Acid will be used for disinfection.
UV disinfection - UV light destroys an organism's cells ability to reproduce.
Peracetic Acid - Chemical oxidant that reduces cell reproduction of organisms.

	Outfall Number 0011	Outfall Number ____	Outfall Number ____
Disinfection type	UV Disinfection Peracetic Acid		
Seasons used	All Seasons		
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 0012		Outfall Number ____		Outfall Number ____	
	Acute	Chronic	Acute	Chronic	Acute	Chronic
Number of tests of discharge water		7				
Number of tests of receiving water						

3.13 Does the treatment works have a design flow greater than or equal to 0.1 mgd?
☑ Yes ☐ No ➔ SKIP to Item 3.16.

3.14 Does the POTW use chlorine for disinfection, use chlorine elsewhere in the treatment process, or otherwise have reasonable potential to discharge chlorine in its effluent?
☐ Yes ➔ Complete Table B, including chlorine. ☑ No ➔ Complete Table B, omitting chlorine.

3.15 Have you completed monitoring for all applicable Table B pollutants and attached the results to this application package?
☑ Yes ☐ No

3.16 Does one or more of the following conditions apply?

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

☑ Yes ➔ Complete Tables C, D, and E as applicable. ☐ No ➔ SKIP to Section 4.

3.17 Have you completed monitoring for all applicable Table C pollutants and attached the results to this application package?
☑ Yes ☐ No

3.18 Have you completed monitoring for all applicable Table D pollutants required by your NPDES permitting authority and attached the results to this application package?
☑ Yes ☐ No 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
11/15/2019 5/7/2021 12/10/2019 12/12/2021 2/12/2020 3/12/2021 11/9/2020	All test passed, no toxicity indicated.

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
0	

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.

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

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CSO Outfall Description

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

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

CSO Monitoring

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

	CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
Rainfall	☐ 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.

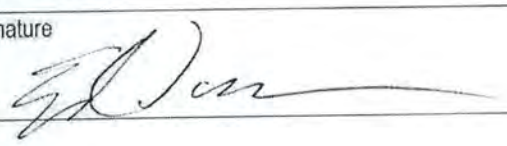
Name (print or type first and last name)	Official title
Edward A. Turner	General Manager
Signature 	Date signed 3-1-2022

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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)	21.0	mg/L	3.3	mg/L	716	SM 5210 B	1 mg/L ☐ ML ☐ MDL
Fecal coliform	840	#/100 mL	15.8	#/100 mL	733	m Coli Blue 24	E Coli ☐ ML ☐ MDL
Design flow rate	8.61	MGD	1.23	MGD	1673		
pH (minimum)	7.0	s.u.					
pH (maximum)	8.5	s.u.					
Temperature (winter)	20.6	deg C	15.6	deg C	1673		
Temperature (summer)	25.6	deg C	25.6	deg C	1673		
Total suspended solids (TSS)	24	mg/L	4.8	mg/L	716	SM 2540 D	☐ 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 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)	1.86	mg/L	0.16	mg/L	714	SM 4500 NH3 B	0.015mg/L ☐ ML ☐ MDL
Chlorine (total residual, TRC)[2]	ND						☐ ML ☐ MDL
Dissolved oxygen	11.9	mg/L	8.53	mg/L	709	Hach 10360	0.1 mg/L ☐ ML ☐ MDL
Nitrate/nitrite	21.2	mg/L	6.3	mg/L	60	SM 4500 NO3 E	0.1 mg/L ☐ ML ☐ MDL
Kjeldahl nitrogen	46	mg/L	1.5	mg/L	55	SM 4500 NorgC	1.5 mg/L ☐ ML ☐ MDL
Oil and grease	ND						0.5 mg/L ☐ ML ☐ MDL
Phosphorus	9.0	mg/L	1.7	mg/L	60	Hach 8190	0.02 mg/L ☐ ML ☐ MDL
Total dissolved solids	376	mg/L	252	mg/L	3	SM 2540 C -2011	2.0 mg/L ☐ 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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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 $CaCO_3$)	176,000	ug/L	141	mg/L	3	SM 2340C-2011	5 mg/L ☐ ML ☐ MDL
Antimony, total recoverable	ND				3	EPA 200.7	11.4 ug/L ☐ ML ☑ MDL
Arsenic, total recoverable	ND				3	EPA 200.7	21.0 ug/L ☐ ML ☑ MDL
Beryllium, total recoverable	ND				3	EPA 200.7	1.8 ug/L ☐ ML ☑ MDL
Cadmium, total recoverable	ND				3	EPA 200.7	4.3 ug/L ☐ ML ☑ MDL
Chromium, total recoverable	ND				3	EPA 200.7	7.6 ug/L ☐ ML ☑ MDL
Copper, total recoverable	155	ug/L	51.6	ug/L	3	EPA 200.7	3.1 mg/L ☐ ML ☑ MDL
Lead, total recoverable	ND				3	EPA 200.7	23.3 ug/L ☐ ML ☑ MDL
Mercury, total recoverable	ND						☐ ML ☑ MDL
Nickel, total recoverable	ND				3	EPA 200.7	4.8 ug/L ☐ ML ☑ MDL
Selenium, total recoverable	ND				3	EPA 200.7	12.4 ug/L ☐ ML ☑ MDL
Silver, total recoverable	ND				3	EPA 200.7	4.1 ug/L ☐ ML ☑ MDL
Thallium, total recoverable	ND				3	EPA 200.7	10.5 ug/L ☐ ML ☑ MDL
Zinc, total recoverable	26.9	ug/L	13.5	ug/L	3	EPA 200.7	4.5 ug/L ☐ ML ☑ MDL
Cyanide	ND				3	EPA 335.4	0.004 mg/L ☐ ML ☑ MDL
Total phenolic compounds							0.025mg/L ☐ ML ☑ MDL
Volatile Organic Compounds							
Acrolein	ND				3	EPA 624.1	16.1 ug/L ☐ ML ☑ MDL
Acrylonitrile	ND				3	EPA 624.1	10.4 ug/L ☐ ML ☑ MDL
Benzene	ND				3	EPA 624.1	1.0 ug/L ☐ ML ☑ MDL
Bromoform	ND				3	EPA 624.1	0.892ug/L ☐ 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				3	EPA 624.1	2.16 ug/L ☐ ML ☑ MDL
Chlorobenzene	ND				3	EPA 624.1	0.707 ug/L ☐ ML ☑ MDL
Chlorodibromomethane	ND				3	EPA 624.1	☐ ML ☑ MDL
Chloroethane	ND				3	EPA 624.1	2.399ug/L ☐ ML ☑ MDL
2-chloroethylvinyl ether	ND				3	EPA 624.1	3.604ug/L ☐ ML ☑ MDL
Chloroform	ND				3	EPA 624.1	1.595ug/L ☐ ML ☑ MDL
Dichlorobromomethane	ND				3	EPA 624.1	0.828ug/L ☐ ML ☑ MDL
1,1-dichloroethane	ND				3	EPA 624.1	0.573ug/L ☐ ML ☑ MDL
1,2-dichloroethane	ND				3	EPA 624.1	0.817ug/L ☐ ML ☑ MDL
trans-1,2-dichloroethylene	ND				3	EPA 624.1	0.659ug/L ☐ ML ☑ MDL
1,1-dichloroethylene	ND					EPA 624.1	☐ ML ☐ MDL
1,2-dichloropropane	ND				3	EPA 624.1	0.807ug/L ☐ ML ☑ MDL
1,3-dichloropropylene	ND				3	EPA 624.1	☐ ML ☐ MDL
Ethylbenzene	ND				3	EPA 624.1	2.066ug/L ☐ ML ☑ MDL
Methyl bromide	ND					EPA 624.1	☐ ML ☐ MDL
Methyl chloride	ND					EPA 624.1	☐ ML ☐ MDL
Methylene chloride	ND				3	EPA 624.1	0.669ug/L ☐ ML ☑ MDL
1,1,2,2-tetrachloroethane	ND				3	EPA 624.1	0.826ug/L ☐ ML ☑ MDL
Tetrachloroethylene	ND				3	EPA 624.1	0.988ug/L ☐ ML ☑ MDL
Toluene	ND				3	EPA 624.1	1.26 ug/L ☐ ML ☑ MDL
1,1,1-trichloroethane	ND				3	EPA 624.1	2.18 ug/L ☐ ML ☑ MDL
1,1,2-trichloroethane	ND				3	EPA 624.1	0.781ug/L ☐ 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				3	EPA 624.1	0.989ug/L ☐ ML ☑ MDL
Vinyl chloride	ND				3	EPA 624.1	0.771ug/L ☐ ML ☑ MDL
Acid-Extractable Compounds							
p-chloro-m-cresol					3		☐ ML ☐ MDL
2-chlorophenol	ND				3	EPA 625.1	9.81ug/L ☐ ML ☑ MDL
2,4-dichlorophenol	ND				3	EPA 625.1	13.2 ug/L ☐ ML ☑ MDL
2,4-dimethylphenol	ND				3	EPA 625.1	11.3 ug/L ☐ ML ☑ MDL
4,6-dinitro-o-cresol	ND						☐ ML ☐ MDL
2,4-dinitrophenol	ND				3	EPA 625.1	18.3ug/L ☐ ML ☑ MDL
2-nitrophenol	ND				3	EPA 625.1	12.3 ug/L ☐ ML ☑ MDL
4-nitrophenol	ND				3	EPA 625.1	8.29 ug/L ☐ ML ☑ MDL
Pentachlorophenol	ND				3	EPA 625.1	10.6 ug/L ☐ ML ☑ MDL
Phenol	0.056	ug/L	0.0187	ug/L	3	EPA 625.1	9.39 ug/L ☐ ML ☑ MDL
2,4,6-trichlorophenol	ND				3	EPA 625.1	11.6 ug/L ☐ ML ☑ MDL
Base-Neutral Compounds							
Acenaphthene	ND				3	EPA 625.1	8.79 ug/L ☐ ML ☑ MDL
Acenaphthylene	ND				3	EPA 625.1	9.12 ug/L ☐ ML ☑ MDL
Anthracene	ND				3	EPA 625.1	9.05 ug/L ☐ ML ☑ MDL
Benzidine	ND				3	EPA 625.1	15.1 ug/L ☐ ML ☑ MDL
Benzo(a)anthracene	ND				3	EPA 625.1	8.81 ug/L ☐ ML ☑ MDL
Benzo(a)pyrene	ND				3	EPA 625.1	9.92 ug/L ☐ ML ☑ MDL
3,4-benzofluoranthene							☐ 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				3	EPA 625.1	9.45 ug/L ☐ ML ☑ MDL
Benzo(k)fluoranthene	ND				3	EPA 625.1	10.0 ug/L ☐ ML ☑ MDL
Bis (2-chloroethoxy) methane	ND				3	EPA 625.1	6.66 ug/L ☐ ML ☑ MDL
Bis (2-chloroethyl) ether	ND				3	EPA 625.1	8.22 ug/L ☐ ML ☑ MDL
Bis (2-chloroisopropyl) ether	ND				3	EPA 625.1	7.09 ug/L ☐ ML ☑ MDL
Bis (2-ethylhexyl) phthalate	ND				3	EPA 625.1	6.84 ug/L ☐ ML ☑ MDL
4-bromophenyl phenyl ether	ND				3	EPA 625.1	9.12 ug/L ☐ ML ☑ MDL
Butyl benzyl phthalate	ND				3	EPA 625.1	9.96 ug/L ☐ ML ☑ MDL
2-chloronaphthalene	ND				3	EPA 625.1	11.6 ug/L ☐ ML ☑ MDL
4-chlorophenyl phenyl ether	ND				3	EPA 625.1	9.93 ug/L ☐ ML ☑ MDL
Chrysene	ND				3	EPA 625.1	8.70 ug/L ☐ ML ☑ MDL
di-n-butyl phthalate	ND				3	EPA 625.1	8.46 ug/L ☐ ML ☑ MDL
di-n-octyl phthalate	ND				3	EPA 625.1	9.50 ug/L ☐ ML ☑ MDL
Dibenzo(a,h)anthracene	ND				3	EPA 625.1	8.11 ug/L ☐ ML ☑ MDL
1,2-dichlorobenzene	ND				3	EPA 625.1	1.165ug/L ☐ ML ☑ MDL
1,3-dichlorobenzene	ND				3	EPA 625.1	1.053ug/L ☐ ML ☑ MDL
1,4-dichlorobenzene	ND				3	EPA 625.1	0.661ug/L ☐ ML ☑ MDL
3,3-dichlorobenzidine	ND				3	EPA 625.1	14.6 ug/L ☐ ML ☑ MDL
Diethyl phthalate	ND				3	EPA 625.1	8.92 ug/L ☐ ML ☑ MDL
Dimethyl phthalate	ND				3	EPA 625.1	10.0 ug/L ☐ ML ☑ MDL
2,4-dinitrotoluene	ND				3	EPA 625.1	7.70 ug/L ☐ ML ☑ MDL
2,6-dinitrotoluene	ND				3	EPA 625.1	8.13 ug/L ☐ 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				3	EPA 625.1	10.7 ug/L ☐ ML ☑ MDL
Fluoranthene	ND				3	EPA 625.1	8.6 ug/L ☐ ML ☑ MDL
Fluorene	ND				3	EPA 625.1	8.91 ug/L ☐ ML ☑ MDL
Hexachlorobenzene	ND				3	EPA 625.1	9.43 ug/L ☐ ML ☑ MDL
Hexachlorobutadiene	ND				3	EPA 625.1	9.29 ug/L ☐ ML ☑ MDL
Hexachlorocyclo-pentadiene	ND				3	EPA 625.1	8.73 ug/L ☐ ML ☑ MDL
Hexachloroethane	ND				3	EPA 625.1	8.89 ug/L ☐ ML ☑ MDL
Indeno(1,2,3-cd)pyrene	ND				3	EPA 625.1	7.49 ug/L ☐ ML ☑ MDL
Isophorone	ND				3	EPA 625.1	7.93 ug/L ☐ ML ☑ MDL
Naphthalene	ND				3	EPA 625.1	8.76 ug/L ☐ ML ☑ MDL
Nitrobenzene	ND				3	EPA 625.1	7.07 ug/L ☐ ML ☑ MDL
N-nitrosodi-n-propylamine	ND				3	EPA 625.1	8.89 ug/L ☐ ML ☑ MDL
N-nitrosodimethylamine	ND				3	EPA 625.1	9.79 ug/L ☐ ML ☑ MDL
N-nitrosodiphenylamine	ND				3	EPA 625.1	8.1 ug/L ☐ ML ☑ MDL
Phenanthrene	ND				3	EPA 625.1	9.42 ug/L ☐ ML ☑ MDL
Pyrene	ND				3	EPA 625.1	9.62 ug/L ☐ ML ☑ MDL
1,2,4-trichlorobenzene	ND				3	EPA 625.1	9.33 ug/L ☐ 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
							☐ ML ☐ MDL
							☐ ML ☐ MDL
							☐ 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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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 185 - 13	Test Number 185 - 14	Test Number 185 - 15
Test Information			
Test species	C.dubia	C. dubia	C. dubia
Age at initiation of test	6-14 hrs	0-8 hrs	0-8 hrs
Outfall number	0012	0012	0012
Date sample collected	08/20/2017	08/19/2018	08/11/2019
Date test started	08/22/2017	08/21/2018	08/13/2019
Duration	3 Brood	3 Brood	3 Brood
Toxicity Test Methods			
Test method number	EPA 1002	EPA 1002	EPA 1002
Manual title			
Edition number and year of publication			
Page number(s)			
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.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.
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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The table provides response space for one whole effluent toxicity sample. Copy the table to report additional test results.

	Test Number 185 - 13	Test Number 185 - 14	Test Number 185 - 15
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.	MHRW	MHRW	MHRW
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.	100	100	100
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	n/a %	n/a %	n/a %
LC_{50}	n/a	n/a	n/a
95% confidence interval	n/a %	n/a %	n/a %
Control percent survival	n/a %	n/a %	n/a %

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

	Test Number 185 - 13		Test Number 185 - 14		Test Number 185 - 15	
Acute Test Results Continued						
Other (describe)	n/a		n/a		n/a	
Chronic Test Results						
NOEC Survival	Pass %		Pass %		Pass %	
IC_{25} Growth/Reproduction	Pass %		Pass %		Pass %	
Control percent survival	100 %		90 %		100 %	
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)?	08/15/2017		08/21/2018		08/06/2019	
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 185 - 16	Test Number ____	Test Number ____
Test Information			
Test species	C.dubia	C. dubia	C. dubia
Age at initiation of test	6-14 hrs	0-8 hrs	0-8 hrs
Outfall number	0012	0012	0012
Date sample collected	08/20/2017	08/19/2018	08/11/2019
Date test started	08/22/2017	08/21/2018	08/13/2019
Duration	3 Brood	3 Brood	3 Brood
Toxicity Test Methods			
Test method number	EPA 1002	EPA 1002	EPA 1002
Manual title			
Edition number and year of publication			
Page number(s)			
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.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.
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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The table provides response space for one whole effluent toxicity sample. Copy the table to report additional test results.

	Test Number 185 - 16	Test Number ____	Test Number ____
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.	MHRW	MHRW	MHRW
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.	100	100	100

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	n/a %		n/a %		n/a %	
LC_{50}	n/a		n/a		n/a	
95% confidence interval	n/a %		n/a %		n/a %	
Control percent survival	n/a %		n/a %		n/a %	

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	Test Number 185 - 16		Test Number ____		Test Number ____	
Acute Test Results Continued						
Other (describe)	n/a		n/a		n/a	
Chronic Test Results						
NOEC Survival	Pass %		Pass %		Pass %	
IC_{25} Growth/Reproduction	Pass %		Pass %		Pass %	
Control percent survival	100 %		90 %		100 %	
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)?	08/15/2017		08/21/2018		08/06/2019	
Other (describe)						

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	Test Number 185 - 13	Test Number 185 - 14	Test Number 185 - 15
Test Information			
Test species	C.dubia	C. dubia	C. dubia
Age at initiation of test	6-14 hrs	0-8 hrs	0-8 hrs
Outfall number	0012	0012	0012
Date sample collected	08/20/2017	08/19/2018	08/11/2019
Date test started	08/22/2017	08/21/2018	08/13/2019
Duration	3 Brood	3 Brood	3 Brood
Toxicity Test Methods			
Test method number	EPA 1002	EPA 1002	EPA 1002
Manual title			
Edition number and year of publication			
Page number(s)			
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.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.
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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	Test Number 185 - 13	Test Number 185 - 14	Test Number 185 - 15
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.	MHRW	MHRW	MHRW
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.	100	100	100

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	n/a %		n/a %		n/a %	
LC_{50}	n/a		n/a		n/a	
95% confidence interval	n/a %		n/a %		n/a %	
Control percent survival	n/a %		n/a %		n/a %	

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	Test Number 185 - 13		Test Number 185 - 14		Test Number 185 - 15	
Acute Test Results Continued						
Other (describe)	n/a		n/a		n/a	
Chronic Test Results						
NOEC Survival	Pass %		Pass %		Pass %	
IC_{25} Growth/Reproduction	Pass %		Pass %		Pass %	
Control percent survival	100 %		90 %		100 %	
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)?	08/15/2017		08/21/2018		08/06/2019	
Other (describe)						

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
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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.	MHRW	MHRW	MHRW
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.	100	100	100
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	n/a %	n/a %	n/a %
LC_{50}	n/a	n/a	n/a
95% confidence interval	n/a %	n/a %	n/a %
Control percent survival	n/a %	n/a %	n/a %

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

	Test Number 185-16		Test Number ____		Test Number ____	
Acute Test Results Continued						
Other (describe)	n/a		n/a		n/a	
Chronic Test Results						
NOEC Survival	Pass %		Pass %		Pass %	
IC_{25} Growth/Reproduction	Pass %		Pass %		Pass %	
Control percent survival	100 %		90 %		100 %	
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)?	08/15/2017		08/21/2018		08/06/2019	
Other (describe)						

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	Test Number 185-16	Test Number ____	Test Number ____
Test Information			
Test species	C.dubia	C. dubia	C. dubia
Age at initiation of test	6-14 hrs	0-8 hrs	0-8 hrs
Outfall number	0012	0012	0012
Date sample collected	08/20/2017	08/19/2018	08/11/2019
Date test started	08/22/2017	08/21/2018	08/13/2019
Duration	3 Brood	3 Brood	3 Brood
Toxicity Test Methods			
Test method number	EPA 1002	EPA 1002	EPA 1002
Manual title			
Edition number and year of publication			
Page number(s)			
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.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.	The sample was taken from the UV effluent channel.
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 F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU ___	SIU ___	SIU ___
Name of SIU			
Mailing address (street or P.O. box)			
City, state, and ZIP code			
Description of all industrial processes that affect or contribute to the discharge.			
List the principal products and raw materials that affect or contribute to the SIU's discharge.			
Indicate the average daily volume of wastewater discharged by the SIU.	gpd	gpd	gpd
How much of the average daily volume is attributable to process flow?	gpd	gpd	gpd
How much of the average daily volume is attributable to non-process flow?	gpd	gpd	gpd
Is the SIU subject to local limits?	☐ 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	SIU ___	SIU ___
Under what categories and subcategories is the SIU subject?			
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
If yes, describe.			

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

2975 BROWN COURT
AUBURN, AL 36830
334-502-3444
(FAX) 334-502-8888

26 Years in Business, and counting
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ERA LAB

Laboratory Report

Waste Water

Report # 496-1019

Priority Pollutants

Prepared For:
Anniston Water&Sewer Bd-McClellen
PO Box 2268
Anniston, AL 36202

Attention: Don Miller

Number of Pages in Report: 10

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

The test results in this report meet all 2003 NELAC requirements for accredited parameters, exceptions are noted in this report. ERA's Florida certification number is E87542. Current copies of our certification and scope are available upon request.

This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory.

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Don Miller
Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-1019
Date Received: 10/18/2019

Sample Number: 197029-01 Collection Date: 10/18/2019 6:30
Description: grab Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Cyanide	<0.0040	mg/L		0.004	0.01	EPA 335.4	10/18/19 06:30	10/23/19 13:19	JA
Oil & Grease	<4.56	mg/L		4.56	5	EPA 1664A	10/18/19 06:30	10/21/19 11:00	TH
Total Phenols	<0.050	mg/L		0.05	0.05	EPA 420.1	10/18/19 06:30	10/21/19 09:00	BG

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
2-Chloroethylvinyl ether								
2-Chloroethylvinyl ether	EPA 624.1	BMDL	ug/L	5.09	10	10/20/19 20:32	NG	

Surrogate	Recovery %	Target Range
4-Bromofluorobenzene	101	90-110
toluene-d8	103	90-110
1,2-Dichloroethane-d4	89.2	88-119

624.1 WWVOC								
Acrolein	EPA 624.1	BMDL	ug/L	16.5	20	10/20/19 22:13	NG	
Acrylonitrile	EPA 624.1	BMDL	ug/L	25.5	50	10/20/19 22:13	NG	
Benzene	EPA 624.1	BMDL	ug/L	1.85	5	10/20/19 22:13	NG	
Bromodichloromethane	EPA 624.1	BMDL	ug/L	1.54	5	10/20/19 22:13	NG	
Bromoform	EPA 624.1	BMDL	ug/L	3.05	5	10/20/19 22:13	NG	
Bromomethane	EPA 624.1	BMDL	ug/L	4.76	5	10/20/19 22:13	NG	
Carbon Tetrachloride	EPA 624.1	BMDL	ug/L	0.618	5	10/20/19 22:13	NG	
Chlorobenzene	EPA 624.1	BMDL	ug/L	0.755	5	10/20/19 22:13	NG	
Chloroethane	EPA 624.1	BMDL	ug/L	1.46	5	10/20/19 22:13	NG	
2-Chloroethylvinyl Ether	EPA 624.1	BMDL	ug/L	4.36	5	10/20/19 22:13	NG	
Chloroform	EPA 624.1	BMDL	ug/L	1.73	5	10/20/19 22:13	NG	
Chloromethane	EPA 624.1	BMDL	ug/L	1.8	5	10/20/19 22:13	NG	
Dibromochloromethane	EPA 624.1	BMDL	ug/L	0.858	5	10/20/19 22:13	NG	
1,2-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.915	5	10/20/19 22:13	NG	
1,3-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.626	5	10/20/19 22:13	NG	
1,4-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.745	5	10/20/19 22:13	NG	

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Don Miller
Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-1019
Date Received: 10/18/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
1,1-Dichloroethane	EPA 624.1	BMDL	ug/L	1.94	5	10/20/19 22:13	NG	
1,2-Dichloroethane	EPA 624.1	BMDL	ug/L	1.27	5	10/20/19 22:13	NG	
1,1-Dichloroethene	EPA 624.1	BMDL	ug/L	1	5	10/20/19 22:13	NG	
Trans-1,2-Dichloroethene	EPA 624.1	BMDL	ug/L	1.17	5	10/20/19 22:13	NG	
1,2-Dichloropropane	EPA 624.1	BMDL	ug/L	1.8	5	10/20/19 22:13	NG	
Cis-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.81	5	10/20/19 22:13	NG	
Trans-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.629	5	10/20/19 22:13	NG	
Ethylbenzene	EPA 624.1	BMDL	ug/L	0.57	5	10/20/19 22:13	NG	
Methylene Chloride	EPA 624.1	BMDL	ug/L	1.88	5	10/20/19 22:13	NG	
1,1,2,2-Tetrachloroethane	EPA 624.1	BMDL	ug/L	0.94	5	10/20/19 22:13	NG	
Tetrachloroethene	EPA 624.1	BMDL	ug/L	0.82	5	10/20/19 22:13	NG	
Toluene	EPA 624.1	BMDL	ug/L	0.67	5	10/20/19 22:13	NG	
1,1,1-Trichloroethane	EPA 624.1	BMDL	ug/L	0.69	5	10/20/19 22:13	NG	
1,1,2-Trichloroethane	EPA 624.1	BMDL	ug/L	0.766	5	10/20/19 22:13	NG	
Trichloroethene	EPA 624.1	BMDL	ug/L	1.5	5	10/20/19 22:13	NG	
Trichlorofluoromethane	EPA 624.1	BMDL	ug/L	0.753	5	10/20/19 22:13	NG	
Vinyl Chloride	EPA 624.1	BMDL	ug/L	2.09	5	10/20/19 22:13	NG	
Xylenes, total	EPA 624.1	BMDL	ug/L	4.61	5	10/20/19 22:13	NG	

Surrogate	Recovery %	Target Range
1,2-Dichloroethane-d4	108	
Toluene-d8	103	
4-Bromofluorobenzene	88.8	

625.1 SVOC WW								
1,2,4-Trichlorobenzene	EPA 625.1	BMDL	ug/L	9.33	10	10/21/19 3:42	NG	
1,2-Diphenylhydrazine	EPA 625.1	BMDL	ug/L	10.7	10	10/21/19 3:42	NG	
2-Chloronaphthalene	EPA 625.1	BMDL	ug/L	11.6	10	10/21/19 3:42	NG	
2-Chlorophenol	EPA 625.1	BMDL	ug/L	9.81	10	10/21/19 3:42	NG	
2-Nitrophenol	EPA 625.1	BMDL	ug/L	12.3	20	10/21/19 3:42	NG	
2,4-Dichlorophenol	EPA 625.1	BMDL	ug/L	13.2	10	10/21/19 3:42	NG	
2,4-Dimethylphenol	EPA 625.1	BMDL	ug/L	11.3	10	10/21/19 3:42	NG	

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Don Miller
Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-1019
Date Received: 10/18/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
2,4-Dinitrophenol	EPA 625.1	BMDL	ug/L	18.3	10	10/21/19 3:42	NG	
2,4-Dinitrotoluene	EPA 625.1	BMDL	ug/L	7.7	20	10/21/19 3:42	NG	
2,6-Dinitrotoluene	EPA 625.1	BMDL	ug/L	8.13	10	10/21/19 3:42	NG	
2,4,6-Trichlorophenol	EPA 625.1	BMDL	ug/L	11.6	10	10/21/19 3:42	NG	
3.3-Dichlorobenzidine	EPA 625.1	BMDL	ug/L	14.6	20	10/21/19 3:42	NG	
4-Bromophenyl-phenyl ether	EPA 625.1	BMDL	ug/L	9.12	10	10/21/19 3:42	NG	
4-Chlorophenyl-phenyl ether	EPA 625.1	BMDL	ug/L	9.93	10	10/21/19 3:42	NG	
4-Chloro-3-methylphenol	EPA 625.1	BMDL	ug/L	9.95	10	10/21/19 3:42	NG	
4-Nitrophenol	EPA 625.1	BMDL	ug/L	8.29	10	10/21/19 3:42	NG	
4,6-Dinitro-2-Methylphenol	EPA 625.1	BMDL	ug/L	8.04	10	10/21/19 3:42	NG	
Acenaphthene	EPA 625.1	BMDL	ug/L	8.79	10	10/21/19 3:42	NG	
Acenaphthylene	EPA 625.1	BMDL	ug/L	9.12	10	10/21/19 3:42	NG	
Anthracene	EPA 625.1	BMDL	ug/L	9.05	10	10/21/19 3:42	NG	
Benzidine	EPA 625.1	BMDL	ug/L	15.1	20	10/21/19 3:42	NG	
Benzo(a)pyrene	EPA 625.1	BMDL	ug/L	9.92	10	10/21/19 3:42	NG	
Benzo(a)anthracene	EPA 625.1	BMDL	ug/L	8.81	10	10/21/19 3:42	NG	
Benzo(b)fluoranthene	EPA 625.1	BMDL	ug/L	10	10	10/21/19 3:42	NG	
Benzo(g,h,i)perylene	EPA 625.1	BMDL	ug/L	9.45	10	10/21/19 3:42	NG	
Benzo(k)fluoranthene	EPA 625.1	BMDL	ug/L	9.22	10	10/21/19 3:42	NG	
Bis(2-chloroethoxy)methane	EPA 625.1	BMDL	ug/L	6.66	10	10/21/19 3:42	NG	
Bis(2-chloroethyl)ether	EPA 625.1	BMDL	ug/L	8.22	10	10/21/19 3:42	NG	
Bis(2-chloroisopropyl)ether	EPA 625.1	BMDL	ug/L	7.09	10	10/21/19 3:42	NG	
Bis(2-Ethylhexyl) phthalate	EPA 625.1	BMDL	ug/L	6.84	10	10/21/19 3:42	NG	
Butylbenzyl phthalate	EPA 625.1	BMDL	ug/L	9.96	10	10/21/19 3:42	NG	
Chrysene	EPA 625.1	BMDL	ug/L	8.7	10	10/21/19 3:42	NG	
Dibenz(a,h)anthracene	EPA 625.1	BMDL	ug/L	8.11	10	10/21/19 3:42	NG	
Diethyl phthalate	EPA 625.1	BMDL	ug/L	8.92	10	10/21/19 3:42	NG	
Dimethlyl phthalate	EPA 625.1	BMDL	ug/L	10	10	10/21/19 3:42	NG	
Di-n-butyl phthalate	EPA 625.1	BMDL	ug/L	8.46	10	10/21/19 3:42	NG	
Di-n-octyl phthalate	EPA 625.1	BMDL	ug/L	9.5	10	10/21/19 3:42	NG	
n-Nitrosodimethylamine	EPA 625.1	BMDL	ug/L	9.79	10	10/21/19 3:42	NG	

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Don Miller
Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-1019
Date Received: 10/18/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
Fluoranthene	EPA 625.1	BMDL	ug/L	8.6	10	10/21/19 3:42	NG	
Fluorene	EPA 625.1	BMDL	ug/L	8.91	10	10/21/19 3:42	NG	
Hexachlorobenzene	EPA 625.1	BMDL	ug/L	9.43	10	10/21/19 3:42	NG	
Hexachlorobutadiene	EPA 625.1	BMDL	ug/L	9.29	10	10/21/19 3:42	NG	
Hexachlorocyclopentadiene	EPA 625.1	BMDL	ug/L	8.73	10	10/21/19 3:42	NG	
Hexachloroethane	EPA 625.1	BMDL	ug/L	8.89	10	10/21/19 3:42	NG	
Indeno(1,2,3-cd)pyrene	EPA 625.1	BMDL	ug/L	7.46	10	10/21/19 3:42	NG	
Isophorone	EPA 625.1	BMDL	ug/L	7.93	10	10/21/19 3:42	NG	
Naphthalene	EPA 625.1	BMDL	ug/L	8.76	10	10/21/19 3:42	NG	
Nitrobenzene	EPA 625.1	BMDL	ug/L	7.07	10	10/21/19 3:42	NG	
n-Nitrosodi-n-propylamine	EPA 625.1	BMDL	ug/L	8.89	10	10/21/19 3:42	NG	
n-Nitrosodiphenylamine	EPA 625.1	BMDL	ug/L	8.1	10	10/21/19 3:42	NG	
Pentachlorophenol	EPA 625.1	BMDL	ug/L	10.6	20	10/21/19 3:42	NG	
Phenanthrene	EPA 625.1	BMDL	ug/L	9.42	10	10/21/19 3:42	NG	
Phenol	EPA 625.1	BMDL	ug/L	9.39	10	10/21/19 3:42	NG	
Pyrene	EPA 625.1	BMDL	ug/L	9.62	10	10/21/19 3:42	NG	

Surrogate	Recovery %	Target Range
2-Fluorophenol	23.2	
Phenol-d5	15.4	
Nitrobenzene-d5	55.9	
2-Fluorobiphenyl	53.9	
2,4,6-Tribromophenol	48.4	
p-Terphenyl-d14	55.7	

Acrolein/Acrylonitrile								
Acrylonitrile	EPA 624.1	BMDL	ug/L	25.5	50	10/20/19 20:13	NG	
Acrolein	EPA 624.1	BMDL	ug/L	30.8	50	10/20/19 20:13	NG	

Surrogate	Recovery %	Target Range
4-Bromofluorobenzene	108	90-110
toluene-d8	103	90-110
1,2-Dichloroethane-d4	88.8	88-119

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Don Miller
Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-1019
Date Received: 10/18/2019

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.

Sample Number: 197029-02 Collection Date: 10/18/2019 6:04
Description: comp Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia	<0.200	mg N/L		0.2	0.2	EPA 350.1(1993)	10/18/19 06:04	10/21/19 11:41	JA
Antimony	<11.4	ug/L		11.4	25	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Arsenic	<21.0	ug/L		21	50	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Beryllium	<1.8	ug/L		1.8	5	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Cadmium	<4.3	ug/L		4.3	10	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Chromium	<7.6	ug/L		7.6	25	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Copper	11.8	ug/L		3.1	10	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Hardness	176	mg/L CaCO3 (EDTA)		5	5	SM 2340C-2011	10/18/19 06:04	10/22/19 17:30	RB
Lead	<23.3	ug/L		23.3	50	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Nickel	<4.8	ug/L		4.8	10	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
NO2-/NO3	21.4	mg N/L		0.07	0.2	EPA 353.2	10/18/19 06:04	10/24/19 14:09	JA
Selenium	<12.4	ug/L		12.4	25	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
Silver	<4.1	ug/L		4.1	5	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
TDS	376	mg/L(Dry)		2.5	2.5	SM 2540C-2011	10/18/19 06:04	10/23/19 11:00	BEH
Thallium	<10.5	ug/L		10.5	25	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO
TKN	<0.843	mg N/L	N10	0.843	1.25	EPA 351.2	10/18/19 06:04	10/24/19 09:00	JA
Total Phosphorus	2.23	mg P/L		0.1	1	EPA 365.4	10/18/19 06:04	10/24/19 09:00	JA
Zinc	26.9	ug/L		4.5	25	EPA 200.7	10/18/19 06:04	10/23/19 15:45	AO

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Don Miller
Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-1019
Date Received: 10/18/2019

Analytes - NOT NELAC Certified

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

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

Erin Consuegra

Erin Consuegra, QA/QC Manager — 10/31/2019 Date

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

"Methods for Chemical Analysis of Water and Wastes" EPA, EMSL-Cl, EPA 600/4-79-020, Rev. March 1979 & 1983.
BMDL = Below Method Detection Limit
COD: EPA approved methods in "HACH Water Analysis Handbook", 2nd Ed.
EPA- Methods for Chemical Analysis of Water and Wastes, 1994.
Oil & Grease: EPA-821-R-98-002, February 1999.
State of Florida, NELAC Certification #E87542
The results shown relate only to these samples.
These results meet all of the requirements of the NELAC standard.

Qualifiers

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

CHAIN OF CUSTODY

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

☐ Standard
☐ Expedite (Addition Fees Apply)
_____ Date Required

Client: Anniston Water&Sewer Bd-McCle
Project: 496-1019

		G or C	Composite Sample(s)		
			Subsample Frequency	First Subsample Date/Time	Last Subsample Date/Time
Sample No.	197029-01	grab			
Location	effluent PR				
Collector	Greg Moon				
Date/Time Sampled	10/18/19 06:30				

PO # 47599

Flow Rate:

Sample No.	197029-02	comp	1/hr	10/17/19 05:56	10/18/19 06:04
Location	effluent PR				
Collector	Gary O'Dell				
Date/Time Sampled	10/18/19 06:04				

Flow Rate:

Sample No.	197029-04	grab			
Location	Field Blank LLHg				
Collector					
Date/Time Sampled					

Collected quarterly per NPDES permit

Flow Rate: 0.384

Sample	Preservation	Analysis	Preservation CK
-01b	H2SO4	O&G	~~ph≤2.0~~
-01d	naoh	CN-	ph≤12.0 KS
-01f	NA2S2O3	625.1 SVOC WW	KS
-01h	None	2-Chloroethylvinyl ether	ph≤2.0
-02a	H2SO4	AMMONIA	ph≤2.0
-02c	H2SO4	NO2-/NO3	KS
-02e	None	TDS	KS
-02g	None	Hardness	

Sample	Preservation	Analysis	Preservation CK
-01c ✓	None	~~subcontract~~ TM 11/04/19A	~~KS~~
-01e	H2SO4	Phenol	ph≤2.0
-01g	HCl	Acrolein/Acrylonitrile	KS
-01j	NA2S2O3	624.1 WWVOC	KS
-02b	H2SO4	TKN	ph≤2.0
-02d	H2SO4	Total Phosphorus	ph≤2.0
-02f	HNO3	ICP Metals	KS
-04a X	None	~~subcontract~~	~~KS~~

CHAIN OF CUSTODY

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

☐ Standard
☐ Expedite (Addition Fees Apply)
_____ Date Required

Date Prepared: 100819

For Client Use:

Relinquished By: _____ Date/Time: 10-18-19 06:58 Received By: _____ Date/Time: 10-18-19 06:58

Relinquished By: _____ Date/Time: 10-18-19 1200 Received By: _____ Date/Time: 10/18/19 1200

Relinquished By: _____ Date/Time: _____ Received By: _____ Date/Time: _____

Received at Lab By: _____ Date/Time: 10/18/19 1500 Relinquished To Sealed Container: ☑

PO # 47599

ERA LAB

Client Anniston McCle Sample # 197029

ERA Cooler Receipt Form

1. Condition of Cooler Upon Unpacking

A. Date & Time of Cooler Unpacking 10/15/19 1500 Receiving Analyst: KS

B. Method of Delivery:

☐ Fed Ex ☐ UPS ☐ USPS ☑ ERA Driver ☐ Client Drop Off ☐ Other _____

Tracking Number _____

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

2. Condition of Cooler Contents

A. Chain Of Custody Information: ☑ Completed ☐ Incomplete, _____

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

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

D. Temperature °C 3.0 Thermometer ID: Utah

Reason for incorrect temp: (>6.0°C) ☐ Frozen ☐ Beginning of Cooling process ☐ Ice melted ☐ Other _____

3. Sample Information and Verification

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

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

All samples arrived within holding time? ☑ Yes ☐ No, _____

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

B. All samples were verified & marked on the Chain of Custody? ☐ Yes ☑ No, missing 04a

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

pH Strip Lot #: 223516

Additional Preservative information

1 Preservative Type: _____

2 Preservative Lot # _____

3 Preservative Type: _____

4 Preservative Lot # _____

D. Hexane Lot for O&G 189812083 N/A

E. Trip Blanks ☐ Absent ☐ Present ☑ N/A

4. Comments and Resolutions

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

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

Result of communication:

END OF REPORT

5. Analyst Conformation

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

Primary Reviewer: KS Secondary Reviewer:

Environmental Resource Analysts, Inc.

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

28 Years in Business, and counting
www.eralab.com

Laboratory Testing Report

Sample #: 203033

Prepared For:

Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Attention: Heath Denton

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

The analyses presented in this report were performed by ERA, Inc. Any exceptions or problems with the analyses are noted in the Laboratory Testing Report.
Any issues encountered during sample receipt are documented on the Cooler Receipt Form.

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

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

ERA LAB

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-0420
Date Received: 4/15/2020

Sample Number: 203033-01 Collection Date: 04/14/2020 6:10
Description: grab Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Cyanide	<0.004	mg/L		0.004	0.01	EPA 335.4	04/14/20 06:10	04/22/20 14:24	JA
Oil & Grease	<4.56	mg/L		4.56	5	EPA 1664A	04/14/20 06:10	04/17/20 09:45	TH
Total Phenols	<0.025	mg/L		0.025	0.05	EPA 420.1	04/14/20 06:10	04/16/20 09:30	BG

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
Acrolein	EPA 624.1	BMDL	ug/L	16.1	20	04/16/20 5:23	NG	
Acrylonitrile	EPA 624.1	BMDL	ug/L	10.1	20	04/16/20 5:23	NG	
Benzene	EPA 624.1	BMDL	ug/L	1	5	04/16/20 5:23	NG	
Bromodichloromethane	EPA 624.1	BMDL	ug/L	0.808	5	04/16/20 5:23	NG	
Bromoform	EPA 624.1	BMDL	ug/L	0.892	5	04/16/20 5:23	NG	
Bromomethane	EPA 624.1	BMDL	ug/L	1.814	5	04/16/20 5:23	NG	O94
Carbon Tetrachloride	EPA 624.1	BMDL	ug/L	2.16	5	04/16/20 5:23	NG	
Chlorobenzene	EPA 624.1	BMDL	ug/L	0.707	5	04/16/20 5:23	NG	
Chloroethane	EPA 624.1	BMDL	ug/L	2.399	5	04/16/20 5:23	NG	
2-Chloroethylvinyl Ether	EPA 624.1	BMDL	ug/L	3.604	5	04/16/20 5:23	NG	
Chloroform	EPA 624.1	BMDL	ug/L	1.595	5	04/16/20 5:23	NG	
Chloromethane	EPA 624.1	BMDL	ug/L	1.638	5	04/16/20 5:23	NG	
Dibromochloromethane	EPA 624.1	BMDL	ug/L	0.828	5	04/16/20 5:23	NG	
1,2-Dichlorobenzene	EPA 624.1	BMDL	ug/L	1.165	5	04/16/20 5:23	NG	
1,3-Dichlorobenzene	EPA 624.1	BMDL	ug/L	1.053	5	04/16/20 5:23	NG	
1,4-Dichlorobenzene	EPA 624.1	BMDL	ug/L	0.661	5	04/16/20 5:23	NG	
1,1-Dichloroethane	EPA 624.1	BMDL	ug/L	0.347	5	04/16/20 5:23	NG	
1,2-Dichloroethane	EPA 624.1	BMDL	ug/L	0.573	5	04/16/20 5:23	NG	
1,1-Dichloroethene	EPA 624.1	BMDL	ug/L	0.817	5	04/16/20 5:23	NG	
Trans-1,2-Dichloroethene	EPA 624.1	BMDL	ug/L	0.659	5	04/16/20 5:23	NG	
1,2-Dichloropropane	EPA 624.1	BMDL	ug/L	0.807	5	04/16/20 5:23	NG	
Cis-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.892	5	04/16/20 5:23	NG	O94
Trans-1,3-Dichloropropene	EPA 624.1	BMDL	ug/L	0.872	5	04/16/20 5:23	NG	

ERA LAB

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-0420
Date Received: 4/15/2020

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
624.1 WWVOC								
Ethylbenzene	EPA 624.1	BMDL	ug/L	2.066	5	04/16/20 5:23	NG	
Methylene Chloride	EPA 624.1	BMDL	ug/L	0.669	5	04/16/20 5:23	NG	
1,1,2,2-Tetrachloroethane	EPA 624.1	BMDL	ug/L	0.826	5	04/16/20 5:23	NG	
Tetrachloroethene	EPA 624.1	BMDL	ug/L	0.988	5	04/16/20 5:23	NG	
Toluene	EPA 624.1	BMDL	ug/L	1.26	5	04/16/20 5:23	NG	
1,1,1-Trichloroethane	EPA 624.1	BMDL	ug/L	2.18	5	04/16/20 5:23	NG	
1,1,2-Trichloroethane	EPA 624.1	BMDL	ug/L	0.781	5	04/16/20 5:23	NG	
Trichloroethene	EPA 624.1	BMDL	ug/L	0.989	5	04/16/20 5:23	NG	
Trichlorofluoromethane	EPA 624.1	BMDL	ug/L	0.903	5	04/16/20 5:23	NG	
Vinyl Chloride	EPA 624.1	BMDL	ug/L	0.771	5	04/16/20 5:23	NG	
Xylenes, total	EPA 624.1	BMDL	ug/L	4.01	5	04/16/20 5:23	NG	

Surrogate	**Recovery %**	**Target Range**
1,2-Dichloroethane-d4	103	
Toluene-d8	97.0	
4-Bromofluorobenzene	92.5	

625.1 SVOC WW								
1,2,4-Trichlorobenzene	EPA 625.1	BMDL	ug/L	9.33	10		NG	O95
1,2-Diphenylhydrazine	EPA 625.1	BMDL	ug/L	10.7	10		NG	
2-Chloronaphthalene	EPA 625.1	BMDL	ug/L	11.6	10		NG	
2-Chlorophenol	EPA 625.1	BMDL	ug/L	9.81	10		NG	
2-Nitrophenol	EPA 625.1	BMDL	ug/L	12.3	20		NG	
2,4-Dichlorophenol	EPA 625.1	BMDL	ug/L	13.2	10		NG	O95
2,4-Dimethylphenol	EPA 625.1	BMDL	ug/L	11.3	10		NG	
2,4-Dinitrophenol	EPA 625.1	BMDL	ug/L	18.3	10		NG	O94
2,4-Dinitrotoluene	EPA 625.1	BMDL	ug/L	7.7	20		NG	
2,6-Dinitrotoluene	EPA 625.1	BMDL	ug/L	8.13	10		NG	
2,4,6-Trichlorophenol	EPA 625.1	BMDL	ug/L	11.6	10		NG	O95
3.3-Dichlorobenzidine	EPA 625.1	BMDL	ug/L	14.6	20		NG	
4-Bromophenyl-phenyl ether	EPA 625.1	BMDL	ug/L	9.12	10		NG	O95
4-Chlorophenyl-phenyl ether	EPA 625.1	BMDL	ug/L	9.93	10		NG	

ERA LAB

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-0420
Date Received: 4/15/2020

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
4-Chloro-3-methylphenol	EPA 625.1	BMDL	ug/L	9.95	10		NG	
4-Nitrophenol	EPA 625.1	BMDL	ug/L	8.29	10		NG	O95
4,6-Dinitro-2-Methylphenol	EPA 625.1	BMDL	ug/L	8.04	10		NG	O95,
Acenaphthene	EPA 625.1	BMDL	ug/L	8.79	10		NG	O95
Acenaphthylene	EPA 625.1	BMDL	ug/L	9.12	10		NG	
Anthracene	EPA 625.1	BMDL	ug/L	9.05	10		NG	
Benzidine	EPA 625.1	BMDL	ug/L	15.1	20		NG	
Benzo(a)pyrene	EPA 625.1	BMDL	ug/L	9.92	10		NG	
Benzo(a)anthracene	EPA 625.1	BMDL	ug/L	8.81	10		NG	
Benzo(b)fluoranthene	EPA 625.1	BMDL	ug/L	10	10		NG	
Benzo(g,h,i)perylene	EPA 625.1	BMDL	ug/L	9.45	10		NG	
Benzo(k)fluoranthene	EPA 625.1	BMDL	ug/L	9.22	10		NG	
Bis(2-chloroethoxy)methane	EPA 625.1	BMDL	ug/L	6.66	10		NG	
Bis(2-chloroethyl)ether	EPA 625.1	BMDL	ug/L	8.22	10		NG	
Bis(2-chloroisopropyl)ether	EPA 625.1	BMDL	ug/L	7.09	10		NG	O95
Bis(2-Ethylhexyl) phthalate	EPA 625.1	BMDL	ug/L	6.84	10		NG	
Butylbenzyl phthalate	EPA 625.1	BMDL	ug/L	9.96	10		NG	
Chrysene	EPA 625.1	BMDL	ug/L	8.7	10		NG	
Dibenz(a,h)anthracene	EPA 625.1	BMDL	ug/L	8.11	10		NG	
Diethyl phthalate	EPA 625.1	BMDL	ug/L	8.92	10		NG	
Dimethlyl phthalate	EPA 625.1	BMDL	ug/L	10	10		NG	
Di-n-butyl phthalate	EPA 625.1	BMDL	ug/L	8.46	10		NG	O94
Di-n-octyl phthalate	EPA 625.1	BMDL	ug/L	9.5	10		NG	
n-Nitrosodimethylamine	EPA 625.1	BMDL	ug/L	9.79	10		NG	O95
Fluoranthene	EPA 625.1	BMDL	ug/L	8.6	10		NG	
Fluorene	EPA 625.1	BMDL	ug/L	8.91	10		NG	O95
Hexachlorobenzene	EPA 625.1	BMDL	ug/L	9.43	10		NG	
Hexachlorobutadiene	EPA 625.1	BMDL	ug/L	9.29	10		NG	
Hexachlorocyclopentadiene	EPA 625.1	BMDL	ug/L	8.73	10		NG	O94
Hexachloroethane	EPA 625.1	BMDL	ug/L	8.89	10		NG	O95
Indeno(1,2,3-cd)pyrene	EPA 625.1	BMDL	ug/L	7.46	10		NG	

ERA LAB

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-0420
Date Received: 4/15/2020

Organics

Test	Method	Result	Units	MDL	PQL	Date / Time	Analyst	Qual.
625.1 SVOC WW								
Isophorone	EPA 625.1	BMDL	ug/L	7.93	10		NG	
Naphthalene	EPA 625.1	BMDL	ug/L	8.76	10		NG	
Nitrobenzene	EPA 625.1	BMDL	ug/L	7.07	10		NG	
n-Nitrosodi-n-propylamine	EPA 625.1	BMDL	ug/L	8.89	10		NG	
n-Nitrosodiphenylamine	EPA 625.1	BMDL	ug/L	8.1	10		NG	
Pentachlorophenol	EPA 625.1	BMDL	ug/L	10.6	20		NG	
Phenanthrene	EPA 625.1	BMDL	ug/L	9.42	10		NG	O95
Phenol	EPA 625.1	BMDL	ug/L	9.39	10		NG	O95
Pyrene	EPA 625.1	BMDL	ug/L	9.62	10		NG	O95

Surrogate	**Recovery %**	**Target Range**
2-Fluorophenol	25.0	
Phenol-d5	16.3	
Nitrobenzene-d5	65.3	
2-Fluorobiphenyl	68.7	
2,4,6-Tribromophenol	59.1	
p-Terphenyl-d14	73.5	

ERA LAB

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-0420
Date Received: 4/15/2020

Sample Number: 203033-02 Collection Date: 04/14/2020 6:07
Description: comp Location: effluent PR

Analysis	Result	Units	Qual.	MDL	PQL	Method	Collection Date/Time	Analysis Date/Time	Analyst
Ammonia	<0.200	mg N/L		0.2	0.2	EPA 350.1(1993)	04/14/20 06:07	04/16/20 15:14	AO
Antimony	<11.4	ug/L		11.4	25	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Arsenic	<21	ug/L		21	50	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Beryllium	<1.8	ug/L		1.8	5	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Cadmium	<4.3	ug/L		4.3	10	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Chromium	<7.6	ug/L		7.6	25	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Copper	8.6	ug/L	N10	3.1	10	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Hardness	104	mg/L CaCO3 (EDTA)		5	5	SM 2340C-2011	04/14/20 06:07	04/21/20 12:00	DS
Lead	<23.3	ug/L		23.3	50	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Nickel	<4.8	ug/L		4.8	10	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
NO2-/NO3	3.68	mg N/L		0.035	0.1	EPA 353.2	04/14/20 06:07	04/20/20 11:42	JA
Selenium	<12.4	ug/L		12.4	25	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
Silver	<4.1	ug/L		4.1	5	EPA 200.7	04/14/20 06:07	04/29/20 16:17	TH
TDS	190	mg/L(Dry)		2.5	2.5	SM 2540C-2011	04/14/20 06:07	04/15/20 11:00	BG
Thallium	<10.5	ug/L		10.5	25	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH
TKN	<0.843	mg N/L		0.843	1.25	EPA 351.2	04/14/20 06:07	04/24/20 14:29	JA
Total Phosphorus	0.413	mg P/L	N10	0.1	0.5	EPA 365.4	04/14/20 06:07	04/24/20 14:29	JA
Zinc	13.5	ug/L	N10	4.5	25	EPA 200.7	04/14/20 06:07	04/22/20 13:41	TH

ERA LAB

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Results of Analysis For: Anniston Water & Sewer- McClellen
PO Box 2268
Anniston, AL 36202

Project: 496-0420
Date Received: 4/15/2020

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

"Methods for Chemical Analysis of Water and Wastes" EPA, EMSL-Cl, EPA 600/4-79-020, Rev. March 1979 & 1983.
BMDL = Below Method Detection Limit
COD: EPA approved methods in "HACH Water Analysis Handbook", 2nd Ed.
EPA- Methods for Chemical Analysis of Water and Wastes, 1994.
Oil & Grease: EPA-821-R-98-002, February 1999.
State of Florida, NELAC Certification #E87542
The results shown relate only to these samples.
These results meet all of the requirements of the NELAC standard.

Qualifiers

N10 = The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit and should only be relied upon as an estimate.
O94 = The Continuing Calibration Verification Standard did not meet QC requirements.
O95 = The standard extracted in the sample batch did not meet QA/QC criteria.

This report was reviewed for completeness and approved.
Date Complete: 05/04/2020

Dyana Hughes

Dyana Hughes, Reporting Manager

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

Erin Consuegra

Erin Consuegra, QA/QC Manager

ANNISTON WATER WORKS & SEWER BOARD
CHOCCOLOCCO CREEK WTP (205)831-0631

INF. FLC 2.209 EFF. FLOW 2.204 RAW

	DATE	TIME	INT	FINAL TIME	FINAL INT
SAMPLERS ON	4/13/20		ML	6:05	ML
SAMPLERS OFF	4/14/20		ML	6:07	ML

203033

CHAIN OF CUSTODY RECORD

CLIENT McCLELLAN TREATMENT FACILITY

SAMPLE COLLECTOR (SIGNATURE) [signature]

DATE & TIME SHIPPED 4/14/20 06:30

RELEASED BY [signature]

RECEIVED BY [signature]

RELEASED BY [signature]

RECEIVED BY

LABORATORY:

RECEIVED BY [signature]

DATE 4/14/20 ~~7:55~~

TIME 7:55

LAB	SAMPLE	GRAB	COMP.	DATE	TIME	DESCRIPTION OF SAMPLE	NO. OF CONTAINERS	PRIORITY POLLUTANTS									
		✔		4/14/20	6:10	EFFLUENT	1	✔									ML
			✔	4/14/20	6:07	EFFLUENT	1	✔									ML

FOR LAB USE ONLY

CORRECT TEMPERATURE	Y	N
HEAD SPACE	Y	N
WITHIN HOLDING TIME	Y	N
PRESERVED CORRECTLY	Y	N
SUFFICIENT AMOUNT OF SAMPLE	Y	N
CONTAINER BROKEN OR LEAKING	Y	N
APPROPRIATE CONTAINER	Y	N
CONTAINER LABELED	Y	N
SAMPLE LABEL AGREES WITH CHAIN OF CUSTODY	Y	N

TURNAROUND TIME NORMAL _____ RUSH _____

POSSIBLE HAZARD IDENTIFICATION:

NON-HAZARD _____ FLAMMABLE _____

SKIN IRRITANT _____ HIGHLY TOXIC _____

RETURN TO CLIENT: Y N

NOTES: Brianna Potts 9/15/20 9:20

ERA LAB

Client Anniston Water & Sewer Sample # 203083

ERA Cooler Receipt Form

1. Condition of Cooler Upon Unpacking

A. Date & Time of Cooler Unpacking 4/15/20 9:22 Receiving Analyst: BP

B. Method of Delivery:

☐ Fed Ex ☒ UPS ☐ USPS ☐ ERA Driver ☐ Client Drop Off ☐ Other _____

Tracking Number 1Z33357501961132 44

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

2. Condition of Cooler Contents

A. Chain Of Custody Information: ☐ Completed ☐ Incomplete, Missing

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

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

D. Temperature °C 3.3°C Thermometer ID: Auburn

Reason for incorrect temp: (>6.0°C) ☐ Frozen ☐ Beginning of Cooling process ☐ Ice melted ☐ Other _____

3. Sample Information and Verification

A. Sample Numbers match Chain of Custody?	☒	Yes	☐	No,
Correct bottle types used for each sample?	☒	Yes	☐	No,
All samples arrived within holding time?	☒	Yes	☐	No,
Sufficient volume in each bottle for tests?	☒	Yes	☐	No,
B. All samples were verified & marked on the Chain of Custody?	☒	Yes	☐	No,

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

pH Strip Lot #: 232518 | 201619

D. Hexane Lot for O&G 19110505 ☐ N/A

E. Trip Blanks ☐ Absent ☐ Present ☒ N/A

Additional Preservative information

1 Preservative Type: _____

2 Preservative Lot # _____

3 Preservative Type: _____

4 Preservative Lot # _____

4. Comments and Resolutions

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

How was client contacted: Email Phone Who contacted? DD Date/Time of contact: 04/20

Result of communication: Client states he packed it but we are unable to locate it. Client sent internal COC

5. Analyst Conformation

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

Primary Reviewer: BP Secondary Reviewer: _____

ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Sample #: 203033

All results are reported in Central Time.

Definitions

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

End of Report

LRS, Inc.

Laboratory Resources & Solutions, Inc.
P.O. Box 1260
205 6th Avenue
Ashville, AL 35953
(205) 594-1445
www.lab-resource.com

Analytical Data Report

Client: **The Water Works and Sewer Board of the City of Anniston**
P.O. Box 2268
Anniston, AL 36202

Attention: Mr. Heath Denton

Project ID: **MWWTP Priority Pollutants** (February 17, 2021)
Permit # AL0024520

Laboratory Report Number: **21-053-0046**

Report Date: March 3, 2021

Data Reviewed by:

Wayne T. Gaston

Wayne Gaston
Project Manager
Laboratory Resources & Solutions, Inc.
wgaston@lab-resource.com

- Unless otherwise noted, all analysis on this report performed at Waypoint Analytical, Inc., 2790 Whitten Road, Memphis, TN 38133. NELAC #460181
- These results relate only to the items tested. This report may only be reproduced in full.
- Local support services for this project are provided by Laboratory Resources & Solutions, Inc. (LRS). All questions regarding this report should be directed to LRS, Inc. at (205) 594-1445.

Waypoint ANALYTICAL

2790 Whitten Road, Memphis, TN 38133
Main 901.213.2400 ° Fax 901.213.2440
www.waypointanalytical.com

3/2/2021

Anniston Water Works and Sewer Board
Mr. Heath Denton
P.O. Box 2268
Anniston, AL, 36202

Ref: Analytical Testing
Lab Report Number: 21-053-0046
Client Project Description: MWWTP Priority Pollutants
Anniston, AL
Project #AL0024520

Dear Mr. Heath Denton:
Waypoint Analytical, LLC. received sample(s) on 2/19/2021 for the analyses presented in the following report.

The above referenced project has been analyzed per your instructions. The analyses were performed in accordance with the applicable analytical method. Where the laboratory was not responsible for the sampling stage (refer to the chain of custody) results apply to the sample as received.

The analytical data has been validated using standard quality control measures performed as required by the analytical method. Quality Assurance, method validations, instrumentation maintenance and calibration for all parameters (NELAP and non-NELAP) were performed in accordance with guidelines established by the USEPA (including 40 CFR 136 Method Update Rule August 2017) and NELAC unless otherwise indicated. Any parameter for which the laboratory is not officially NELAP accredited is indicated by a '~' symbol. These are not included in the scope because NELAP accreditation is either not available or has not been applied for. Additional certifications may be held/are available for parameters, where NELAP accreditation is not required or applicable. A full list of certifications is available upon request.

Certain parameters (chlorine, pH, dissolved oxygen, sulfite...) are required to be analyzed within 15 minutes of sampling. Usually, but not always, any field parameter analyzed at the laboratory is outside of this holding time. Refer to sample analysis time for confirmation of holding time compliance.

The results are shown on the attached Report of Analysis(s). Results for solid matrices are reported on an as-received basis unless otherwise indicated. This report shall not be reproduced except in full and relates only to the samples included in this report.

Please do not hesitate to contact me or client services if you have any questions or need additional information.

Sincerely,

Danyale Love

Danyale Love
Project Manager

Laboratory's liability in any claim relating to analyses performed shall be limited to, at laboratory's option, repeating the analysis in question at laboratory's expense, or the refund of the charges paid for performance of said analysis.

Waypoint ANALYTICAL

2790 Whitten Road, Memphis, TN 38133
Main 901.213.2400 ⁰ Fax 901.213.2440
www.waypointanalytical.com

Certification Summary

Laboratory ID: WP MTN: Waypoint Analytical, LLC., Memphis, TN

State	Program	Lab ID	Expiration Date
Alabama	State Program	40750	02/28/2022
Arkansas	State Program	88-0650	02/07/2021
California	State Program	2904	06/30/2021
Florida	State Program - NELAP	E871157	06/30/2021
Georgia	State Program	C044	02/18/2023
Georgia	State Program	04015	06/30/2021
Illinois	State Program - NELAP	200078	10/10/2021
Kentucky	State Program	80215	06/30/2021
Kentucky	State Program	KY90047	12/31/2021
Louisiana	State Program - NELAP	LA037	12/31/2021
Louisiana	State Program - NELAP	04015	06/30/2021
Mississippi	State Program	MS	02/11/2023
North Carolina	State Program	415	12/31/2021
Oklahoma	State Program	9311	08/31/2021
Pennsylvania	State Program - NELAP	68-03195	05/31/2021
South Carolina	State Program	84002	06/30/2021
South Carolina	State Program	84002	06/30/2021
Tennessee	State Program	02027	02/11/2023
Tennessee	A2LA ISO 17025:2017	4313.01	10/31/2021
Texas	State Program - NELAP	T104704180	09/30/2021
Virginia	State Program	00106	06/30/2021
Virginia	State Program - NELAP	460181	09/14/2021

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Sample Summary Table

Report Number: **21-053-0046**

Client Project Description: **MWWTP Priority Pollutants**
Anniston, AL
Project #AL0024520

Lab No	Client Sample ID	Matrix	Date Collected	Date Received
98730	Effluent Discharge - Grab	Aqueous	02/17/2021 07:40	02/19/2021
98731	Effluent Discharge - Comp	Aqueous	02/17/2021 07:30	02/19/2021

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Client: Anniston Water Works and Sewer Board
Project: MWWTP Priority Pollutants
Lab Report Number: 21-053-0046
Date: 3/2/2021

CASE NARRATIVE

Total Metals Method EPA-200.7
Sample 99373
Analyte: Calcium
QC Batch No: L538756
The matrix spike and/or the matrix spike duplicate was outside quality control acceptance ranges. A dilution test was performed and passed quality control acceptance ranges. No matrix interference is suspected.

Analyte: Magnesium
QC Batch No: L538756
The matrix spike and/or the matrix spike duplicate was outside quality control acceptance ranges. A dilution test was performed and passed quality control acceptance ranges. No matrix interference is suspected.

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Anniston Water Works and Sewer Board
Mr. Heath Denton
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Anniston , AL 36202

Project MWWTP Priority Pollutants
Information : Anniston, AL
Project #AL0024520

Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98730**
Sample ID : **Effluent Discharge - Grab**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:40**

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Method
Cyanide, Total	<0.005	mg/L	0.005	1	02/25/21 10:41	FMM	4500CNE-2011
HEM: Oil and Grease	<1.5	mg/L	1.5	1	03/01/21 16:20	CxC	1664B
Phenols (Total)	**0.056**	mg/L	0.050	1	03/01/21 10:00	CLP	EPA-420.1

Qualifiers/ Definitions
DF Dilution Factor
MQL Method Quantitation Limit
L Limit Exceeded

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Information : Anniston, AL
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Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98730**
Sample ID : **Effluent Discharge - Grab**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:40**

Analytical Method: 624.1 **Prep Batch(es):** **L538148** 02/25/21 07:50
Prep Method: 624.1

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
Acrolein	<20.0	µg/L	20.0	1	02/25/21 14:56	ELM	L538151
Acrylonitrile	<20.0	µg/L	20.0	1	02/25/21 14:56	ELM	L538151
Benzene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Bromodichloromethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Bromoform	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Bromomethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Carbon Tetrachloride	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Chlorobenzene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Chlorodibromomethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Chloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
2-Chloroethylvinyl Ether	<5.00	µg/L	5.00	1	02/25/21 14:56	ELM	L538151
Chloroform	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Chloromethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,2-Dichlorobenzene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,3-Dichlorobenzene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,4-Dichlorobenzene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,1-Dichloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,2-Dichloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,1-Dichloroethene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
cis-1,2-Dichloroethene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
trans-1,2-Dichloroethene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,2-Dichloroethene (Total)	<1.00	µg/L	1.00	1	02/25/21 14:56		L538151

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Project: MWWTP Priority Pollutants
Information : Anniston, AL
Project #AL0024520

Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98730**
Sample ID : **Effluent Discharge - Grab**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:40**

Analytical Method: 624.1 **Prep Batch(es):** **L538148** 02/25/21 07:50
Prep Method: 624.1

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
1,2-Dichloropropane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
cis-1,3-Dichloropropene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
trans-1,3-Dichloropropene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,3-Dichloropropene (Total)	<1.00	µg/L	1.00	1	02/25/21 14:56		L538151
Ethylbenzene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Trichlorotrifluoromethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Methylene Chloride	<10.0	µg/L	10.0	1	02/25/21 14:56	ELM	L538151
m,p-Xylene	<2.00	µg/L	2.00	1	02/25/21 14:56	ELM	L538151
o-Xylene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,1,1,2-Tetrachloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,1,2,2-Tetrachloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Tetrachloroethene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Toluene	<5.00	µg/L	5.00	1	02/25/21 14:56	ELM	L538151
1,1,1-Trichloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
1,1,2-Trichloroethane	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Trichloroethene	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Vinyl Chloride	<1.00	µg/L	1.00	1	02/25/21 14:56	ELM	L538151
Xylene (Total)	<1.00	µg/L	1.00	1	02/25/21 14:56		L538151
Surrogate: 4-Bromofluorobenzene	83.0		Limits: 71-131%	1	02/25/21 14:56	ELM	L538151
Surrogate: Dibromofluoromethane	83.6		Limits: 70-128%	1	02/25/21 14:56	ELM	L538151
Surrogate: 1,2-Dichloroethane - d4	114		Limits: 67-136%	1	02/25/21 14:56	ELM	L538151
Surrogate: Toluene-d8	89.8		Limits: 70-130%	1	02/25/21 14:56	ELM	L538151

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Project #AL0024520

Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98730**
Sample ID : **Effluent Discharge - Grab**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:40**

Analytical Method: 625.1 **Prep Batch(es):** **L537622** 02/23/21 11:30
Prep Method: 625.1

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
Acenaphthene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Acenaphthylene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Anthracene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Benzidine	<20.0	µg/L	20.0	1	02/24/21 01:42	CCB	L537822
Benzo(a)anthracene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Benzo(a)pyrene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Benzo(b)fluoranthene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Benzo(g,h,i)perylene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Benzo(k)fluoranthene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Bis(2-Chloroethoxy)methane	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Bis(2-Chloroethyl)ether	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Bis(2-Chloroisopropyl)ether	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Bis(2-ethylhexyl)phthalate	<10.0	µg/L	10.0	1	02/24/21 01:42	CCB	L537822
4-Bromophenyl phenyl ether	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Butyl benzyl phthalate	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
4-Chloro-3-methylphenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2-Chloronaphthalene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2-Chlorophenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
4-Chlorophenyl phenyl ether	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Chrysene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Dibenz(a,h)anthracene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
1,2-Dichlorobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Project MWWTP Priority Pollutants
Information : Anniston, AL
Project #AL0024520

Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98730**
Sample ID : **Effluent Discharge - Grab**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:40**

Analytical Method: 625.1 **Prep Batch(es):** **L537622** 02/23/21 11:30
Prep Method: 625.1

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
1,3-Dichlorobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
1,4-Dichlorobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
3,3'-Dichlorobenzidine	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2,4-Dichlorophenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Diethyl phthalate	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Dimethyl phthalate	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2,4-Dimethylphenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Di-n-butyl phthalate	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
4,6-Dinitro-2-methylphenol	<10.0	µg/L	10.0	1	02/24/21 01:42	CCB	L537822
2,4-Dinitrophenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2,4-Dinitrotoluene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2,6-Dinitrotoluene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Di-n-Octyl Phthalate	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
1,2-Diphenylhydrazine/Azobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Fluoranthene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Fluorene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Hexachlorobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Hexachlorobutadiene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Hexachlorocyclopentadiene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Hexachloroethane	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Indeno(1,2,3-cd)pyrene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Isophorone	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Information : Anniston, AL
Project #AL0024520

Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98730**
Sample ID : **Effluent Discharge - Grab**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:40**

Analytical Method: 625.1 **Prep Batch(es):** **L537622** 02/23/21 11:30
Prep Method: 625.1

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
Naphthalene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Nitrobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2-Nitrophenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
4-Nitrophenol	<10.0	µg/L	10.0	1	02/24/21 01:42	CCB	L537822
N-Nitrosodimethylamine	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
N-Nitrosodiphenylamine	<10.0	µg/L	10.0	1	02/24/21 01:42	CCB	L537822
N-Nitroso-di-n-propylamine	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Pentachlorophenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Phenanthrene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
Phenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Pyrene	<2.00	µg/L	2.00	1	02/24/21 01:42	CCB	L537822
1,2,4-Trichlorobenzene	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
2,4,6-Trichlorophenol	<5.00	µg/L	5.00	1	02/24/21 01:42	CCB	L537822
Surrogate: 2-Fluorobiphenyl	44.4		Limits: 30-107%	1	02/24/21 01:42	CCB	L537822
Surrogate: 2-Fluorophenol	16.6		Limits: 8-88%	1	02/24/21 01:42	CCB	L537822
Surrogate: Nitrobenzene-d5	41.7		Limits: 29-105%	1	02/24/21 01:42	CCB	L537822
Surrogate: Phenol-d6	10.9		Limits: 7-58%	1	02/24/21 01:42	CCB	L537822
Surrogate: 4-Terphenyl-d14	81.1		Limits: 30-130%	1	02/24/21 01:42	CCB	L537822
Surrogate: 2,4,6-Tribromophenol	57.0		Limits: 16-138%	1	02/24/21 01:42	CCB	L537822

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Project MWWTP Priority Pollutants
Information : Anniston, AL
Project #AL0024520

Report Date : 03/03/2021
Received : 02/19/2021

Danyale Love
Project Manager

Report Number : **21-053-0046**

REPORT OF ANALYSIS

Lab No : **98731**
Sample ID : **Effluent Discharge - Comp**

Matrix: **Aqueous**
Sampled: **2/17/2021 7:30**

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Method
Ammonia Nitrogen	<0.100	mg/L	0.100	1	02/23/21 09:28	MAR	4500NH3D-2011
Nitrate+Nitrite-N	**3.26**	mg/L	0.100	1	02/26/21 14:06	ZBD	4500NO3F-2011
Total Dissolved Solids	**192**	mg/L	50.0	1	02/22/21 17:12	CJR	2540C-2011
Total Kjeldahl Nitrogen	<1.00	mg/L	1.00	1	02/26/21 15:02	CLP	4500NORGD-2011
Phosphorus	**0.333**	mg/L	0.100	1	03/01/21 20:15	JADS	EPA-200.7
Antimony	<0.0100	mg/L	0.0100	1	03/01/21 20:15	JADS	EPA-200.7
Arsenic	<0.0100	mg/L	0.0100	1	03/01/21 20:15	JADS	EPA-200.7
Beryllium	<0.0010	mg/L	0.0010	1	03/01/21 20:15	JADS	EPA-200.7
Cadmium	<0.0020	mg/L	0.0020	1	03/01/21 20:15	JADS	EPA-200.7
Calcium	**36.5**	mg/L	0.500	1	03/01/21 20:15	JADS	EPA-200.7
Chromium	<0.0050	mg/L	0.0050	1	03/01/21 20:15	JADS	EPA-200.7
Copper	<0.0050	mg/L	0.0050	1	03/01/21 20:15	JADS	EPA-200.7
Hardness as CaCO3(SM-2340B)	**143**	mg/L	0.100	1	03/01/21 20:15		EPA-200.7
Lead	<0.0060	mg/L	0.0060	1	03/01/21 20:15	JADS	EPA-200.7
Magnesium	**12.7**	mg/L	0.100	1	03/01/21 20:15	JADS	EPA-200.7
Nickel	<0.0050	mg/L	0.0050	1	03/01/21 20:15	JADS	EPA-200.7
Selenium	<0.0100	mg/L	0.0100	1	03/01/21 20:15	JADS	EPA-200.7
Silver	<0.0050	mg/L	0.0050	1	03/01/21 20:15	JADS	EPA-200.7
Thallium	<0.0200	mg/L	0.0200	1	03/01/21 20:15	JADS	EPA-200.7
Zinc	<0.0200	mg/L	0.0200	1	03/01/21 20:15	JADS	EPA-200.7

Qualifiers/ Definitions

DF Dilution Factor
MQL Method Quantitation Limit
L Limit Exceeded

Waypoint ANALYTICAL

2790 Whitten Road, Memphis, TN 38133
Main 901.213.2400 ° Fax 901.213.2440
www.waypointanalytical.com

Shipment Receipt Form

Customer Number: **12798**
Customer Name: **Anniston Water Works and Sewer Board**
Report Number: **21-053-0046**

Shipping Method

○ Fed Ex	○ US Postal	○ Lab	○ Other :	
○ UPS	○ Client	● Courier	Thermometer ID:	T101

Shipping container/cooler uncompromised?	● Yes	○ No	
Number of coolers/boxes received	1		
Custody seals intact on shipping container/cooler?	● Yes	○ No	○ Not Present
Custody seals intact on sample bottles?	○ Yes	○ No	● Not Present
Chain of Custody (COC) present?	● Yes	○ No	
COC agrees with sample label(s)?	● Yes	○ No	
COC properly completed	● Yes	○ No	
Samples in proper containers?	● Yes	○ No	
Sample containers intact?	● Yes	○ No	
Sufficient sample volume for indicated test(s)?	● Yes	○ No	
All samples received within holding time?	● Yes	○ No	
Cooler temperature in compliance?	● Yes	○ No	
Cooler/Samples arrived at the laboratory on ice. Samples were considered acceptable as cooling process had begun.	● Yes	○ No	
Water - Sample containers properly preserved	● Yes	○ No	○ N/A
Water - VOA vials free of headspace	● Yes	○ No	○ N/A
Trip Blanks received with VOAs	○ Yes	● No	○ N/A
Soil VOA method 5035 – compliance criteria met	○ Yes	○ No	● N/A

☐ High concentration container (48 hr) ☐ Low concentration EnCore samplers (48 hr)

☐ High concentration pre-weighed (methanol -14 d) ☐ Low conc pre-weighed vials (Sod Bis -14 d)

Special precautions or instructions included?	○ Yes	● No

Comments:

Signature: Makayla Weaver Date & Time: 02/22/2021 11:54:26

Billing Information:

LRS, Inc.
P.O. Box 1260
205 6th Avenue
Ashville, Alabama 35953
(205) 594-1445
wgaston@lab-resource.com

LRS Client Information:

The Water Works and Sewer Board of the City of Anniston
P.O. Box 2268
Anniston, AL 36202

"Report to" Contact:
Mr. Heath Denton

Project Name: MWWTP Priority Pollutants

City/State collected: Anniston, Alabama

Collected by: Heath Denton

Client Project #: **AL0024520**

P.O. # 48206

Collected by (signature):

Packed on Ice? N___ Y___

Project Turnaround (Begins on Lab Login Date)

RUSH? Please Notify LRS
_____ Same Day (200%)
_____ Next Day (100%)
_____ Two Day (50%)
_____ Three Day (25%)

Date Results Needed:

Chain of Custody
Page 1 of 1

Laboratory Resources & Solutions, Inc. (LRS)
A Laboratory Service Provider

Laboratory:
Waypoint Analytical
2790 Whitten Road
Memphis, TN 38133

Sample ID	Comp/Grab	Matrix*	Depth	Date	Time	Number of Containers	Oil & Grease E1664 (One 1-liter amber glass, H2SO4-preserved)	Total Phenols E420.1 (One 1-liter amber glass, H2SO4-preserved)	Total Cyanide SM4500CN (One 250-mL HDPE, NaOH-preserve	TTOs E624.1 (Two 40-mL glass VOA vials, HCl-preserved)	Trichlorotrifluoromethane, Xylene E624.1	TTOs E625.1 (One 1-liter amber glass, non-preserved)	TDS SM2540C (One 500-mL HDPE, non-preserved)	Total Ammonia SM4500NH3	TKN SM4500Norg (One 1-liter HDPE, H2SO4-preserved)	NO2/NO3 SM4500NO3	Total Metals E200.7 (One 250-mL HDPE, HNO3-preserved)	Sb, As, Be, Cd, Cr, Cu, Pb, Ni, P, Se, Ag, Tl, Zn	Hardness as CaCO3 SM2340B	Sample Remarks
Effluent Discharge - Grab	Grab	WW	******	2.17.21	7:40	6	X	X	X		X	X								
Effluent Discharge - Comp.	Comp.	WW	******	2.17.21	7:30	3							X		X			X		

21-053-0046
12798
02-22-2021
11:53:59
Anniston Water Works and Sewer Board
MWWTP Priority Pollutants

Custody Seals received on:
Cooler(s)/Container(s)

pH Meter Number _____ Date
3 pt. Calibration 7.00 _____ Time
4.01 _____
10.00 _____
Cal. Check (7.00) Reads @

*Matrix: SS-Soil/Solid GW-Groundwater WW-Wastewater SW-Surface Water DW-Drinking Water OT- Other (Describe)_____ pH_____ Temp_____

Project Remarks: Rainfall in Inches _____ Flow_____ Other_____

Relinquished by: (Signature)	Date:	Time:	Received by: (Signature)	Samples returned via: FedEx__ UPS__ Other X	Condition (lab use only)
	2-18-21	1241			10659143
Relinquished by: (Signature)	Date:	Time:	Received by: (Signature)	Temp: 1.7°C T101	Bottles Received:
	2-18-21	1700			
Relinquished by: (Signature)	Date:	Time:	Received for lab by: (Signature)	Date: 3.5°C THERM	Time: 1610
					pH Checked: NCF

Client signature implies acceptance of LRS Terms and Conditions, which can be viewed online at www.lab-resource.com

2/19/21

The Water Works and Sewer Board of the City of Anniston, Alabama
931 Noble Street, Suite 200 - P.O. Box 2268
Anniston, AL 36202
www.awwsb.org
256-241-2000

October 28, 2022

Mr. Michael Simmons
Municipal Section
NPDES Permit Branch
Water Division
Alabama Department of Environmental Management
1400 Coliseum Boulevard
Montgomery, AL 36130-1463

Re: NPDES Permit Renewal
McClellan WWTP- Permit AL0024520

Michael,

Per our telephone conversation, stormwater outfalls 003S, 004S, 005S and 006S are no longer listed in the application and are no longer existing outfalls at the plant. Site grading during the construction project completed in 2019 allowed for the plant to have one outfall, 002S.

Please let me know if you need additional information or have any questions.

Sincerely,

By Clifton Osborne

Clifton Osborne, P.E.
Project Engineer

EPA Identification Number	NPDES Permit Number	Facility Name
	AL002450	McClellan WWTP

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

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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
002S	Cane Creek	33° 43′ 39″ N	-85° 48′ 24″ 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
	AL002450	McClellan WWTP	

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)	
002S	0.45	*specify units* Acre	6.0	*specify units* Acre
		specify units		*specify units*
		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.)

Municipal wastewater sludge is temporarily stored at the until it is hauled to an offsite landfill. Sludge is stored in drying beds or in a covered sludge handling area.

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)
002S	Chemical pollutants are stored indoors.	NA

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL002450	McClellan WWTP	

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
Ed Turner	General Manager
Signature	**Date signed**
Ed Turner	10-28-2022

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.

NA

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

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MUNICIPAL SECTION

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	LRS, Inc.		
Laboratory address	205 6th Ave Ashville,, AL 35953		
Phone number	(205) 594-1445		
Pollutant(s) analyzed	Oil and Grease, Phosphorus, Nitrate-Nitrite Ammonia TKN CBOD TSS		

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

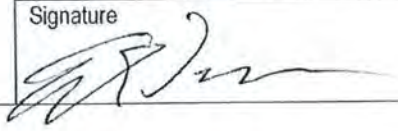
Checklist and Certification Statement

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
Edward A. Turner	General Manager
Signature	Date signed
	3-1-2022

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AL002450	McClellan WWTP	

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	1.5 mg/L		0.40 mg/L		4	
2.	Biochemical oxygen demand (BOD_5)	NA		NA			
3.	Chemical oxygen demand (COD)	NA		NA			
4.	Total suspended solids (TSS)	3,200 mg/L		1,489 mg/L		4	
5.	Total phosphorus	6.65 mg/L		2.69 mg/L		4	
6.	Total Kjeldahl nitrogen (TKN)	8.57 mg/L		3.14 mg/L		4	
7.	Total nitrogen (as N)	NA		NA			
8.	pH (minimum)	6.0 s.u.				4	
	pH (maximum)	8.93 s.u.				4	

[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
	AL002450	McClellan WWTP	

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

TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(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		
NH3-N	1.5 mg/L		0.40 mg/L		4	
TKN	8.57 mg/L		3.14 mg/L		4	
NO2-NO3	0.303 mg/L		0.11 mg/L		4	
E Coli	10,000 #/100 ml		2,780 #/100 ml		4	
CBOD	6.0 mg/L		4.0 mg/L		4	

[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
	AL002450	McClellan WWTP	

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		

[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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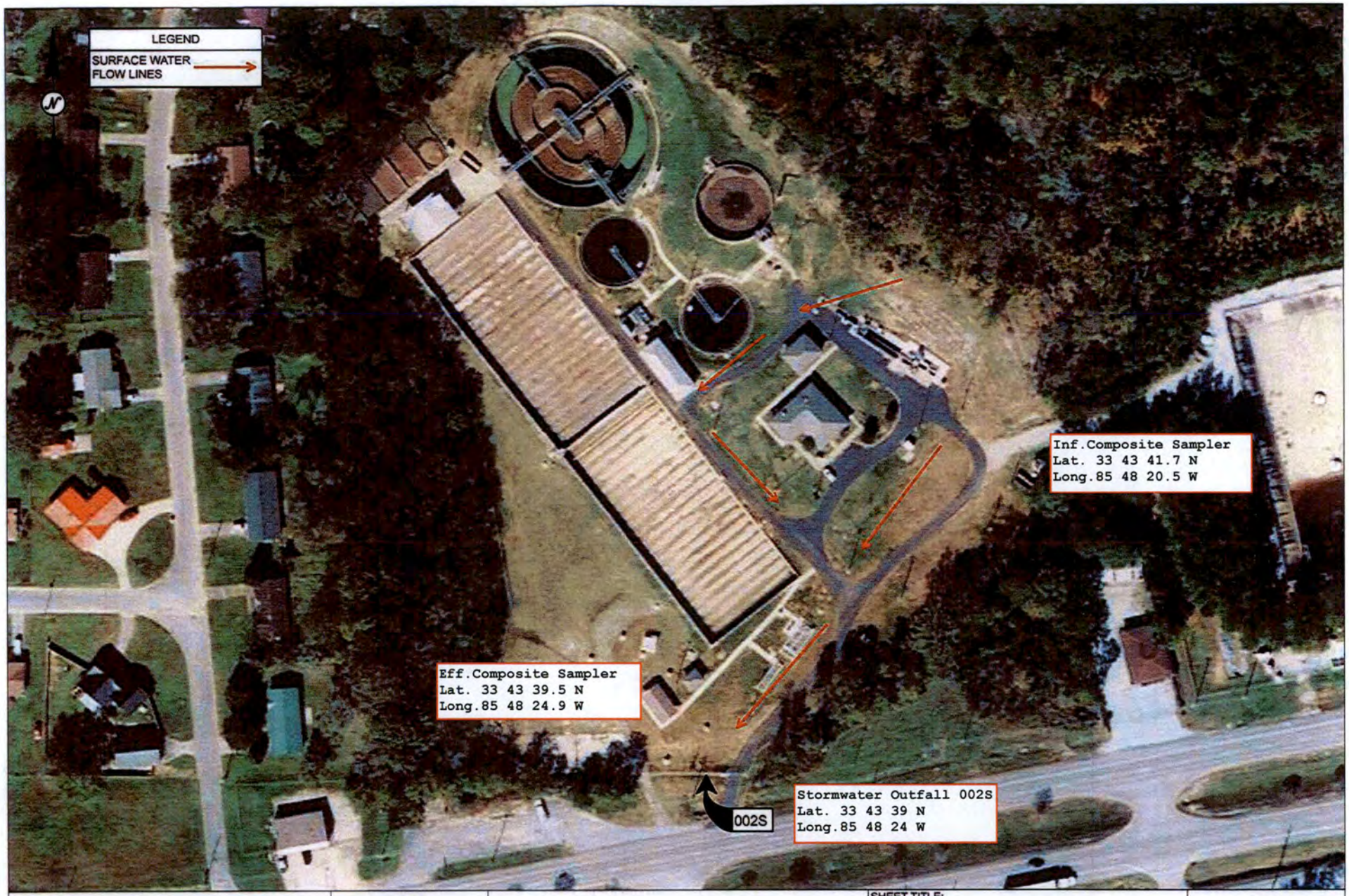
EPA Identification Number	NPDES Permit Number	Facility name	Outfall Number
	AL002450	McClellan WWTP	

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)
n/a					

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



ANNISTON WATER WORKS AND SEWER BOARD

931 NOBLE STREET STE 200
ANNISTON, AL 36202

ANNISTON WATER WORKS & SEWER BOARD

MCCLELLAN WWTP

35 FRIENDSHIP ROAD
OXFORD, AL 36203

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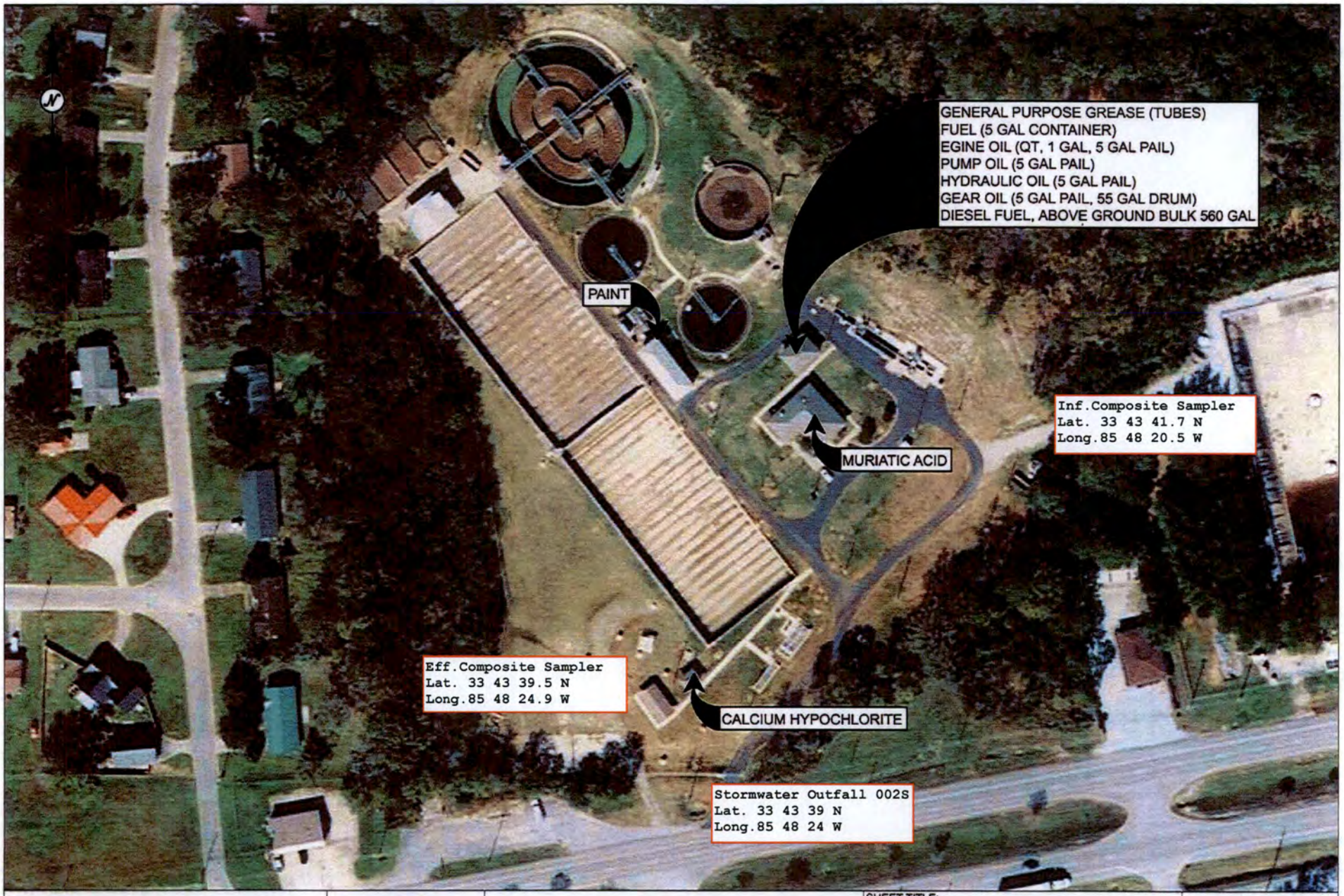
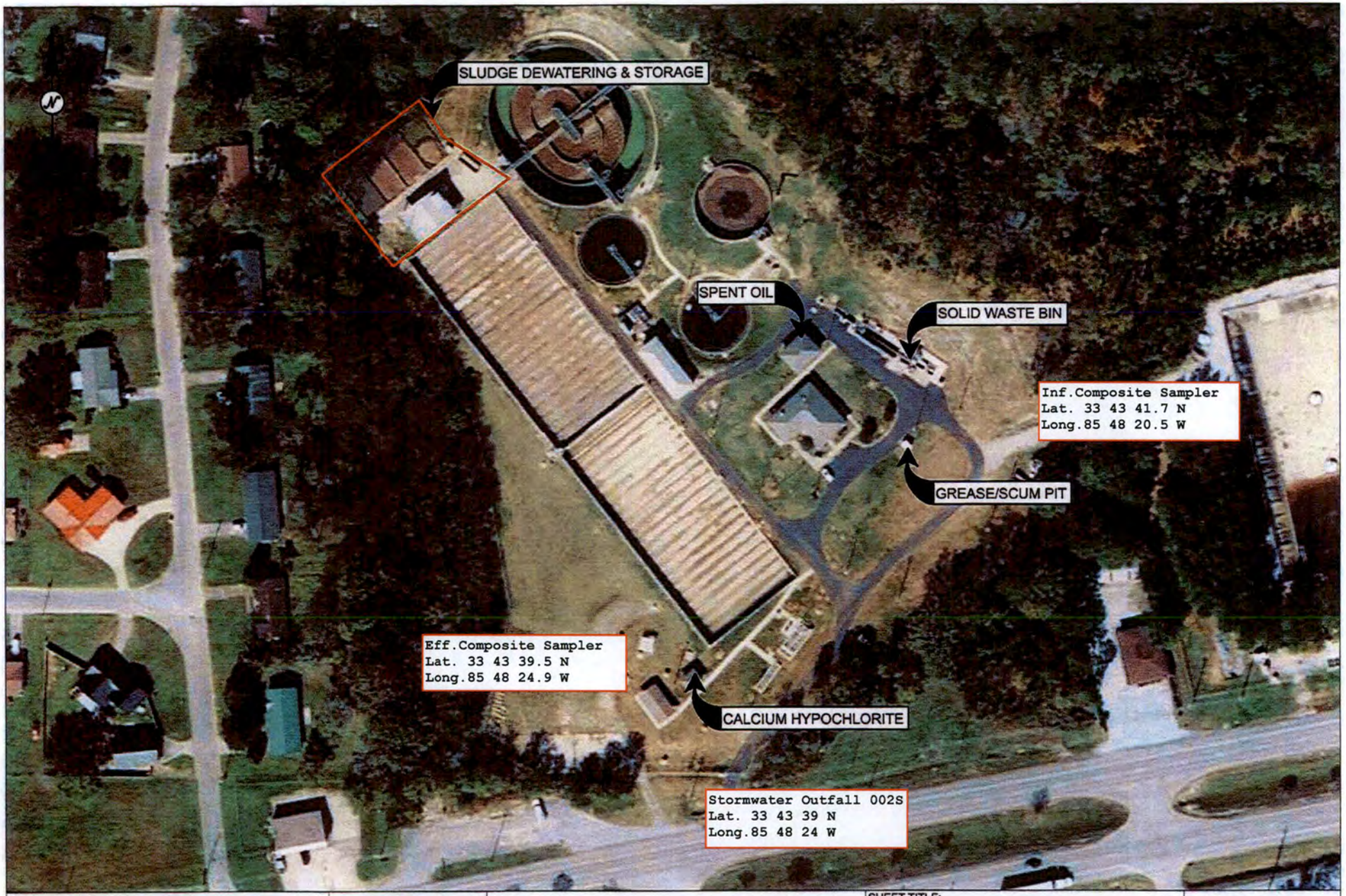
SHEET TITLE: STORMWATER SYSTEM		SHEET EXHIBIT
ISSUE DATE: 02/22/2022	SCALE: NOT TO SCALE	B
PROJECT NUMBER: —	DRAWN BY: LF	
SEQUENCE: 2 OF 6	CHECKED BY: CO	



ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	MCCLELLAN WWTP 35 FRIENDSHIP ROAD OXFORD, AL 36203	SHEET TITLE: CHEMICALS STORED ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: — DRAWN BY: LF SEQUENCE: 3 OF 6 CHECKED BY: CO

SHEET EXHIBIT

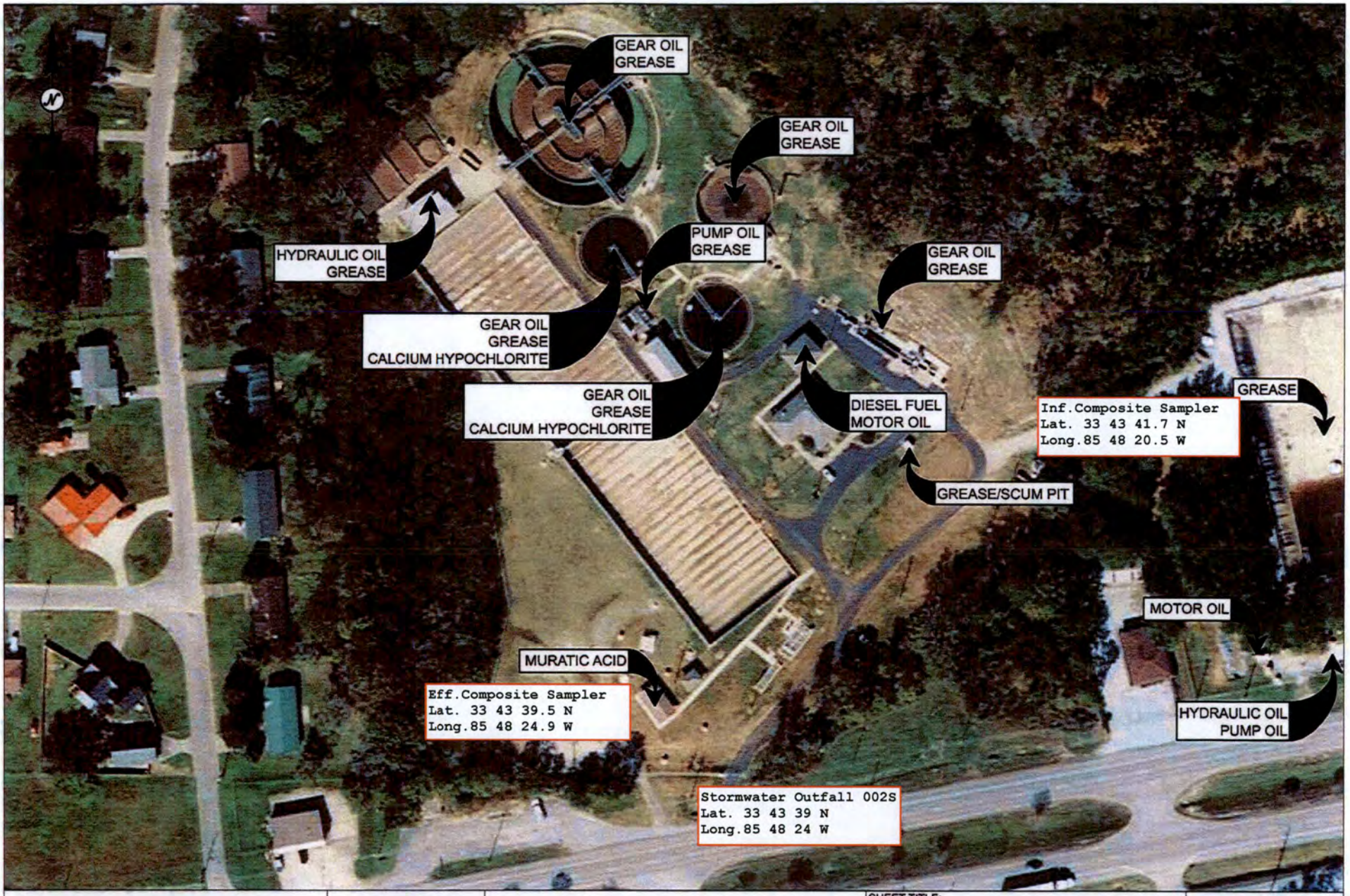
C



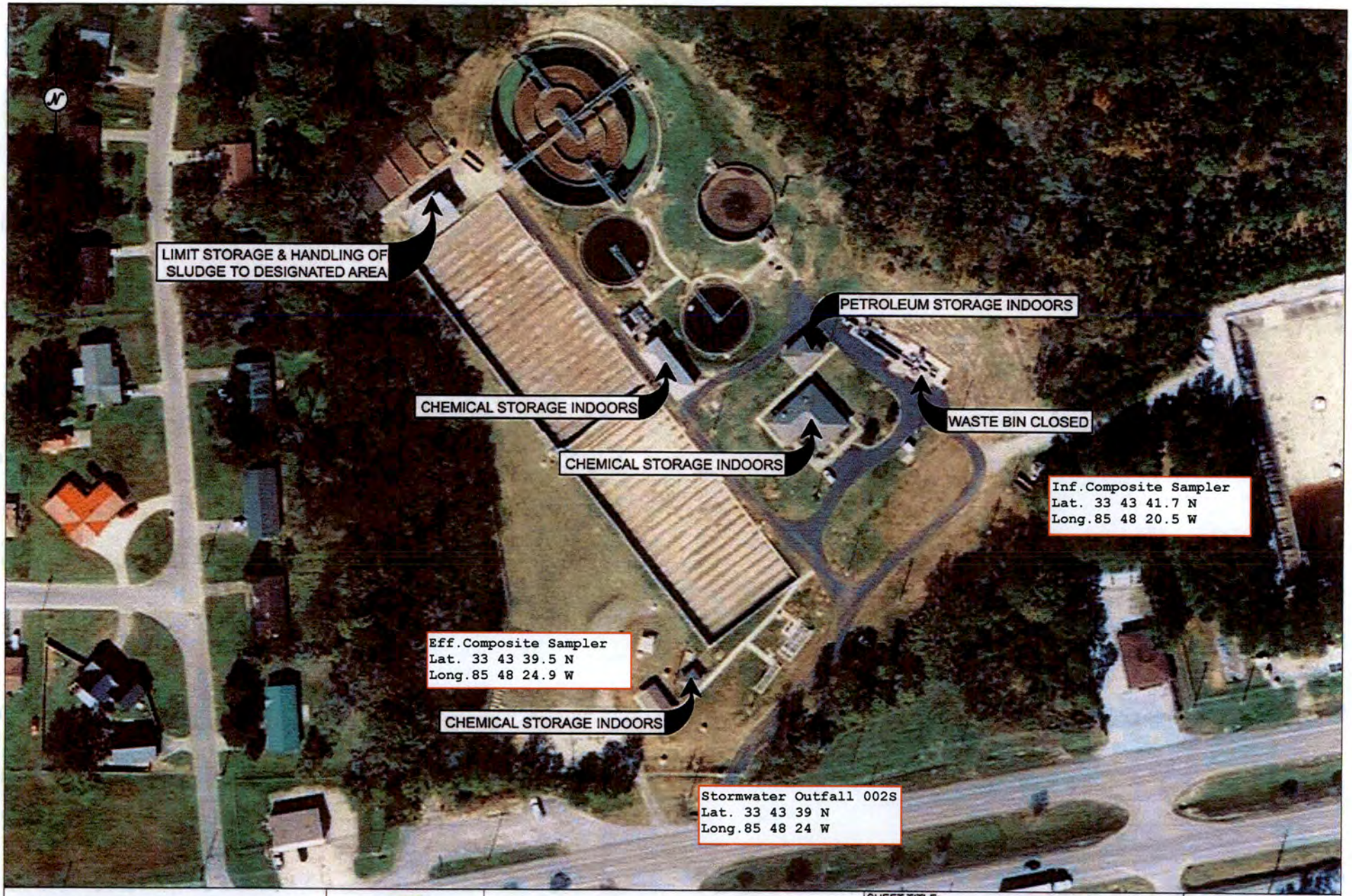
ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	MCCLELLAN WWTP 35 FRIENSHIP ROAD OXFORD, AL 36203	SHEET TITLE: WASTE STORED ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: — DRAWN BY: LF SEQUENCE: 4 OF 6 CHECKED BY: CO

SHEET EXHIBIT

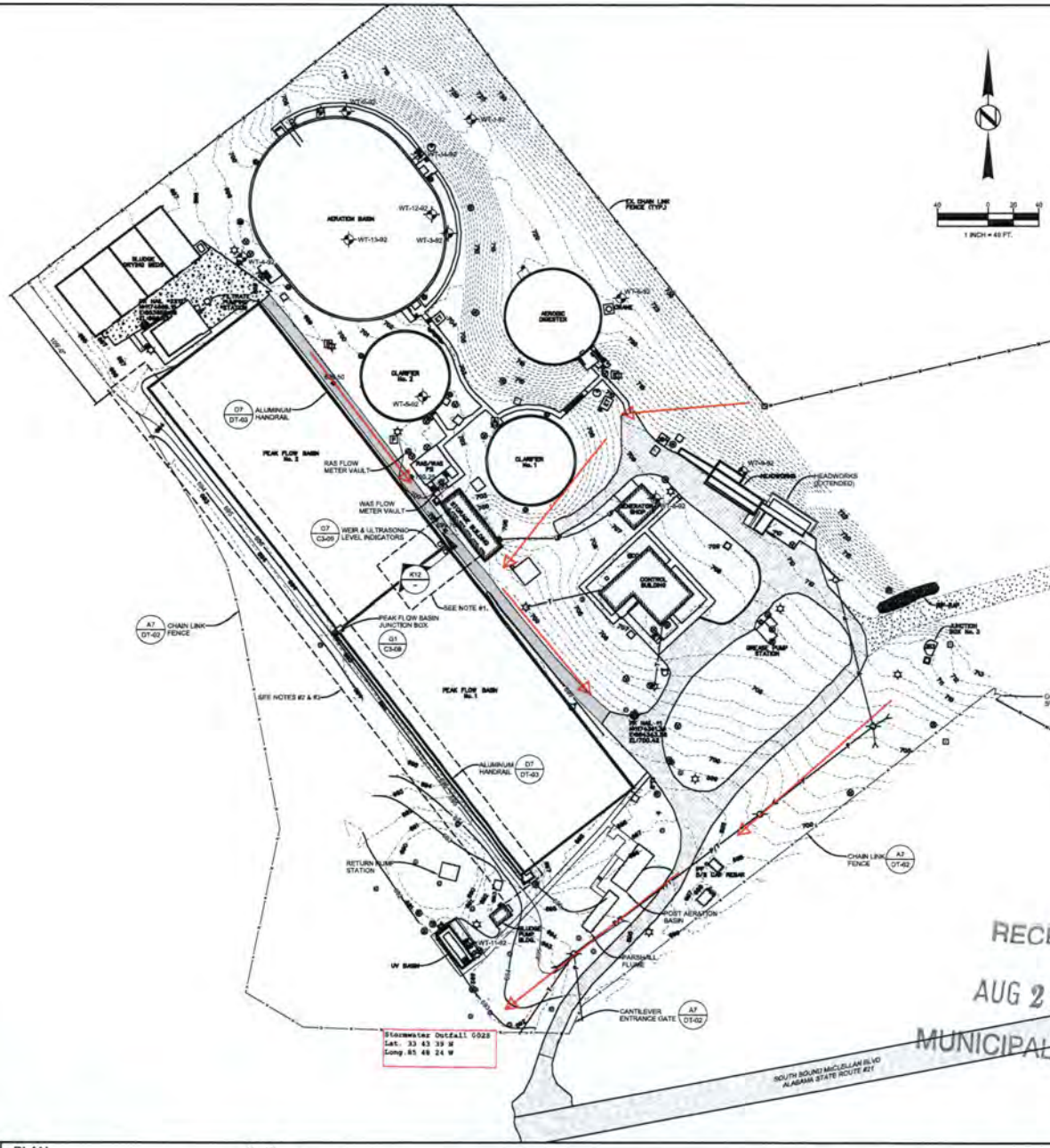
D

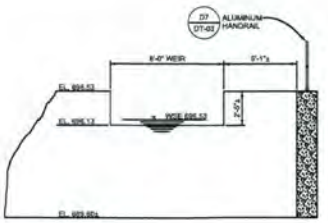


ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	MCCLELLAN WWTP 35 FRIENDSHIP ROAD OXFORD, AL 36203	SHEET TITLE: CHEMICALS USED ISSUE DATE: 02/22/2022 SCALE: NOT TO SCALE PROJECT NUMBER: ---- DRAWN BY: LF SEQUENCE: 5 OF 6 CHECKED BY: CO
			SHEET EXHIBIT E



ANNISTON WATER WORKS AND SEWER BOARD 931 NOBLE STREET STE 200 ANNISTON, AL 36202	ANNISTON WATER WORKS & SEWER BOARD	MCCLELLAN WWTP 35 FRIENDSHIP ROAD OXFORD, AL 36203	SHEET TITLE: CONTROL MEASURES	SHEET EXHIBIT
			ISSUE DATE: 02/22/2022	SCALE: NOT TO SCALE
			PROJECT NUMBER: —	DRAWN BY: LF
			SEQUENCE: 6 OF 6	CHECKED BY: CO
				F





NOTE: CUT EXISTING CONCRETE WALL TO DIMENSIONS SHOWN. 1/4" = 1'-0"

K12 | SECTION - WEIR @ PEAK FLOW BASIN No. 1 & 2

NOTES:

1: INCLUDE GRADING (FILL) ALONG SOUTHWEST WALL OF PEAK FLOW BASIN No. 1 AND No. 2, ALUMINUM HANDRAIL ALONG THE SAME WALL, AND NEW WEIR CUT BETWEEN PEAK FLOW BASIN No. 1 AND No. 2.

2: PEAK FLOW BASIN No. 1 AND No. 2 CONCRETE CRACK REPAIR ALONG SOUTHWEST WALL.

3: PEAK FLOW BASIN No. 1 AND No. 2 SOUTHWEST WALL INTERIOR SURFACE PROTECTIVE COATINGS.

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GEOTECHNICAL LEGEND

WT-X-92 APPROXIMATE LOCATION OF SOIL BORING

NOTE: GEOTECHNICAL DATA PROVIDED BY U.S. ARMY CORPS OF ENGINEERS AS PART OF THE 1992 FORT McCLELLAN, ALABAMA WASTEWATER TREATMENT MODERNIZATION.

A1 | PLAN 1" = 40'

KREBS

ANNISTON WATER WORKS AND SEWER BOARD
FORT McCLELLAN WWTP IMPROVEMENTS
ANNISTON, ALABAMA

Anniston Water Works

Designed:	Project No.:
STL/NDW	17045
Drawn: CLM/TTM	
Checked: CLO	

No.	Date	Description
1	10/01/19	RECORD DRAWINGS

RECORD DRAWING

Sheet Title: OVERALL SITE GRADING PLAN

Issue Date: FEB., 2018

Sequence: 25 of 92

Sheet No.: C3-02

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

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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	

PART 1, SECTION 4. POLLUTANT CONCENTRATIONS (40 CFR 122.21(c)(2)(ii)(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) _____			
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
	AL0024520	McClellan 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	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

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
	AL0024520	McClellan WWTP	

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 McCellan WWTP			
	Mailing address (street or P.O. box) 6112 McClellan Blvd.			
	City or town Anniston	State AL	ZIP code 36206	Phone number (256) 241-2000
	Contact name (first and last) Edward Turner	Title General Manager	Email address eturner@awwsb.org	
	Location address (street, route number, or other specific identifier) ☐ Same as mailing address			
	City or town	State	ZIP code	
1.2	Is this facility a Class I sludge management facility? ☐ Yes ☑ No			
1.3	**Facility Design Flow Rate**	2.2 million gallons per day (mgd)		
1.4	**Total Population Served**	1,900 +/-		
1.5	**Ownership Status** ☐ Public—federal ☐ Public—state ☑ Other public (specify) The Water Works and Sewer Board of the City of Anniston ☐ 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 The Water Works and Sewer Board of the City of Anniston			
	Applicant mailing address (street or P.O. box) PO Box 2268			
	City or town Anniston		State AL	ZIP code 36202
	Contact name (first and last) Edward A. Turner	Title General Manager	Phone number (256) 241-2000	Email address eturner@awwsb.org
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)			

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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.	AL0024520

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
Arsenic	1.99	6010D	10.9
Cadmium	0.67	6010D	2.17
Chromium	15.73	6010D	5.43
Copper	147.70	6010D	10.9
Lead	17.26	6010D	6.52
Mercury	0.50	7471A	0.326
Molybdenum	3.64	6010D	5.46
Nickel	11.92	6010D	5.43
Selenium	4.33	6010D	10.9
Zinc	240.27	6010D	17.6

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
Edward A. Turner	General Manager
Signature	Date signed 3-1-2022
Telephone number (256) 241-2000	[redacted]

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.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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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: 81

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

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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) n/a

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

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.

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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.			81

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
	AL0024520	McClellan WWTP	

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

2.48	Name of landfill: See Attached			
	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
2.49	Total dry metric tons of sewage sludge from your facility placed in this municipal solid waste landfill per 365-day period:	81		
2.50	List the numbers of all other federal, state, and local permits that regulate the operation of this municipal solid waste landfill.			

Permit Number	Type of Permit

2.51	Attach to the application information to determine whether the sewage sludge meets applicable requirements for disposal of sewage sludge in a municipal solid waste landfill (e.g., results of paint filter liquids test and TCLP test). ☐ 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
	AL0024520	McClellan 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
	AL0024520	McClellan 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
	AL0024520	McClellan 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.

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

11/4/2021

Delivered Via Email to Phillip Burgett

RE: Waste Certification
Municipal Wastewater Sludge Mixture

The Alabama Department of Environmental Management has reviewed your waste certification received on 11/1/2021 and has assigned a Certification Number for this waste as shown below.

Waste Profile #: CT7653	Fort Mcclellan WWTP
Certification #: SW-113023-E002	6112 McClellan Boulevard
Expiration Date of Certification: 11/30/2023	Anniston, AL

In your certification you requested one or more landfills be approved to receive your waste. Based on our review of the waste and the landfills requested, the waste is approved for disposal in the following landfills:

Three Corners Landfill	10-02
Star Ridge Landfill	58-05
Highway 70 MSWLF	59-15
Cedar Hill Landfill	58-01

You should provide this approval letter to the landfill(s) listed above and contact the landfill to determine any special handling requirements for this waste prior to delivery to the landfill. According to ADEM regulations, the landfill may not receive this waste unless it has received a waste certification approval. For waste generated on a routine basis (not a one-time occurrence), another written certification for this waste stream should be submitted to ADEM prior to the expiration date listed above or at any time the process producing the waste changes. Each submittal should include a completed Solid Waste Profile Sheet, any supporting documentation including current analytical, and the appropriate fee. Current analytical consists of analysis performed within the past six months.

If at any time before the expiration date of this certification, new analysis of the waste is performed, the new results will supersede any prior analysis from the time the samples are taken. If the new analysis indicates the waste is still non-hazardous, the waste may continue to be disposed of at the landfill listed above until the expiration date of this certification. If the new analysis indicates the waste is hazardous, this certification is revoked. Each time new analysis is performed on the waste, copies of the analytical results should be provided to ADEM and the landfill until this certification expires. The generator should not dispose of the waste prior to the receipt and review of the sampling results. Furthermore, this approval letter does not exempt Fort Mcclellan WWTP from complying with all applicable requirements of the ADEM Administrative Code. If you have any questions concerning this approval or the approval process, please contact Ms. Bailee Dykes at 334-279-3061.

Sincerely,

Brent A. Watson

Brent A. Watson, Chief
Compliance and Enforcement Section
Land Division

BAW/bld

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)

LRS, Inc.

Laboratory Resources & Solutions, Inc.
P.O. Box 1260
205 6th Avenue
Ashville, AL 35953
(205) 594-1445
www.lab-resource.com

Analytical Data Report

Client: **The Water Works and Sewer Board of the City of Anniston**
P.O. Box 2268
Anniston, AL 36202

Attention: Mr. Heath Denton

Project ID: **MWWTP Form 300** (September 22, 2021)

Laboratory Report Number: **21-267-0081**

Report Date: October 7, 2021

Data Reviewed by:

Wayne T. Gaston

Wayne Gaston
Project Manager
Laboratory Resources & Solutions, Inc.
wgaston@lab-resource.com

- Unless otherwise noted, all analysis on this report performed at Waypoint Analytical, Inc., 2790 Whitten Road, Memphis, TN 38133. NELAC #460181
- These results relate only to the items tested. This report may only be reproduced in full.
- Local support services for this project are provided by Laboratory Resources & Solutions, Inc. (LRS). All questions regarding this report should be directed to LRS, Inc. at (205) 594-1445.

Waypoint ANALYTICAL

2790 Whitten Road, Memphis, TN 38133
Main 901.213.2400 ° Fax 901.213.2440
www.waypointanalytical.com

10/5/2021

Anniston Water Works and Sewer Board
Mr. Heath Denton
P.O. Box 2268
Anniston, AL, 36202

Ref: Analytical Testing
Lab Report Number: 21-267-0081
Client Project Description: MWWTP Form 300
Anniston, AL

Dear Mr. Heath Denton:
Waypoint Analytical, LLC. received sample(s) on 9/24/2021 for the analyses presented in the following report.

The above referenced project has been analyzed per your instructions. The analyses were performed in accordance with the applicable analytical method. Where the laboratory was not responsible for the sampling stage (refer to the chain of custody) results apply to the sample as received.

The analytical data has been validated using standard quality control measures performed as required by the analytical method. Quality Assurance, method validations, instrumentation maintenance and calibration for all parameters (NELAP and non-NELAP) were performed in accordance with guidelines established by the USEPA (including 40 CFR 136 Method Update Rule August 2017) and NELAC unless otherwise indicated. Any parameter for which the laboratory is not officially NELAP accredited is indicated by a '~' symbol. These are not included in the scope because NELAP accreditation is either not available or has not been applied for. Additional certifications may be held/are available for parameters, where NELAP accreditation is not required or applicable. A full list of certifications is available upon request.

Certain parameters (chlorine, pH, dissolved oxygen, sulfite...) are required to be analyzed within 15 minutes of sampling. Usually, but not always, any field parameter analyzed at the laboratory is outside of this holding time. Refer to sample analysis time for confirmation of holding time compliance.

The results are shown on the attached Report of Analysis(s). Results for solid matrices are reported on an as-received basis unless otherwise indicated. This report shall not be reproduced except in full and relates only to the samples included in this report.

Please do not hesitate to contact me or client services if you have any questions or need additional information.

Sincerely,

Kim Storey

Kim S Storey

Laboratory's liability in any claim relating to analyses performed shall be limited to, at laboratory's option, repeating the analysis in question at laboratory's expense, or the refund of the charges paid for performance of said analysis.

Waypoint ANALYTICAL

2790 Whitten Road, Memphis, TN 38133
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Certification Summary

Laboratory ID: WP MTN: Waypoint Analytical, LLC., Memphis, TN

State	Program	Lab ID	Expiration Date
Alabama	State Program	40750	02/28/2022
Arkansas	State Program	88-0650	02/07/2022
California	State Program	2904	06/30/2022
Florida	State Program - NELAP	E871157	06/30/2022
Georgia	State Program	C044	02/18/2023
Georgia	State Program	04015	06/30/2022
Illinois	State Program - NELAP	200078	10/10/2022
Kentucky	State Program	80215	06/30/2022
Kentucky	State Program	KY90047	12/31/2021
Louisiana	State Program - NELAP	LA037	12/31/2021
Louisiana	State Program - NELAP	04015	06/30/2022
Mississippi	State Program	MS	02/11/2023
North Carolina	State Program	415	12/31/2021
Pennsylvania	State Program - NELAP	68-03195	05/31/2022
South Carolina	State Program	84002	06/30/2022
South Carolina	State Program	84002	06/30/2022
Tennessee	State Program	02027	02/11/2023
Tennessee	A2LA ISO 17025:2017	4313.01	10/31/2021
Texas	State Program - NELAP	T104704180	09/30/2022
Virginia	State Program	00106	06/30/2022
Virginia	State Program - NELAP	460181	09/14/2022

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Sample Summary Table

Report Number: 21-267-0081

Client Project Description: MWWTP Form 300
Anniston, AL

Lab No	Client Sample ID	Matrix	Date Collected	Date Received
91839	MWWTP Sludge	Solid	09/22/2021 06:55	09/24/2021
91840	MWWTP Sludge	Solids	09/22/2021 06:55	09/24/2021

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Client: Anniston Water Works and Sewer Board
Project: MWWTP Form 300
Lab Report Number: 21-267-0081
Date: 10/5/2021

CASE NARRATIVE

Report revised for 9071 analysis run using higher sample volume.

Flashpoint Method ASTM D93-80
QC Batch No: L577338
The sample analysis was performed using a modified version of the reference method. Due to the sample matrix, the continual stirring required by the method had to be omitted.

High Temp/Pressure Extraction for PCB's Method 3546
Sample 91840 (MWWTP Sludge)
QC Batch No: L576508/L576508
The weight/volume extracted was reduced during the extraction procedure due to the nature of the sample. Reporting limits are factored for the sample size reduction.

Semivolatile Organic Compounds - GC/MS (TCLP) Method 8270D
Sample 91839 (MWWTP Sludge)
QC Batch No: L576951/L576725
The sample was diluted due to the nature of the sample matrix. Reporting limits have been adjusted accordingly.

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12798
Anniston Water Works and Sewer Board
Mr. Heath Denton
P.O. Box 2268
Anniston , AL 36202

Project MWWTP Form 300

Information : Anniston, AL

Revised Report Date: 10/07/2021
Received : 09/24/2021

Kim S Storey

Report Number : **21-267-0081**

REPORT OF ANALYSIS

Lab No : **91839**
Sample ID : **MWWTP Sludge**

Matrix: **Solid**
Sampled: **9/22/2021 6:55**

Analytical Method: 1311

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP Metals Extraction	**Leachate**			1	09/27/21 12:00	JAN	L576062
TCLP VOC ZHE Extraction	**Leachate**			1	09/27/21 12:00	JAN	L576068
TCLP SVOC Extraction	**Leachate**			1	09/27/21 12:00	JAN	L576062
TCLP Pesticide Extraction	**Leachate**			1	09/27/21 12:00	JAN	L576062
TCLP Herbicide Extraction	**Leachate**			1	09/27/21 12:00	JAN	L576062

Analytical Method: 6010D **Prep Batch(es):** **L576526** 09/29/21 12:00
Prep Method: 3015A

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP Arsenic	<0.250	mg/L	0.250	1	09/30/21 01:27	JTR	L576676
TCLP Barium	<0.250	mg/L	0.250	1	09/30/21 01:27	JTR	L576676
TCLP Cadmium	<0.0500	mg/L	0.0500	1	09/30/21 01:27	JTR	L576676
TCLP Chromium	<0.100	mg/L	0.100	1	09/30/21 01:27	JTR	L576676
TCLP Lead	<0.100	mg/L	0.100	1	09/30/21 01:27	JTR	L576676
TCLP Selenium	<0.500	mg/L	0.500	1	09/30/21 01:27	JTR	L576676
TCLP Silver	<0.0500	mg/L	0.0500	1	09/30/21 01:27	JTR	L576676

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Information : Anniston, AL

Revised Report Date: 10/07/2021
Received : 09/24/2021

Kim S Storey

Report Number : **21-267-0081**

REPORT OF ANALYSIS

Lab No : **91839**
Sample ID : **MWWTP Sludge**

Matrix: **Solid**
Sampled: **9/22/2021 6:55**

Analytical Method: 7470A **Prep Batch(es):** **L576484** 09/29/21 10:00
Prep Method: 7470A

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP Mercury	<0.0200	mg/L	0.0200	1	09/29/21 15:17	TJS	L576581

Analytical Method: 8081A **Prep Batch(es):** **L576587** 09/29/21 15:00
Prep Method: 3510C

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP Chlordane	<0.008000	mg/L	0.008000	10	09/30/21 18:38	VIC	L576988
TCLP Endrin	<0.001600	mg/L	0.001600	10	09/30/21 18:38	VIC	L576988
TCLP gamma-BHC	<0.001600	mg/L	0.001600	10	09/30/21 18:38	VIC	L576988
TCLP Heptachlor	<0.001600	mg/L	0.001600	10	09/30/21 18:38	VIC	L576988
TCLP Heptachlor Epoxide	<0.001600	mg/L	0.001600	10	09/30/21 18:38	VIC	L576988
TCLP Methoxychlor	<0.001600	mg/L	0.001600	10	09/30/21 18:38	VIC	L576988
TCLP Toxaphene	<0.01200	mg/L	0.01200	10	09/30/21 18:38	VIC	L576988
Surrogate: Decachlorobiphenyl	50.21		Limits: 34-116%	10	09/30/21 18:38	VIC	L576988
Surrogate: Tetrachloro-m-xylene	52.46		Limits: 25-123%	10	09/30/21 18:38	VIC	L576988

Analytical Method: 8151A **Prep Batch(es):** **L576392** 09/28/21 16:20
Prep Method: 8151A

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP 2,4-D	<0.0200	mg/L	0.0200	1	09/30/21 15:45	VIC	L576985
TCLP 2,4,5-TP (Silvex)	<0.0020	mg/L	0.0020	1	09/30/21 15:45	VIC	L576985
Surrogate: DCAA	48.60		Limits: 20-120%	1	09/30/21 15:45	VIC	L576985

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Project MWWTP Form 300

Information : Anniston, AL

Revised Report Date: 10/07/2021
Received : 09/24/2021

Kim S Storey

Report Number : **21-267-0081**

REPORT OF ANALYSIS

Lab No : **91839**
Sample ID : **MWWTP Sludge**

Matrix: **Solid**
Sampled: **9/22/2021 6:55**

Analytical Method: 8260B **Prep Batch(es):** **L576328** 09/28/21 08:19
Prep Method: 5030B

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP Benzene	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP Carbon Tetrachloride	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP Chlorobenzene	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP Chloroform	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP 1,4-Dichlorobenzene	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP 1,2-Dichloroethane	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP 1,1-Dichloroethene	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP Methyl Ethyl Ketone (MEK)	<0.200	mg/L	0.200	1	09/28/21 17:48	ELM	L576336
TCLP Tetrachloroethene	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP Trichloroethene	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
TCLP Vinyl Chloride	<0.0100	mg/L	0.0100	1	09/28/21 17:48	ELM	L576336
Surrogate: 4-Bromofluorobenzene	83.0		Limits: 71-137%	1	09/28/21 17:48	ELM	L576336
Surrogate: Dibromofluoromethane	108		Limits: 70-128%	1	09/28/21 17:48	ELM	L576336
Surrogate: 1,2-Dichloroethane - d4	116		Limits: 63-136%	1	09/28/21 17:48	ELM	L576336
Surrogate: Toluene-d8	87.0		Limits: 70-130%	1	09/28/21 17:48	ELM	L576336

Analytical Method: 8270D **Prep Batch(es):** **L576725** 09/30/21 10:00
Prep Method: 3510C

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP 2-Methylphenol	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP 3&4 Methylphenol	<0.200	mg/L	0.200	5	09/30/21 18:17	VBW	L576951
TCLP 2,4-Dinitrotoluene	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Information : Anniston, AL

Revised Report Date: 10/07/2021
Received : 09/24/2021

Kim S Storey

Report Number : **21-267-0081**

REPORT OF ANALYSIS

Lab No : **91839**
Sample ID : **MWWTP Sludge**

Matrix: **Solid**
Sampled: **9/22/2021 6:55**

Analytical Method: 8270D **Prep Batch(es):** **L576725** 09/30/21 10:00
Prep Method: 3510C

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
TCLP Hexachlorobenzene	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP Hexachlorobutadiene	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP Hexachloroethane	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP Nitrobenzene	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP Pentachlorophenol	<0.200	mg/L	0.200	5	09/30/21 18:17	VBW	L576951
TCLP Pyridine	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP 2,4,5-Trichlorophenol	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
TCLP 2,4,6-Trichlorophenol	<0.100	mg/L	0.100	5	09/30/21 18:17	VBW	L576951
Surrogate: TCLP 2,4,6-Tribromophenol	66.5		Limits: 42-102%	5	09/30/21 18:17	VBW	L576951
Surrogate: TCLP 2-Fluorobiphenyl	48.3		Limits: 24-86%	5	09/30/21 18:17	VBW	L576951
Surrogate: TCLP 2-Fluorophenol	21.7		Limits: 13-37%	5	09/30/21 18:17	VBW	L576951
Surrogate: TCLP 4-Terphenyl-d14	79.0		Limits: 30-122%	5	09/30/21 18:17	VBW	L576951
Surrogate: TCLP Nitrobenzene-d5	48.8		Limits: 25-78%	5	09/30/21 18:17	VBW	L576951
Surrogate: TCLP Phenol-d6	14.6		Limits: 9-27%	5	09/30/21 18:17	VBW	L576951

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Project MWWTP Form 300

Information : Anniston, AL

Revised Report Date: 10/07/2021
Received : 09/24/2021

Kim S Storey

Report Number : **21-267-0081**

REPORT OF ANALYSIS

Lab No : **91840**
Sample ID : **MWWTP Sludge**

Matrix: **Solids**
Sampled: **9/22/2021 6:55**

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Method
Moisture	**77.1**	%	0.010	1	09/28/21 16:15	FMM	SW-DRYWT
Flash Point	**>96**	degrees C		1	10/04/21 07:55	MAR	ASTM D93-80
HEM: Oil and Grease	**712**	mg/Kg - dry	289	1	10/05/21 17:10	MCB	SW-9071B
Total Solids	**22.9**	%	0.010	1	09/28/21 16:15	FMM	2540G-2011

Qualifiers/ Definitions

DF Dilution Factor
MQL Method Quantitation Limit
L Limit Exceeded

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Information : Anniston, AL

Revised Report Date: 10/07/2021
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Kim S Storey

Report Number : **21-267-0081**

REPORT OF ANALYSIS

Lab No : **91840**
Sample ID : **MWWTP Sludge**

Matrix: **Solids**
Sampled: **9/22/2021 6:55**

Analytical Method: 8082A **Prep Batch(es):** **L576508** 09/29/21 10:23
Prep Method: 3546

Test	Results	Units	MQL	DF	Date / Time Analyzed	By	Analytical Batch
Aroclor 1016	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Aroclor 1221	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Aroclor 1232	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Aroclor 1242	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Aroclor 1248	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Aroclor 1254	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Aroclor 1260	<3920	µg/Kg - dry	3920	10	09/29/21 20:17	VIC	L576787
Surrogate: Decachlorobiphenyl	95.9		Limits: 25-125%	10	09/29/21 20:17	VIC	L576787
Surrogate: Tetrachloro-m-xylene	57.2		Limits: 25-125%	10	09/29/21 20:17	VIC	L576787

Qualifiers/ Definitions DF Dilution Factor MQL Method Quantitation Limit

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Shipment Receipt Form

Customer Number: **12798**
Customer Name: **Anniston Water Works and Sewer Board**
Report Number: **21-267-0081**

Shipping Method

○ Fed Ex	○ US Postal	○ Lab	○ Other :	
○ UPS	○ Client	◉ Courier	Thermometer ID:	T137

Shipping container/cooler uncompromised?	◉ Yes	○ No	
Number of coolers/boxes received	1		
Custody seals intact on shipping container/cooler?	◉ Yes	○ No	○ Not Present
Custody seals intact on sample bottles?	○ Yes	○ No	◉ Not Present
Chain of Custody (COC) present?	◉ Yes	○ No	
COC agrees with sample label(s)?	◉ Yes	○ No	
COC properly completed	◉ Yes	○ No	
Samples in proper containers?	◉ Yes	○ No	
Sample containers intact?	◉ Yes	○ No	
Sufficient sample volume for indicated test(s)?	◉ Yes	○ No	
All samples received within holding time?	◉ Yes	○ No	
Cooler temperature in compliance?	◉ Yes	○ No	
Cooler/Samples arrived at the laboratory on ice. Samples were considered acceptable as cooling process had begun.	◉ Yes	○ No	
Water - Sample containers properly preserved	○ Yes	○ No	◉ N/A
Water - VOA vials free of headspace	○ Yes	○ No	◉ N/A
Trip Blanks received with VOAs	○ Yes	○ No	◉ N/A
Soil VOA method 5035 – compliance criteria met	○ Yes	○ No	◉ N/A

☐ High concentration container (48 hr) ☐ Low concentration EnCore samplers (48 hr)

☐ High concentration pre-weighed (methanol -14 d) ☐ Low conc pre-weighed vials (Sod Bis -14 d)

Special precautions or instructions included? ○ Yes ◉ No

Comments:

Signature: Hannah R. Brown Date & Time: 09/24/2021 12:20:25