



Alabama Department of Environmental Management
adem.alabama.gov

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Montgomery, Alabama 36130-1463
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APRIL 7, 2025

Mr. David Green. Water Quality Supervisor
Utilities Board of the City of Sylacauga
Post Office Box 207
Sylacauga, AL 35150

RE: Draft Permit
NPDES Permit No. AL0020001
J Earl Ham WWTP
Talladega County, Alabama

Dear Mr. Green:

Transmitted herein is a draft of the referenced permit.

We would appreciate your comments on the permit within **30 days** of the date of this letter. Please direct any comments of a technical or administrative nature to the undersigned.

By copy of this letter and the draft permit, we are also requesting comments within the same time frame from EPA.

Please be aware that Parts I.C.1.c and I.C.2.e of your permit require participation in the Department's Alabama Environmental Permitting and Compliance System (AEPACS) for submittal of DMRs and SSOs upon issuance of this permit unless valid justification as to why you cannot participate is submitted in writing. SSO hotline notifications and hard copy Form 415 SSO reports may be used only with the written approval from the Department. AEPACS allows ADEM to electronically validate and acknowledge receipt of the data. This improves the accuracy of reported compliance data and reduces costs to both the regulated community and ADEM. Please note that all AEPACS users can create the electronic DMRs and SSOs; however, only AEPACS users with certifier permissions will be able to submit the electronic DMRs and SSOs to ADEM.

Please also be aware that Part IV. of your permit requires that you develop, implement, and maintain a Sanitary Sewer Overflow Response Plan.

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



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

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

Coastal Office
1615 South Broad Street
Mobile, AL 36605
(251) 450-3400
(251) 479-2593 (FAX)

If you have questions regarding this permit or monitoring requirements, please contact Shanda Torbert at storbert@adem.alabama.gov or (334) 271-7800.

Sincerely,



Shanda Torbert
Municipal Section
Water Division

Enclosure

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



NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: UTILITIES BOARD OF THE CITY OF SYLACAUGA
POST OFFICE BOX 207
SYLACAUGA, AL 35150

FACILITY LOCATION: J EARL HAM WWTP (4.8 MGD)
610 OLD SYLACAUGA HIGHWAY
SYLACAUGA, ALABAMA
TALLADEGA COUNTY

PERMIT NUMBER: AL0020001

RECEIVING WATERS: SHIRTEE CREEK
DARBY BRANCH (Stormwater Only)

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

ISSUANCE DATE:

EFFECTIVE DATE:

EXPIRATION DATE:

Draft

Alabama Department of Environmental Management

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PART I: DISCHARGE LIMITATIONS, CONDITIONS, AND REQUIREMENTS

A. DISCHARGE LIMITATIONS AND MONITORING REQUIREMENTS

1. DSN 0012: Treated Domestic and Industrial Wastewater - 4.8 MGD (stream flow < 4.64 cfs)

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 Rate (00058) See note (5) Instream Monitoring	*****	*****	*****	*****	*****	(Report) Maximum Monthly	CFS	Daily	Continuous	Not Seasonal
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	1200 Monthly Average	1801 Weekly Average	lbs/day	*****	30 Monthly Average	45 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	160 Monthly Average	240 Weekly Average	lbs/day	*****	4.0 Monthly Average	6.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	96 Monthly Average	144 Weekly Average	lbs/day	*****	2.4 Monthly Average	3.6 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	300 Monthly Average	450 Weekly Average	lbs/day	*****	7.5 Monthly Average	11.2 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	360 Monthly Average	540 Weekly Average	lbs/day	*****	9.0 Monthly Average	13.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (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) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0012 are applicable if any average daily stream flow is less than 4.64 cfs during any day of the calendar month. If Outfall 0012 is applicable, DMRs for 0013 and 0014 should be submitted with “No Discharge” marked for the month

DSN 0012 (Continued): Treated Domestic and Industrial Wastewater - 4.8 MGD (stream flow < 4.64 cfs)

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)
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	*****	*****	*****	*****	47.3 Monthly Average	72.3 Maximum Daily	µg/l	Monthly	24-Hr Composite	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	*****	*****	*****	*****	0.012 Monthly Average	0.021 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	548 Monthly Average	2507 Maximum Daily	col/100mL	3X Weekly test	Grab	ECW
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	298 Maximum Daily	col/100mL	3X Weekly test	Grab	ECS
Solids, Total Dissolved (70295) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Monthly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	520 Monthly Average	780 Weekly Average	lbs/day	*****	13.0 Monthly Average	19.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (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) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0012 are applicable if any average daily stream flow is less than 4.64 cfs during any day of the calendar month. If Outfall 0012 is applicable, DMRs for 0013 and 0014 should be submitted with “No Discharge” marked for the month.

DSN 0012 (Continued): Treated Domestic and Industrial Wastewater - 4.8 MGD (stream flow < 4.64 cfs)

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)
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	360 Monthly Average	540 Weekly Average	lbs/day	*****	9.0 Monthly Average	13.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (April – October)
W = Winter (November - March)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
- (3) See Part IV.C. for Total Residual Chlorine (TRC). Monitoring for TRC is applicable if chlorine is utilized for disinfection purposes. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR.
- (4) A measurement of TRC below 0.05 mg/L shall be considered in compliance with the permit limitations above and should be reported as “*B” on the monthly DMR.
- (5) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0012 are applicable if any average daily stream flow is less than 4.64 cfs during any day of the calendar month. If Outfall 0012 is applicable, DMRs for 0013 and 0014 should be submitted with “No Discharge” marked for the month.

2. DSN 0013: Treated Domestic and Industrial Wastewater 4.64 cfs ≤stream flow<9.28 cfs

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 Rate (00058) See note (5) Instream Monitoring	*****	*****	*****	4.64 Minimum Daily	*****	(Report) Maximum Daily	CFS	Daily	Continuous	Not Seasonal
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	1200 Monthly Average	1801 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	136 Monthly Average	204 Weekly Average	lbs/day	*****	3.4 Monthly Average	5.1 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	140 Monthly Average	210 Weekly Average	lbs/day	*****	3.5 Monthly Average	5.2 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	220 Monthly Average	330 Weekly Average	lbs/day	*****	5.5 Monthly Average	8.2 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	340 Monthly Average	510 Weekly Average	lbs/day	*****	8.5 Monthly Average	12.7 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (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) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0013 are applicable if all average daily stream flows are greater than 4.64 cfs during each day of the calendar month. If all daily average stream flows are >9.28 cfs during each day of the month then Outfall 0014 is applicable. If Outfall 0013 is applicable, DMRs for 0012 and 0014 should be submitted with “No Discharge” marked for the month.

DSN 0013 (Continued): Treated Domestic and Industrial Wastewater 4.64 cfs \leq stream flow < 9.28 cfs

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)
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	*****	*****	*****	*****	67.1 Monthly Average	90.3 Maximum Daily	ug/l	Monthly	24-Hr Composite	Not Seasonal
Flow, in Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	*****	*****	*****	*****	0.018 Monthly Average	0.031 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	548 Monthly Average	2507 Maximum Daily	col/100mL	3X Weekly test	Grab	ECW
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	298 Maximum Daily	col/100mL	3X Weekly test	Grab	ECS
Solids, Total Dissolved (70295) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Monthly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	400 Monthly Average	600 Weekly Average	lbs/day	*****	10.0 Monthly Average	15.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (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.
- (5) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0013 are applicable if all average daily stream flows are greater than 4.64 cfs during each day of the calendar month. If all daily average stream flows are >9.28 cfs during each day of the month then Outfall 0014 is applicable. If Outfall 0013 is applicable, DMRs for 0012 and 0014 should be submitted with “No Discharge” marked for the month.

DSN 0013 (Continued): Treated Domestic and Industrial Wastewater - 4.64 cfs ≤stream flow<9.28 cfs

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)
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	280 Monthly Average	420 Weekly Average	lbs/day	****	7.0 Monthly Average	10.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	****	****	****	85.0 Monthly Average Minimum	****	****	%	Monthly	Calculated	Not Seasonal

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

- (1) Sample Frequency – See also Part I.B.2
- (2) 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) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0013 are applicable if all average daily stream flows are greater than 4.64 cfs during each day of the calendar month. If all daily average stream flows are >9.28 cfs during each day of the month then Outfall 0014 is applicable. If Outfall 0013 is applicable, DMRs for 0012 and 0014 should be submitted with “No Discharge” marked for the month.

3. DSN 0014: Treated Domestic and Industrial Wastewater - stream flow ≥ 9.28 cfs

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 Rate (00058) See note (5) Instream Monitoring	*****	*****	*****	9.28 Minimum Daily	*****	(Report) Maximum Daily	CFS	Daily	Continuous	Not Seasonal
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	1200 Monthly Average	1801 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	120 Monthly Average	180 Weekly Average	lbs/day	*****	3.0 Monthly Average	4.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	188 Monthly Average	282 Weekly Average	lbs/day	*****	4.7 Monthly Average	7.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	360 Monthly Average	540 Weekly Average	lbs/day	*****	9.0 Monthly Average	13.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	200 Monthly Average	300 Weekly Average	lbs/day	*****	5.0 Monthly Average	7.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (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) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0014 are applicable if all average daily stream flows are greater than 9.28 cfs during every day of the calendar month. If Outfall 0014 is applicable, DMRs for 0012 and 0013 should be submitted with “No Discharge” marked for the month.

DSN 0014 (Continued): Treated Domestic and Industrial Wastewater - stream flow \geq 9.28 cfs

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)
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	*****	*****	*****	*****	91.6 Monthly Average	112.6 Maximum Daily	ug/l	Monthly	24-Hr Composite	Not Seasonal
Flow, in Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	*****	*****	*****	*****	0.025 Monthly Average	0.043 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	548 Monthly Average	2507 Maximum Daily	col/100mL	3X Weekly test	Grab	ECW
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	298 Maximum Daily	col/100mL	3X Weekly test	Grab	ECS
Solids, Total Dissolved (70295) Effluent Gross Value	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Monthly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	280 Monthly Average	420 Weekly Average	lbs/day	*****	7.0 Monthly Average	10.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	W

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

- (1) Sample Frequency – See also Part I.B.2
- (2) S = Summer (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) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0014 are applicable if all average daily stream flows are greater than 9.28 cfs during every day of the calendar month. If Outfall 0014 is applicable, DMRs for 0012 and 0013 should be submitted with “No Discharge” marked for the month.

DSN 0014 (Continued): Treated Domestic and Industrial Wastewater - stream flow ≥ 9.28 cfs

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)
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	320 Monthly Average	480 Weekly Average	lbs/day	*****	8.0 Monthly Average	12.0 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
- (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.
- (5) When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.E. Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

Note: The limits for Outfall 0014 are applicable if all average daily stream flows are greater than 9.28 cfs during every day of the calendar month. If Outfall 0014 is applicable, DMRs for 0012 and 0013 should be submitted with “No Discharge” marked for the month.

4. DSN 001T: Toxicity

Outfall 001T represents the same physical outfall as 001, which is described more fully in the Permittee's application. The Department uses the 001T designation for all samples and analyzed for Toxicity testing. Such discharge shall be limited and monitored by the Permittee as specified below:

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

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

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

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

(2) S = Summer (May – November)

W = Winter (December - April)

ECS = E. coli Summer (May - October)

ECW = E. coli Winter (November - April)

5. DSN 002S: Stormwater

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 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 See notes (3,4)	Seasonal See note (2)
pH (00400) Storm Water	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Annually	FFGS	Not Seasonal
Solids, Total Suspended (00530) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Oil & Grease (00556) Storm Water	*****	*****	*****	*****	*****	15.0 Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Phosphorus, Total (As P) (00665) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Storm Water	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Annually	Calculated	Not Seasonal
E. Coli (51040) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Annually	FFGS	Not Seasonal
Solids, Total Dissolved (70295) Storm Water	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	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 Stormwater in Part IV.G

(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.G.3.

(4) For all stormwater parameters, samples shall be first flushed grab samples (FFGS) collected during the first 30 minutes of discharge.

6. DSN 003S: Stormwater

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 003, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type See notes (3,4)	Seasonal See note (2)
pH (00400) Storm Water	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Annually	FFGS	Not Seasonal
Solids, Total Suspended (00530) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Oil & Grease (00556) Storm Water	*****	*****	*****	*****	*****	15.0 Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Phosphorus, Total (As P) (00665) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Storm Water	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Annually	Calculated	Not Seasonal
E. Coli (51040) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Annually	FFGS	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	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 Stormwater in Part IV.G

(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.G.3.

(4) For all stormwater parameters, samples shall be first flushed grab samples (FFGS) collected during the first 30 minutes of discharge.

7. DSN 004S: Stormwater

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 004, 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 See notes (3,4)	Seasonal See note (2)
pH (00400) Storm Water	*****	*****	*****	(Report) Minimum Daily	*****	(Report) Maximum Daily	S.U.	Annually	FFGS	Not Seasonal
Solids, Total Suspended (00530) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Oil & Grease (00556) Storm Water	*****	*****	*****	*****	*****	15.0 Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrogen, Kjeldahl Total (As N) (00625) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Phosphorus, Total (As P) (00665) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
Flow, In Conduit or Thru Treatment Plant (50050) Storm Water	*****	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Annually	Calculated	Not Seasonal
E. Coli (51040) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	col/100mL	Annually	FFGS	Not Seasonal
Solids, Total Dissolved (70295) Storm Water	*****	*****	*****	*****	(Report) Monthly Average	(Report) Maximum Daily	mg/l	Annually	FFGS	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Storm Water	*****	*****	*****	*****	*****	(Report) Maximum Daily	mg/l	Annually	FFGS	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 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.G.3.

(4) For all stormwater parameters, samples shall be first flushed grab samples (FFGS) collected during the first 30 minutes of discharge.

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

D. OTHER REPORTING AND NOTIFICATION REQUIREMENTS

1. Anticipated Noncompliance

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

2. Termination of Discharge

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

3. Updating Information

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

4. Duty to Provide Information

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

E. SCHEDULE OF COMPLIANCE

1. Compliance with discharge limits

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

COMPLIANCE SHALL BE ATTAINED ON THE EFFECTIVE DATE OF THIS PERMIT

2. Schedule

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

PART II: OTHER REQUIREMENTS, RESPONSIBILITIES, AND DUTIES

A. OPERATIONAL AND MANAGEMENT REQUIREMENTS

1. Facilities Operation and Maintenance

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

2. Best Management Practices

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

3. Certified Operator

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

B. OTHER RESPONSIBILITIES

1. Duty to Mitigate Adverse Impacts

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

2. Right of Entry and Inspection

- a. The permittee shall allow the Director, or an authorized representative, upon the presentation of proper credentials and other documents as may be required by law to:
 - (1) Enter upon the permittee's premises where a regulated facility or activity or point source is located or conducted, or where records must be kept under the conditions of the permit;
 - (2) Have access to and copy, at reasonable times, any records that must be kept under the conditions of the permits;
 - (3) Inspect any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under the permit; and
 - (4) Sample or monitor, for the purposes of assuring permit compliance or as otherwise authorized by the AWPCA, any substances or parameters at any location.

C. BYPASS AND UPSET

1. Bypass

- a. Any bypass is prohibited except as provided in b. and c. below:
- b. A bypass is not prohibited if:
 - (1) It does not cause any discharge limitation specified in Provision I. A. of this permit to be exceeded;

- (2) It enters the same receiving stream as the permitted outfall; and
- (3) It is necessary for essential maintenance of a treatment or control facility or system to assure efficient operation of such facility or system.
- c. A bypass is not prohibited and need not meet the discharge limitations specified in Provision I. A. of this permit if:
 - (1) It is unavoidable to prevent loss of life, personal injury, or severe property damage;
 - (2) There are no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime (this condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance); and
 - (3) The permittee submits a written request for authorization to bypass to the Director at least ten (10) days prior to the anticipated bypass (if possible), the permittee is granted such authorization, and the permittee complies with any conditions imposed by the Director to minimize any adverse impact on human health or the environment resulting from the bypass.
- d. The permittee has the burden of establishing that each of the conditions of Provision II. C. 1. b. or c. have been met to qualify for an exception to the general prohibition against bypassing contained in a. and an exemption, where applicable, from the discharge limitations specified in Provision I. A. of this permit.

2. Upset

- a. A discharge which results from an upset need not meet the discharge limitations specified in Provision I. A. of this permit if:
 - (1) No later than 24-hours after becoming aware of the occurrence of the upset, the Permittee orally reports the occurrence and circumstances of the upset to the Director or his designee; and
 - (2) No later than five (5) days after becoming aware of the occurrence of the upset, the Permittee furnishes the Director with evidence, including properly signed, contemporaneous operating logs, or other relevant evidence, demonstrating that:
 - (i) An upset occurred;
 - (ii) The Permittee can identify the specific cause(s) of the upset;
 - (iii) The Permittee's facility was being properly operated at the time of the upset; and
 - (iv) The Permittee promptly took all reasonable steps to minimize any adverse impact on human health or the environment resulting from the upset.
- b. The permittee has the burden of establishing that each of the conditions of Provision II. C. 2. a. of this permit have been met to qualify for an exemption from the discharge limitations specified in Provision I. A. of this permit.

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

1. Duty to Comply

- a. The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of the AWPCA and the FWPCA and is grounds for enforcement action, permit termination, revocation and reissuance, suspension, modification, or denial of a permit renewal application.
- b. The necessity to halt or reduce production or other activities in order to maintain compliance with the conditions of the permit shall not be a defense for a permittee in an enforcement action.
- c. The discharge of a pollutant from a source not specifically identified in the permit application for this permit and not specifically included in the description of an outfall in this permit is not authorized and shall constitute noncompliance with this permit.
- d. The permittee shall take all reasonable steps, including cessation of production or other activities, to minimize or prevent any violation of this permit or to minimize or prevent any adverse impact of any permit violation.

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

2. Removed Substances

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

3. Loss or Failure of Treatment Facilities

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

4. Compliance with Statutes and Rules

- a. This permit has been issued under ADEM Administrative Code, Chapter 335-6-6. All provisions of this chapter, that are applicable to this permit, are hereby made a part of this permit. A copy of this chapter may be obtained for a small charge from the Office of General Counsel, Alabama Department of Environmental Management, 1400 Coliseum Boulevard Montgomery, Alabama 36110-2059.
- b. This permit does not authorize the noncompliance with or violation of any Laws of the State of Alabama or the United States of America or any regulations or rules implementing such laws. FWPCA, 33 U.S.C. Section 1319, and Code of Alabama 1975, Section 22-22-14.

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

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

- a. If the permittee intends to continue to discharge beyond the expiration date of this permit, the permittee shall file a complete permit application for reissuance of this permit at least 180 days prior to its expiration. If the permittee does not intend to continue discharge beyond the expiration of this permit, the permittee shall submit written notification of this intent which shall be signed by an individual meeting the signatory requirements for a permit application as set forth in ADEM Administrative Code Rule 335-6-6-.09.
- b. Failure of the permittee to apply for reissuance at least 180 days prior to permit expiration will void the automatic continuation of the expiring permit provided by ADEM Administrative Code Rule 335-6-6-.06 and should the permit not be reissued for any reason any discharge after expiration of this permit will be an unpermitted discharge.

2. Change in Discharge

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

3. Transfer of Permit

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

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

4. Permit Modification and Revocation

- a. This permit may be modified or revoked and reissued, in whole or in part, during its term for cause, including but not limited to, the following:
 - (1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to revoke and reissue this permit instead of terminating the permit;
 - (2) If a request to transfer this permit has been received, the Director may decide to revoke and reissue or to modify the permit; or
 - (3) If modification or revocation and reissuance is requested by the permittee and cause exists, the Director may grant the request.
- b. This permit may be modified during its term for cause, including but not limited to, the following:
 - (1) If cause for termination under Provision II. E. 5. of this permit exists, the Director may choose to modify this permit instead of terminating this permit;
 - (2) There are material and substantial alterations or additions to the facility or activity generating wastewater which occurred after permit issuance which justify the application of permit conditions that are different or absent in the existing permit;
 - (3) The Director has received new information that was not available at the time of permit issuance and that would have justified the application of different permit conditions at the time of issuance;
 - (4) A new or revised requirement(s) of any applicable standard or limitation is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA;
 - (5) Errors in calculation of discharge limitations or typographical or clerical errors were made;
 - (6) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, when the standards or regulations on which the permit was based have been changed by promulgation of amended standards or regulations or by judicial decision after the permit was issued;
 - (7) To the extent allowed by ADEM Administrative Code, Rule 335-6-6-.17, permits may be modified to change compliance schedules;
 - (8) To agree with a granted variance under 301(c), 301(g), 301(h), 301(k), or 316(a) of the FWPCA or for fundamentally different factors;
 - (9) To incorporate an applicable 307(a) FWPCA toxic effluent standard or prohibition;
 - (10) When required by the reopener conditions in this permit;
 - (11) When required under 40 CFR 403.8(e) (compliance schedule for development of pretreatment program);
 - (12) Upon failure of the state to notify, as required by Section 402(b)(3) of the FWPCA, another state whose waters may be affected by a discharge permitted by this permit;
 - (13) When required to correct technical mistakes, such as errors in calculation, or mistaken interpretations of law made in determining permit conditions; or
 - (14) When requested by the permittee and the Director determines that the modification has cause and will not result in a violation of federal or state law, regulations or rules; or

5. Termination

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

- a. Violation of any term or condition of this permit;
- b. The permittee's misrepresentation or failure to disclose fully all relevant facts in the permit application or during the permit issuance process or the permittee's misrepresentation of any relevant facts at any time;
- c. Materially false or inaccurate statements or information in the permit application or the permit;

- d. A change in any condition that requires either a temporary or permanent reduction or elimination of the permitted discharge;
- e. The permittee's discharge threatens human life or welfare or the maintenance of water quality standards;
- f. Permanent closure of the facility generating the wastewater permitted to be discharged by this permit or permanent cessation of wastewater discharge;
- g. New or revised requirements of any applicable standard or limitation that is promulgated under Sections 301(b)(2)(C), (D), (E), and (F), and 307(a)(2) of the FWPCA that the Director determines cannot be complied with by the permittee.
- h. Any other cause allowed by the ADEM Administrative Code, Chapter 335-6-6.

6. Suspension

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

7. Stay

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

F. COMPLIANCE WITH TOXIC POLLUTANT STANDARD OR PROHIBITION

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

G. NOTICE TO DIRECTOR OF INDUSTRIAL USERS

1. The permittee shall not allow the introduction of wastewater, other than domestic wastewater, from a new indirect 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 may create a fire or explosive hazard, including, but not limited to, waste streams with a closed cup flashpoint of less than 140 degrees Fahrenheit or 60 degrees Centigrade using the test methods specified in 40 CFR 261.21;
2. Pollutants which may cause corrosive structural damage to the treatment works, but in no case discharges with a pH lower than 5.0;
3. Solid or viscous pollutants in amounts which may cause obstruction to the flow in sewers, or other interference in the treatment works;
4. Any pollutant, including oxygen demanding pollutants (BOD, etc.) of such volume or strength as to cause interference in the treatment works;

5. Heat in amounts which may inhibit biological activity in the treatment plant resulting in interference but in no case in such quantities that the temperature of the influent, at the treatment plant, exceeds 40 degrees centigrade or 104 degrees Fahrenheit;
6. Pollutants which may result in the presence of toxic gases, vapors, or fumes within the treatment works in a quantity that may cause acute worker health and safety problems;
7. Unless specifically authorized by this permit, any pollutants not generated at the facility for which this permit was issued; or
8. Petroleum oil, biodegradable cutting oil, or products of mineral oil origin in amounts that will cause pass through or interference.

PART III: ADDITIONAL REQUIREMENTS, CONDITIONS, AND LIMITATIONS

A. CIVIL AND CRIMINAL LIABILITY

1. Tampering

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

2. False Statements

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

3. Permit Enforcement

- a. Any NPDES permit issued or reissued by the Department is a permit for the purpose of the AWPCA and the FWPCA and as such any terms, conditions, or limitations of the permit are enforceable under state and federal law.
- b. Any person required to have a NPDES permit pursuant to ADEM Administrative Code Chapter 335-6-6 and who discharges pollutants without said permit, who violates the conditions of said permit, who discharges pollutants in a manner not authorized by the permit, or who violates applicable orders of the Department or any applicable rule or standard of the Department, is subject to any one or combination of the following enforcement actions under applicable state statutes:
 - (1) An administrative order requiring abatement, compliance, mitigation, cessation, clean-up, and/or penalties;
 - (2) An action for damages;
 - (3) An action for injunctive relief; or
 - (4) An action for penalties.
- c. If the permittee is not in compliance with the conditions of an expiring or expired permit the Director may choose to do any or all of the following provided the permittee has made a timely and complete application for reissuance of the permit:
 - (1) Initiate enforcement action based upon the permit which has been continued;
 - (2) Issue a notice of intent to deny the permit reissuance. If the permit is denied, the owner or operator would then be required to cease the activities authorized by the continued permit or be subject to enforcement action for operating without a permit;
 - (3) Reissue the new permit with appropriate conditions; or
 - (4) Take other actions authorized by these rules and AWPCA.

4. Relief from Liability

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

B. OIL AND HAZARDOUS SUBSTANCE LIABILITY

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

C. PROPERTY AND OTHER RIGHTS

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

D. AVAILABILITY OF REPORTS

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

E. EXPIRATION OF PERMITS FOR NEW OR INCREASED DISCHARGES

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

F. COMPLIANCE WITH WATER QUALITY STANDARDS

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

G. GROUNDWATER

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

H. DEFINITIONS

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

23. **Grab Sample** – means a single influent or effluent portion which is not a composite sample. The sample(s) shall be collected at the period(s) most representative of the discharge.
24. **Indirect Discharger** – means a nondomestic discharger who discharges pollutants to a publicly owned treatment works or a privately owned treatment facility operated by another person.
25. **Industrial User** – means those industries identified in the Standard Industrial Classification manual, Bureau of the Budget 1967, as amended and supplemented, under the category “Division D – Manufacturing” and such other classes of significant waste producers as, by regulation, the Director deems appropriate.
26. **MGD** – means million gallons per day.
27. **Monthly Average** – means the arithmetic mean of all the composite or grab samples taken for the daily discharges collected in one month period. The monthly average for flow is the arithmetic mean of all flow measurements taken in a one month period.
28. **New Discharger** – means a person, owning or operating any building, structure, facility, or installation:
 - a) From which there is or may be a discharge of pollutants;
 - b) That did not commence the discharge of pollutants prior to August 13, 1979, and which is not a new source; and
 - c) Which has never received a final effective NPDES permit for dischargers at that site.
29. **NH3-N** – means the pollutant parameter ammonia, measured as nitrogen.
30. **Notifiable sanitary sewer overflow** - means an overflow, spill, release or diversion of wastewater from a sanitary sewer system that:
 - a) Reaches a surface water of the State; or
 - b) May imminently and substantially endanger human health based on potential for public exposure including but not limited to close proximity to public or private water supply wells or in areas where human contact would be likely to occur.
31. **Permit application** - means forms and additional information that is required by ADEM Administrative Code Rule 335-6-6-.08 and applicable permit fees.
32. **Point source** - means "any discernible, confined and discrete conveyance, including but not limited to any pipe, channel, ditch, tunnel, conduit, well, discrete fissure, container, rolling stock, concentrated animal feeding operation, or vessel or other floating craft, . . . from which pollutants are or may be discharged." Section 502(14) of the FWPCA, 33 U.S.C. Section 1362(14).
33. **Pollutant** - includes for purposes of this permit, but is not limited to, those pollutants specified in Code of Alabama 1975, Section 22-22-1(b)(3) and those effluent characteristics specified in Provision I. A. of this permit.
34. **Privately Owned Treatment Works** – means any devices or system which is used to treat wastes from any facility whose operator is not the operator of the treatment works, and which is not a “POTW”.
35. **Publicly Owned Treatment Works (POTW)** – means a wastewater collection and treatment facility owned by the State, municipality, regional entity composed of two or more municipalities, or another entity created by the State or local authority for the purpose of collecting and treating municipal wastewater.
36. **Receiving Stream** – means the “waters” receiving a “discharge” from a “point source”.
37. **Severe property damage** - means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.
38. **Significant Source** – means a source which discharges 0.025 MGD or more to a POTW or greater than five percent of the treatment work’s capacity, or a source which is a primary industry as defined by the U.S. EPA or which discharges a priority or toxic pollutant.
39. **TKN** – means the pollutant parameter Total Kjeldahl Nitrogen.
40. **TON** – means the pollutant parameter Total Organic Nitrogen.
41. **TRC** – means Total Residual Chlorine.

42. **TSS** – means the pollutant parameter Total Suspended Solids.
43. **24HC** – means 24-hour composite sample, including any of the following:
- a) The mixing of at least 8 equal volume samples collected at constant time intervals of not more than 2 hours over a period of 24 hours;
 - b) A sample collected over a consecutive 24-hour period using an automatic sampler composite to one sample. As a minimum, samples shall be collected hourly and each shall be no more than one twenty-fourth (1/24) of the total sample volume collected;
 - c) A sample collected over a consecutive 24-hour period using an automatic composite sampler composited proportional to flow.
44. **Upset** - means an exceptional incident in which there is an unintentional and temporary noncompliance with technology-based permit discharge limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, or careless or improper operation.
45. **Waters** - means "[a]ll waters of any river, stream, watercourse, pond, lake, coastal, ground or surface water, wholly or partially within the state, natural or artificial. This does not include waters which are entirely confined and retained completely upon the property of a single individual, partnership or corporation unless such waters are used in interstate commerce." Code of Alabama 1975, Section 22-22-1(b)(2). Waters "include all navigable waters" as defined in Section 502(7) of the FWPCA, 22 U.S.C. Section 1362(7), which are within the State of Alabama.
46. **Week** - means the period beginning at twelve midnight Saturday and ending at twelve midnight the following Saturday.
47. **Weekly (7-day and calendar week) Average** – is the arithmetic mean of all samples collected during a consecutive 7-day period or calendar week, whichever is applicable. The calendar week is defined as beginning on Sunday and ending on Saturday. Weekly averages shall be calculated for all calendar weeks with Saturdays in the month. If a calendar week overlaps two months (i.e., the Sunday is in one month and the Saturday in the following month), the weekly average calculated for the calendar week shall be included in the data for the month that contains the Saturday.

I. SEVERABILITY

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

PART IV: SPECIFIC REQUIREMENTS, CONDITIONS, AND LIMITATIONS

A. SLUDGE MANAGEMENT PRACTICES

1. Applicability

- a. Provisions of Provision IV.A. apply to a sewage sludge generated or treated in treatment works that is applied to agricultural and non-agricultural land, or that is otherwise distributed, marketed, incinerated, or disposed in landfills or surface disposal sites.
- b. Provisions of Provision IV.A. do not apply to:
 - (1) Sewage sludge generated or treated in a privately owned treatment works operated in conjunction with industrial manufacturing and processing facilities and which receive no domestic wastewater.
 - (2) Sewage sludge that is stored in surface impoundments located at the treatment works prior to ultimate disposal.

2. Submitting Information

- a. If applicable, the Permittee must submit annually with its Municipal Water Pollution Prevention (MWPP) report the following:
 - (1) Type of sludge stabilization/digestion method;
 - (2) Daily or annual sludge production (dry weight basis);
 - (3) Ultimate sludge disposal practice(s).
- b. The Permittee shall provide sludge inventory data to the Director as requested. These data may include, but are not limited to, sludge quantity and quality reported in Provision IV.A.2.a as well as other specific analyses required to comply with State and Federal laws regarding solid and hazardous waste disposal.
- c. The Permittee shall give prior notice to the Director of at least 30 days of any change planned in the Permittee's sludge disposal practices.

3. Reopener or Modification

- a. Upon review of information provided by the Permittee as required by Provision IV.A.2. or, based on the results of an on-site inspection, the permit shall be subject to modification to incorporate appropriate requirements.
- b. If an applicable "acceptable management practice" or if a numerical limitation for a pollutant in sewage sludge promulgated under Section 405 of FWPCA is more stringent than the sludge pollutant limit or acceptable management practice in this permit. This permit shall be modified or revoked or reissued to conform to requirements promulgated under Section 405. The Permittee shall comply with the limitations no later than the compliance deadline specified in applicable regulations as required by Section 405 of FWPCA.

B. EFFLUENT TOXICITY LIMITATIONS AND BIOMONITORING REQUIREMENTS FOR CHRONIC TOXICITY

1. Chronic Toxicity Test

- a. The permittee shall perform short-term chronic toxicity tests on the wastewater at Outfalls 0012, 0013, and 0014, whichever is applicable.
- b. The samples shall be diluted using appropriate control water to the Instream Waste Concentration (IWC), which is **90 percent** for Outfall 0012, **62 percent** for Outfall 0013, and **45 percent** for Outfall 0014 effluents. The IWC is the actual concentration of effluent, after mixing, in the receiving stream during a 7-day, 10-year low flow period. The IWC shall be 90% or greater if the average daily stream flow is less than 4.64 cfs for each calendar day from the previous October to September. The IWC shall be 62% or greater if the average daily stream flow is less than 9.28 cfs and greater than or equal to 4.64 cfs for one calendar day from the previous October to September. The IWC shall be 45% or greater if the average daily stream flow is 9.28 cfs or greater for each calendar day from the previous October to September.
- c. Any test result that shows a statistically significant reduction in survival, growth, or reproduction between the control and test samples at the 95% confidence level indicates chronic toxicity and shall constitute noncompliance with this permit.

2. General Test Requirements

- a. A minimum of three (3) 24-hour composite samples shall be obtained for use in the above biomonitoring tests. Samples shall be collected every other day so that the laboratory receives water samples on the first, third, and fifth day of the seven-day test period. The holding time for each composite sample shall not exceed 36 hours. The control water shall be a water prepared in the laboratory in accordance with the EPA procedure described in EPA 821-R-02-013 (most current edition) or another control water selected by the Permittee and approved by the Department.
- b. Test results shall be deemed unacceptable and the Permittee shall rerun the tests as soon as practical within the monitoring period for the following:
 - (1) For testing with *P. promelas*: effluent toxicity tests with control survival of less than 80% or if dry weight per surviving control organism is less than 0.25 mg;
 - (2) For testing with *C. dubia*: if the number of young per surviving control organism is less than 15 or if less than 60% of surviving control females produce three broods; or
 - (3) If the other requirements of the EPA Test Procedure are not met.
- c. In the event of an invalid test, upon subsequent completion of a valid test, the results of all tests, valid and invalid, are to be reported to the Department along with an explanation of the tests performed and the test results.
- d. Toxicity tests shall be conducted for the duration of this permit in the month of **OCTOBER**. Should results from the Annual Toxicity test indicate that Outfalls 0012, 0013, or 0014 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 JANUARY, APRIL, JULY, and OCTOBER.

3. Reporting Requirements

- a. The Permittee shall notify the Department in writing within 48 hours after toxicity has been demonstrated by the scheduled test(s).
- b. Biomonitoring test results obtained during each monitoring period shall be summarized and reported using the appropriate Discharge Monitoring Report (DMR) form approved by the Department. In accordance with Section 2 of this part, an effluent toxicity report containing the information in Sections 2 and 6 shall be included with the DMR. The test results must be submitted to the Department no later than 28 days after the month that tests were performed.

4. Additional Testing Requirements

- a. If chronic toxicity is indicated (i.e., noncompliance with permit limit), then the Permittee must perform two additional valid chronic toxicity tests in accordance with these procedures to determine the extent and duration of the toxic condition. The toxicity tests shall run consecutively beginning on the first calendar week following the date that the Permittee became aware of the permit noncompliance. The results of these follow-up tests shall be submitted to the Department no later than 28 days following the month the tests were performed.
- b. After evaluation of the results of the follow-up tests, the Department will determine if additional action is appropriate and may require additional testing and/or toxicity reduction measures. The permittee may be required to perform a Toxicity Identification Evaluation (TIE) and/or a Toxicity Reduction Evaluation (TRE). The TIE/TRE shall be performed in accordance with the most recent protocols and guidance outlined by EPA (e.g., EPA/600/2-88/062, EPA/600/R-92/080, EPA/600/R-91-003, EPA/600/R-92/081, EPA/833/B-99/022, and/or EPA/600/6-91/005F)

5. Test Methods

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

6. Effluent Toxicity Testing Reports

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

a. Introduction

- (1) Facility name, location and county
- (2) Permit number
- (3) Toxicity testing requirements of permit
- (4) Name of receiving water body
- (5) Contract laboratory information (if tests are performed under contract)
 - (i) Name of firm
 - (ii) Telephone number
 - (iii) Address
- (6) Objective of test

b. Plant Operations

- (1) Discharge Operating schedule (if other than continuous)
- (2) Volume of discharge during sample collection to include Mean daily discharge on sample collection dates (MGD, CFS, GPM)
- (3) Design flow of treatment facility at time of sampling

c. Source of Effluent and Dilution Water

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

d. Test Conditions

- (1) Toxicity test method utilized
- (2) End point(s) of test
- (3) Deviations from referenced method, if any, and reason(s)
- (4) Date and time test started
- (5) Date and time test terminated
- (6) Type and volume of test chambers
- (7) Volume of solution per chamber
- (8) Number of organisms per test chamber

- (9) Number of replicate test chambers per treatment
- (10) Test temperature, pH, and dissolved oxygen as recommended by the method (to include ranges)
- (11) Specify if aeration was needed
- (12) Feeding frequency, amount, and type of food
- (13) Specify if (and how) pH control measures were implemented
- (14) Light intensity (mean)
- e. Test Organisms
 - (1) Scientific name
 - (2) Life stage and age
 - (3) Source
 - (4) Disease(s) treatment (if applicable)
- f. Quality Assurance
 - (1) Reference toxicant utilized and source
 - (2) Date and time of most recent chronic reference toxicant test(s), raw data, and current control chart(s). (The most recent chronic reference toxicant test shall be conducted within 30 days of the routine.)
 - (3) Dilution water utilized in reference toxicant test
 - (4) Results of reference toxicant test(s) (NOEC, IC25, etc.); report concentration-response relationship and evaluate test sensitivity
 - (5) Physical and chemical methods utilized
- g. Results
 - (1) Provide raw toxicity data in tabular form, including daily records of affected organisms in each concentration (including controls) and replicate
 - (2) Provide table of endpoints: NOECs, IC25s, PASS/FAIL, etc. (as required in the applicable NPDES permit)
 - (3) Indicate statistical methods used to calculate endpoints
 - (4) Provide all physical and chemical data required by method
 - (5) Results of test(s) (NOEC, IC25, PASS/FAIL, etc.), report concentration-response relationship (definitive test only), report percent minimum significant difference (PMSD) calculated for sublethal endpoints determined by hypothesis testing.
- h. Conclusions and Recommendations
 - (1) Relationship between test endpoints and permit limits
 - (2) Actions to be taken

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

C. TOTAL RESIDUAL CHLORINE (TRC) REQUIREMENTS

- 1. If chlorine is not utilized for disinfection purposes, TRC monitoring under Part I of this Permit is not required. If TRC monitoring is not required (conditional monitoring), "**9" should be reported on the DMR forms.
- 2. Testing for TRC shall be conducted according to either the amperometric titration method or the DPD colorimetric method as specified in Section 408(C) or (E), Standards Methods for the Examination of Water and Wastewater, 18th edition. If the analytical result is less than the detection level or a value otherwise indicated in this permit, the Permittee shall report on the DMR form "**B" or "0". The Permittee shall then be considered to be in compliance with the daily maximum concentration limit for TRC.

3. This permit contains a maximum allowable TRC level in the effluent. The Permittee is responsible for determining the minimum TRC level needed in the chlorine contact chamber to comply with E.coli limits. The effluent shall be dechlorinated if necessary to meet the maximum allowable effluent TRC level.
4. The sample collection point for effluent TRC shall be at a point downstream of the chlorine contact chamber (downstream of dechlorination, if applicable). The exact location is to be approved by the Director.

D. PLANT CLASSIFICATION

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

E. SANITARY SEWER OVERFLOW RESPONSE PLAN

1. SSO Response Plan

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

a. General Information

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

b. Responsibility Information

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

c. SSO and Surface Water Assessment

- (1) Identification of locations within the collection system at which an SSO is likely to occur (e.g., based upon historical SSOs, lift stations where electricity may be lost, etc.)
- (2) A map of the general collection system area, including identification of surface waterbodies and the location(s) of public drinking water source(s). Mapping of all collection system piping, pump stations, etc. is not required; however, if this information is already available, it should be included.
- (3) Identification of surface waterbodies within the collection system area which are classified as Swimming according to ADEM Admin. Code chap. 335-6-11. References available to assist in this requirement include the following: <http://adem.alabama.gov/alEnviroRegLaws/files/Division6Vol1.pdf> and <http://adem.alabama.gov/wqmap>.
- (4) Identification of surface waterbodies within the collection system area which are not classified as Swimming as indicated in paragraph c above, but are known locally as areas where swimming occurs or as areas that are heavily recreated

d. Public Reporting of SSOs

- (1) Contact information for the public to report an SSO to the Permittee, during both normal and outside of normal business hours (e.g., telephone number, website, email address, etc.)
- (2) Information requested from the person reporting an SSO to assist the Permittee in identifying the SSO (e.g., date, time, location, contact information)
- (3) Procedures for communication of the SSO report to the appropriate positions for follow-up investigation and response, if necessary

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

f. Public Notification Methods for SSOs

- (1) A listing of methods that are feasible, as determined by the Permittee, for public notifications (e.g., flyers distributed to nearby residents; signs posted at the location of the SSO, where the SSO enters a water of the state, and/or at a central public location; signs posted at fishing piers, boat launches, parks, swimming waterbodies, etc.; website and/or social media notifications; local print or radio and broadcast media notifications; "opt in" email, text message, or automated phone message notifications)
 - (i) If signage is a feasible method for public notification, procedures for use and removal of signage (e.g., availability and maintenance of signs, appropriate duration of postings)
- (2) Minimum information to be included in public notifications (e.g., identification that an SSO has occurred, date, duration if known, estimated volume if known, location of the SSO by street address or other appropriate method, initial destination of the SSO)
- (3) Procedures developed by the Permittee for determining the appropriate public notification method(s) based upon the potential for public exposure to health risks associated with the SSO

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

- (1) General SSO Response Procedures (e.g., procedures for dispatching staff to assess/correct an SSO; procedures for routine SSO corrective actions such as those for sewer blockages, overflowing manholes, line breakages, pump station power failure, etc.; procedures for disinfection of affected area, if applicable);
- (2) Procedures for collection and proper disposal of the SSO, if feasible.
- (3) General procedures for coordinating instream water quality monitoring, including, but not limited to, procedures for mobilizing staff, collecting samples, and typical test methods should the Department or the Permittee determine monitoring is appropriate following an SSO. Identification of a contractor who will collect and analyze the sample(s) may be listed in lieu of the procedures.
- (4) References to other documents (such as Standard Operating Procedures for SSO Responses) may be acceptable for this section; however, the referenced document shall be identified and shall be reviewed at a frequency of at least that required by the Administrative Procedures Section.

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

2. SSO Response Plan Implementation

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

3. Department Review of the SSO Response Plan

- a. When requested by the Director or his designee, the Permittee shall make the SSO Response Plan available for review by the Department.
- b. Upon review, the Director or his designee may notify the Permittee that the SSO Response Plan is deficient and require modification of the Plan.
- c. Within thirty days of receipt of notification, or an alternate timeframe as approved by the Department, the Permittee shall modify any SSO Response Plan deficiency identified by the Director or his designee and shall certify to the Department that the modification has been made.

4. SSO Response Plan Administrative Procedures

- a. The Permittee shall maintain a copy of the SSO Response Plan at the permitted facility or an alternate location approved by the Department in writing and shall make it available for inspection by the Department.
- b. The Permittee shall make a copy of the SSO Response Plan available to the public upon written request within 30 days of such request. The Permittee may redact information which may present security issues, such as location of public water supplies, identification of specific details of vulnerabilities, employee information, etc.
- c. The Permittee shall provide training for any personnel required to implement the SSO Response Plan and shall retain at the facility documentation of such training. This documentation shall be available for inspection by the Department. Training shall be provided for existing personnel prior to the date by which implementation of the SSO Response Plan is required and for new personnel as soon as possible. Should significant revisions be made to the SSO Response Plan, training regarding the revisions shall be conducted as soon as possible.
- d. The Permittee shall complete a review and evaluation of the SSO Response Plan at least once every three years. Documentation of the SSO Response Plan review and evaluation shall be signed and dated by the responsible official or the appropriate designee as part of the SSO Response Plan.

F. POLLUTANT SCANS

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

G. MAJOR SOURCE STORMWATER REQUIREMENTS

1. Prohibitions

- a. The Permittee shall not allow the discharge of non-storm water into permitted storm water outfall(s) unless said discharge is already subject to an NPDES permit.
- b. Pollutants removed in the course of treatment or control shall be disposed in a manner that complies with all applicable Department rules and regulations.

2. Operational and Management Practices

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

- a. In the SWPP Plan, the Permittee shall:
 - (1) Assess the treatment plant site by developing and presenting site drainage maps, materials inventory, and best management operational practices. The plan shall also include a description of all spill or leak sources;
 - (2) Describe mechanisms and procedures to prevent the contact of sewage sludge, screenings, raw or partially treated wastewater, or any other waste product or pollutant with storm water discharged from the facility;
 - (3) Provide for daily inspection on workdays of any structures that function to prevent storm water pollution or that remove pollutants from storm water;
 - (4) Provide for daily inspection of the facility in general to ensure that the SWPP Plan is continually implemented and effective;
 - (5) Include a Best Management Practices (BMP) Plan that, as a minimum, addresses housekeeping, preventative maintenance, spill prevention and response, and non-storm water discharges;
 - (6) Describe mechanisms and procedures to provide sediment control sufficient to prevent or control storm water pollution storm water by particles resulting from soil or sediment migration from the site due to significant clearing, grading, or excavation activities;
 - (7) Designate by position or name the person or persons responsible for the day to day implementation of the SWPP Plan; and
 - (8) Bear the signature of an individual meeting signatory requirements as defined in ADEM Administrative Code, Rule 335-6-.09.

- b. The Director or his designee may notify the permittee at any time that the SWPP Plan is deficient and will require correction of the deficiency. The permittee shall correct any SWPP Plan deficiency identified by the Director or his designee within 30 days of receipt of notification and shall certify to the Department that the correction has been made and implemented.
- c. Administrative Procedures
 - (1) A copy of the SWPP Plan shall be maintained at the facility and shall be available for inspection by the Department.
 - (2) A log of daily inspections required by Provision IV.G.2.a.(3.) of the permit shall be maintained at the facility and shall be made available for inspection by the Department upon request. The log shall contain records of all inspections performed and each daily entry shall be signed by the person performing the inspection.
 - (3) The Permittee shall provide training for any personnel required to implement the SWPP Plan and shall retain documentation of such training at the facility. Training records for all personnel shall be available for inspection by the Department. Training shall be performed prior to the date implementation is required.

3. Monitoring Requirements

- a. Storm water discharged through each storm water outfall shall be sampled once per calendar year, using first flush grab samples (FFGS) collected during the first 30 minutes of discharge.
- b. The total volume of storm water discharged for the event must be monitored, including the date and duration (in hours) and rainfall (in inches) for the storm event(s) sampled. The duration between the storm event sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm event must be a minimum of 72 hours. This information must be recorded as part of the sampling procedure and records retained in accordance with Provision I.B.5. of this permit. The volume may be measured using flow measurement devices or may be estimated using any method approved in writing by the Department.

H. SPECIAL REQUIREMENTS FOR PERMIT LIMITATIONS IN PART I

- 1. Effluent limits for Outfalls 0012, 0013, and 0014 shall apply as described in the limits pages in Part I. The Permittee must submit DMRs marked "No Discharge" to the Department monthly for the designated outfalls that were not applicable that month.
- 2. When calculating the reported stream flow rate using USGS #02406930 Shirtee Creek near Odena, Alabama, the J.Earl Ham WWTP discharge must be subtracted, then an additional 10% of the remaining flow should be subtracted.

I. SPECIAL REQUIREMENTS FOR USGS STREAM GAUGE

- 1. A United States Geological Survey (USGS) stream gauge shall be maintained to determine stream flow. The Permittee shall contract with the USGS for calibration and maintenance of the USGS stream gauge, unless another entity is providing funding for the USGS gauge.
- 2. A copy of the contract with the USGS, which includes calibration and maintenance of the gauge, and verification of payment shall be submitted to the Department so that they are received no later than January 31st of each year for the prior year. If another entity is providing funding for the USGS gauge, a statement verifying that the gauge has been calibrated and maintained by the USGS and the name of the entity that provided funding for the USGS gauge shall be submitted no later than January 31st of each year for the prior year.

NPDES PERMIT RATIONALE

NPDES Permit No: **AL0020001** Date: December 17, 2024

Permit Applicant: Utilities Board of the City of Sylacauga
Post Office Box 207
Sylacauga, AL 35150

Location: J Earl Ham WWTP
610 Old Sylacauga Highway
Sylacauga, AL 35150
Talladega County

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

Basis for Limitations: Water Quality Model: CBOD₅, NH₃N, DO, TKN, and receiving stream flow rate
Reissuance with no modification: TSS, pH, DO, TSS % Removal, CBOD₅ % Removal,
E. coli, NH₃N (0012 and 0013 Winter), CBOD₅,
TRC (0013 and 0014), and receiving flow rate
Instream calculation at 7Q10: IWC 90% (0012), 62% (0013) and 45% (0014)
Toxicity based: TRC and NH₃N (Summer)
Secondary Treatment Levels: TSS and Percent Removals
Other (described below): Total Recoverable Copper, pH, and E. coli

Design Flow in Million Gallons per Day: 4.8 MGD

Major: Yes

Description of Discharge:

Feature ID	Description	Receiving Water	Waterbody Use Classification	303(d)	TMDL
001	Treated Domestic and Industrial Wastewater	Shirtee Creek	Fish and Wildlife (F&W)	Yes	Yes
002	Stormwater Monitoring	Shirtee Creek	Fish and Wildlife (F&W)	Yes	Yes
003	Stormwater Monitoring	Darby Branch	Fish and Wildlife (F&W)	No	No
004	Stormwater Monitoring	Shirtee Creek	Fish and Wildlife (F&W)	Yes	Yes

Discussion: This permit is a reissuance due to expiration. This permit is tiered to account for additional headwater flow from a quarry discharge upstream of the WWTP discharge. The effluent limits for Carbonaceous Biochemical Oxygen Demand (CBOD₅), Ammonia as Nitrogen (NH₃N), Total Kjeldahl Nitrogen (TKN), and Dissolved Oxygen (DO) were developed based on Waste Load Allocation (WLA) model completed by the Department's Water Quality Branch on March 5, 2024. There are seasonal limits for the 7Q10 conditions and limits for headwater flow conditions of 4.64 cfs (3 MGD) and 9.28 cfs (6 MGD). The summer season is May through November while the winter season is December through April.

4.8 MGD with streamflow < 0.4.64 cfs – Outfall 0012

The pH limits for Outfall 0012 were developed to be supportive of the water-use classification of the receiving stream. The daily maximum pH limit is 8.5 s.u. and the daily minimum limit is 6.0 s.u. The monitoring frequency will be three times per week.

The discharge limits for DO, CBOD₅, TKN, and NH₃N for Outfall 0012 were developed by the Municipal Permitting Section based on a Waste Load Allocation (WLA) model completed by the Department's Water Quality Branch on March 5, 2024. The summer monthly average limits for CBOD₅ and NH₃N are 13.0 mg/l and 2.4 mg/l, respectively, with a monitoring frequency of three times per week. The winter monthly average limits for CBOD₅ and NH₃N are 9.0 mg/l and 4.0 mg/l, respectively, with a monitoring frequency of three times per week. The summer and winter monthly average limits for TKN are 7.5 mg/L and 9.0 mg/L, respectively, with a monitoring frequency of three times per week. The daily minimum limit for DO is 6.0 mg/l with a monitoring frequency of three times per week.

The monthly average TSS limit is established at 30.0 mg/l based on 40 CFR 133.102. The monitoring frequency is three times per week. Minimum percent removal limits of 85.0 percent are imposed for TSS and CBOD₅ to be calculated once per month. The minimum percent removal limits are based on 40 CFR 133.102.

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

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 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.

Total Residual Chlorine (TRC) limits are included in the permit. Monthly average and daily maximum TRC limitations of 0.012 mg/L and 0.021 mg/L, respectively, are being imposed at Outfall 0012. The TRC limits were developed based on EPA suggested WQ criteria and the Department's Permit Development Rationale and should be protective of acute and chronic toxicity criteria in the receiving stream. The increased TRC limit 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. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR. In accordance with a letter date August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes. The monitoring frequency is three times per week.

Chronic toxicity testing with two species (Ceriodaphnia and Pimephales) is being imposed in this permit. Toxicity testing is imposed for both survival and life-cycle impairment (i.e., growth and reproduction). Chronic toxicity testing at the IWC of 90 percent is required once per year during the month of October, if the average daily stream flow is less than 4.64 cfs for each calendar day from the previous October to September. The decreased 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.

This Permittee treats both municipal and industrial wastewater and is classified as a major municipality. Therefore, the Department completed numerical a Reasonable Potential Analysis (RPA) of the wastewater data submitted in EPA Form 2A Table C of the Permittee's application (i.e., per 40 CFR Par 122 Appendix J – Table 2) and data from the Permittee's Discharge Monitoring Reports. The RPA indicated whether any pollutants in the treated effluent have the potential to contribute to excursions of Alabama's in-stream water quality standards. The RPA was based on a 7Q10 of 0.089 cfs, a mean annual flow of 10.196 cfs, and a hardness of 205 mg/L. Background instream data from station SHRT-5 was provided by the Department's Water Quality Branch. For this discharge, the RPA indicates that the

following pollutant in the treated effluent may contribute to excursions of Alabama's in-stream water quality standards: Total Recoverable Copper. Copper has monthly average and daily maximum limits of 47.3 µg/L and 72.3 µg/L. The monitoring frequency is once per month. The increased Copper limit 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. The RPA for Arsenic Water Quality Criteria to be exceeded appears to be caused by background data. All the application arsenic sample results were below detected. Arsenic is not expected in the discharges.

Stream flow rate will be monitored continuously, seven days per week. The limits for Outfall 0012 are applicable if any average daily stream flow is less than 4.64 cfs during each day of the calendar month. Effluent flow is to be monitored continuously, seven days per week. If Outfall 0012 is applicable, DMRs for 0013 and 0014 should be submitted with "No Discharge" marked for the month.

4.8 MGD with 4.64cfs ≤ stream flow < 9.28 cfs – Outfall 0013

The pH limits for Outfall 0013 were developed to be supportive of the water-use classification of the receiving stream. The daily maximum pH limit is 8.5 s.u. and the daily minimum limit is 6.0 s.u. The monitoring frequency will be three times per week.

The discharge limits for DO, CBOD₅, TKN, and NH₃N for Outfall 0013 were developed by the Municipal Permitting Section based on a Waste Load Allocation (WLA) model completed by the Department's Water Quality Branch on March 5, 2024. The summer monthly average limits for CBOD₅ and NH₃N are 10 mg/l and 3.4 mg/l, respectively, with a monitoring frequency of three times per week. The monthly winter average limits for CBOD₅ and NH₃N are 7.0 mg/l and 3.5 mg/l, respectively, with a monitoring frequency of three times per week. The summer and winter monthly average limits for TKN are 8.5 mg/L and 5.5 mg/L, respectively, with a monitoring frequency of three times per week. The daily minimum limit for DO is 6.0 mg/l with a monitoring frequency of three times per week.

The monthly average TSS limit is established at 30.0 mg/l based on 40 CFR 133.102. The monitoring frequency is three times per week. Minimum percent removal limits of 85.0 percent are imposed for TSS and CBOD₅ to be calculated once per month. The minimum percent removal limits are based on 40 CFR 133.102.

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

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 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

Total Residual Chlorine (TRC) limits are included in the permit. Monthly average and daily maximum TRC limitations of 0.018 mg/l and 0.031 mg/l, respectively, are being imposed at Outfall 0013. The TRC limits were developed based on EPA suggested WQ criteria and the Department's Permit Development Rationale and should be protective of acute and chronic toxicity criteria in the receiving stream. If monitoring is not applicable during the monitoring period, enter "*9" on the monthly DMR. In accordance with a letter date August 11, 1998, from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes. The monitoring frequency is three times per week.

Chronic toxicity testing with two species (Ceriodaphnia and Pimephales) is being imposed in this permit. Toxicity testing is imposed for both survival and life-cycle impairment (i.e., growth and reproduction). Chronic toxicity testing

at the IWC of 62 percent is required once per year during the month of October, if the average daily stream flow is less than 9.28 cfs and greater than or equal to 4.64 cfs for one calendar day from the previous October to September.

This Permittee treats both municipal and industrial wastewater and is classified as a major municipality. Therefore, the Department completed numerical a Reasonable Potential Analysis (RPA) of the wastewater data submitted in EPA Form 2A Table C of the Permittee's application (i.e., per 40 CFR Par 122 Appendix J – Table 2) and data from the Permittee's Discharge Monitoring Reports. The RPA indicated whether any pollutants in the treated effluent have the potential to contribute to excursions of Alabama's in-stream water quality standards. The RPA was based on a 7Q10 of 4.641 cfs, a mean annual flow of 10.196 cfs, and a hardness of 205 mg/L. Background instream data from station SHRT-5 was provided by the Department's Water Quality Branch. For this discharge, the RPA indicates that the following pollutant in the treated effluent may contribute to excursions of Alabama's in-stream water quality standards: Total Recoverable Copper. Copper has monthly average and daily maximum limits of 67.1 µg/L and 90.3 µg/L. The monitoring frequency is once per month. The increased Copper limit 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. The RPA for Arsenic Water Quality Criteria to be exceeded appears to be caused by background data. All the application arsenic sample results were below detected. Arsenic is not expected in the discharges.

Stream flow rate will be monitored continuously, seven days per week. The limits for Outfall 0013 are applicable if any average daily stream flow is less than 9.28 cfs but greater than 4.64 cfs during each day of the calendar month. Effluent flow is to be monitored continuously, seven days per week. If Outfall 0013 is applicable, DMRs for 0012 and 0014 should be submitted with "No Discharge" marked for the month.

4.8 MGD with stream flow \geq 9.28 cfs – Outfall 0014

The pH limits for Outfall 0014 were developed to be supportive of the water-use classification of the receiving stream. The daily maximum pH limit is 8.5 s.u. and the daily minimum limit is 6.0 s.u. The monitoring frequency will be three times per week.

The discharge limits for DO, CBOD₅, TKN, and NH₃N for Outfall 0014 were developed by the Municipal Permitting Section based on a Waste Load Allocation (WLA) model completed by the Department's Water Quality Branch on March 5, 2024. The summer monthly average limits for CBOD₅ and NH₃N are 8.0 mg/l and 4.7 mg/l, respectively, with a monitoring frequency of three times per week. The winter monthly average limits for CBOD₅ and NH₃N are 7.0 mg/l and 3.0 mg/l, respectively, with a monitoring frequency of three times per week. The summer and winter monthly average limits for TKN are 9.0 mg/L and 5.0 mg/L, respectively, with a monitoring frequency of three times per week. The daily minimum limit for DO is 6.0 mg/l with a monitoring frequency of three times per week.

The monthly average TSS limit is established at 30.0 mg/l based on 40 CFR 133.102. The monitoring frequency is three times per week. Minimum percent removal limits of 85.0 percent are imposed for TSS and CBOD₅ to be calculated once per month. The minimum percent removal limits are based on 40 CFR 133.102.

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

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 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.

Total Residual Chlorine (TRC) limits are included in the permit. Monthly average and daily maximum TRC limitations of 0.025 mg/l and 0.043 mg/l, respectively, are being imposed at Outfall 0014. The TRC limits were developed based on EPA suggested WQ criteria and the Department's Permit Development Rationale and should be

protective of acute and chronic toxicity criteria in the receiving stream. If monitoring is not applicable during the monitoring period, enter “*9” on the monthly DMR. In accordance with a letter date August 11, 1998, from EPA Headquarters and a 1991 memorandum from EPA Region 4’s Environmental Services Division (ESD), due to testing and method detection limitations, a Total Residual Chlorine measurement below 0.05 mg/L shall be considered below detection for compliance purposes. The monitoring frequency is three times per week.

Chronic toxicity testing with two species (Ceriodaphnia and Pimephales) is being imposed in this permit. Toxicity testing is imposed for both survival and life-cycle impairment (i.e., growth and reproduction). Chronic toxicity testing at the IWC of 45 percent is required once per year during the month of October, if the average daily stream flow is 9.28 cfs or greater for each calendar day from the previous October to September.

This Permittee treats both municipal and industrial wastewater and is classified as a major municipality. Therefore, the Department completed numerical a Reasonable Potential Analysis (RPA) of the wastewater data submitted in EPA Form 2A Table C of the Permittee’s application (i.e., per 40 CFR Par 122 Appendix J – Table 2) and data from the Permittee’s Discharge Monitoring Reports. The RPA indicated whether any pollutants in the treated effluent have the potential to contribute to excursions of Alabama’s in-stream water quality standards. The RPA was based on a 7Q10 of 9.282 cfs, a mean annual flow of 10.196 cfs, and a hardness of 205 mg/L. Background instream data from station SHRT-5 was provided by the Department’s Water Quality Branch. For this discharge, the RPA indicates that the following pollutant in the treated effluent may contribute to excursions of Alabama’s in-stream water quality standards: Total Recoverable Copper. Copper has monthly average and daily maximum limits of 91.6 µg/L and 112.6 µg/L. The monitoring frequency is once per month. The increased Copper limit 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. The RPA for Arsenic Water Quality Criteria to be exceeded appears to be caused by background data. All the application arsenic sample results were below detected. Arsenic is not expected in the discharges.

Stream flow rate will be monitored seven days per week. The limits for Outfall 0014 are applicable if any effluent flow average daily stream flow is greater than 9.28 cfs during each day of the calendar month. If Outfall 0014 is applicable, DMRs for 0012 and 0013 should be submitted with “No Discharge” marked for the month.

The receiving stream is the Shirtee Creek, and it is a Tier I waterbody. The stream is on the current 303(d) list for impaired waterbodies for Total Dissolved Solids. To ensure that the facility is not contributing to the impairment of the receiving stream for Total Dissolved Solids (TDS), the facility monitoring for TDS will be imposed so that sufficient information will be available regarding the contribution from this point source. The monitoring frequency will be once per month. There is an August 31, 2023, TMDL for pathogens (E. coli). The pathogen limits imposed in the Permit are consistent with Alabama’s Water Quality standards and this discharge should not cause additional pathogen impairment in Shirtee Creek. Darby Branch is a Tier I waterbody and is not on the most recent 303(d) list. There are no TMDLs affecting the Darby Branch discharge.

Storm water monitoring is being imposed with this permit based on 40 CFR Part 122. The designated outfalls for storm water monitoring are 002S through 004S. Storm water monitoring will be required on an annual basis. TDS monitoring will be imposed in this permit for Outfalls 002S and 004S due to the TDS 303(d) listing on Shirtee Creek. Additionally, the facility is required to develop and implement a Storm Water Pollution Prevention (SWPP) Plan, which would help minimize pollutants in the storm water.

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

Prepared by: Torbert

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	J. Earl Ham WWTP	
NPDES Permit Number:	AL0020001	
Receiving Stream:	Shirtee Creek	
Facility Design Flow (Qw):	4.800 MGD	
Receiving Stream 7Q10:	0.890 cfs	
Receiving Stream 1Q10:	0.668 cfs	(Estimated at 0.75 * 7Q10)
Winter Headwater Flow (WHF):	4.54 cfs	
Summer Temperature for CCC:	30 deg. Celsius	
Winter Temperature for CCC:	20 deg. Celsius	
Headwater Background NH3-N Level:	0.14 mg/l	
Receiving Stream pH:	7.0 s.u.	
Headwater Background FC Level (summer):	N./A.	(Only applicable for facilities with diffusers.)
(winter):	N./A.	

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

$$\text{Stream Dilution Ration (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 89.30\%$$

AMMONIA TOXICITY LIMITATIONS

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

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

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

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 89.30\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

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

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

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 2.4 \text{ mg/l NH}_3\text{-N at 7Q}_{10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= 6.7 \text{ mg/l NH}_3\text{-N at Winter Flow} \end{aligned}$$

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

	<u>DO-based NH3-N limit</u>	<u>Toxicity-based NH3-N limit</u>
Summer	2.40 mg/l NH3-N	2.40 mg/l NH3-N
Winter	4.00 mg/l NH3-N	6.70 mg/l NH3-N

Summer: The Toxicity based limit of 2.40 mg/l NH3-N applies.

Winter: The DO based limit of 4.00 mg/l NH3-N applies.

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

The following factors trigger toxicity testing requirements:

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

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

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

Chronic toxicity testing is required

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 89.30\%$$

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

MAXIMUM ALLOWABLE CHLORINATION LIMITS

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

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

Maximum allowable TRC in effluent:	0.012 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.021 mg/l (acute)	(0.019)/(SDR)

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

Prepared By: Shanda Torbert

Date: 12/17/2024

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	J. Earl Ham WWTP	
NPDES Permit Number:	AL0020001	
Receiving Stream:	Shirtee Creek	
Facility Design Flow (Qw):	4.800 MGD	
Receiving Stream 7Q10:	4.641 cfs	Minimum Headwater Flow
Receiving Stream 1Q10:	4.641 cfs	Minimum Headwater Flow
Winter Headwater Flow (WHF):	4.64 cfs	Minimum Headwater Flow
Summer Temperature for CCC:	30 deg. Celsius	
Winter Temperature for CCC:	20 deg. Celsius	
Headwater Background NH3-N Level:	0.14 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 Ratio (SDR) is calculated using the 7Q10 for all stream classifications.

$$\text{Stream Dilution Ratio (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 61.54\%$$

AMMONIA TOXICITY LIMITATIONS

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

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

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

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 61.54\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

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

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

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

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 3.4 \text{ mg/l NH}_3\text{-N at 7Q}_{10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (WHF + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (WHF)]}{Q_w} \\ &= 6.7 \text{ mg/l NH}_3\text{-N at Winter Flow} \end{aligned}$$

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

	<u>DO-based NH3-N limit</u>	<u>Toxicity-based NH3-N limit</u>
Summer	3.40 mg/l NH3-N	3.40 mg/l NH3-N
Winter	3.50 mg/l NH3-N	6.70 mg/l NH3-N

Summer: The Toxicity based limit of 3.40 mg/l NH3-N applies.

Winter: The DO based limit of 3.50 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

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 61.54\%$$

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

MAXIMUM ALLOWABLE CHLORINATION LIMITS

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

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

Maximum allowable TRC in effluent:	0.018 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.031 mg/l (acute)	(0.019)/(SDR)

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

Prepared By: Shanda Torbert Date: 12/17/2024

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	J. Earl Ham WWTP	
NPDES Permit Number:	AL0020001	
Receiving Stream:	Shirtee Creek	
Facility Design Flow (Qw):	4.800 MGD	
Receiving Stream 7Q10:	9.282 cfs	Minimum Headwater Flow
Receiving Stream 1Q10:	9.282 cfs	Minimum Headwater Flow
Winter Headwater Flow (WHF):	9.28 cfs	Minimum Headwater Flow
Summer Temperature for CCC:	30 deg. Celsius	
Winter Temperature for CCC:	20 deg. Celsius	
Headwater Background NH3-N Level:	0.14 mg/l	
Receiving Stream pH:	7.0 s.u.	
Headwater Background FC Level (summer):	N./A.	(Only applicable for facilities with diffusers.)
(winter):	N./A.	

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

$$\text{Stream Dilution Ration (SDR)} = \frac{Q_w}{7Q_{10} + Q_w} = 44.45\%$$

AMMONIA TOXICITY LIMITATIONS

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

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

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

$$\begin{aligned} \text{Limiting Dilution} &= \frac{Q_w}{7Q_{10} + Q_w} \\ &= 44.45\% \quad \text{Effluent-Dominated, CCC Applies} \end{aligned}$$

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

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

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

$$\begin{aligned} \text{Summer NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (7Q_{10} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (7Q_{10})]}{Q_w} \\ &= 4.7 \text{ mg/l NH}_3\text{-N at 7Q}_{10} \end{aligned}$$

$$\begin{aligned} \text{Winter NH}_3\text{-N Toxicity Limit} &= \frac{[(\text{Allowable Instream NH}_3\text{-N}) * (\text{WHF} + Q_w)] - [(\text{Headwater NH}_3\text{-N}) * (\text{WHF})]}{Q_w} \\ &= 9.2 \text{ mg/l NH}_3\text{-N at Winter Flow} \end{aligned}$$

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

	<u>DO-based NH3-N limit</u>	<u>Toxicity-based NH3-N limit</u>
Summer	4.70 mg/l NH3-N	4.70 mg/l NH3-N
Winter	3.00 mg/l NH3-N	9.20 mg/l NH3-N

Summer: The Toxicity based limit of 4.70 mg/l NH3-N applies.

Winter: The DO based limit of 3.00 mg/l NH3-N applies.

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

The following factors trigger toxicity testing requirements:

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

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

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

Chronic toxicity testing is required

$$\text{Instream Waste Concentration (IWC)} = \frac{Q_w}{7Q_{10} + Q_w} = 44.45\%$$

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

MAXIMUM ALLOWABLE CHLORINATION LIMITS

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

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

Maximum allowable TRC in effluent:	0.025 mg/l (chronic)	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.043 mg/l (acute)	(0.019)/(SDR)

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

Prepared By: Shanda Torbert Date: 12/17/2024

FACT SHEET

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

Date Prepared: December 17, 2024

By: Shanda Torbert

NPDES Permit No. AL0020001

1. Name and Address of Applicant:

Utilities Board of the City of Sylacauga
Post Office Box 207
Sylacauga, AL 35150

2. Name and Address of Facility:

J Earl Ham WWTP
610 Old Sylacauga Highway
Sylacauga, AL 35150

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
001	Shirtee Creek	Fish and Wildlife (F&W)
002	Shirtee Creek	Fish and Wildlife (F&W)
003	Darby Branch	Fish and Wildlife (F&W)
004	Shirtee Creek	Fish and Wildlife (F&W)

For the Outfall latitude and longitude see the permit application.

5. Permit Conditions:

See attached Rationale and Draft Permit.

6. PROCEDURES FOR THE FORMULATION OF FINAL DETERMINATIONS

a. Comment Period

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

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

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

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.

$Q_d * C_{d1} + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$							Enter Max Daily Discharge as reported by Applicant (C _d) Max	Enter Avg Daily Discharge as reported by Applicant (C _d) Avg	Partition Coefficient (Stream / Lake)
ID	Pollutant	Carcinogen Yes*	Type	Background from upstream source (C _{d1}) Daily Max	Background from upstream source (C _{d2}) Monthly Avg	Background Instream (C _s) Daily Max	Background Instream (C _s) Monthly Avg		
1	Antimony		Metals	0	0	0.309	0.001228	0.55	0.18
2	Arsenic***	YES	Metals	0	0	2.72	0.83	0	0.574
3	Beryllium		Metals	0	0	0	0	0.21	0.07
4	Cadmium**		Metals	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	4.514	1.0392	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0.95	0.22	0	0.388
7	Copper**		Metals	0	0	20.52	3.49	38	15.78
8	Lead**		Metals	0	0	0	0	0.3	0.1
9	Mercury**		Metals	0	0	0	0	0.00287	0.00201
10	Nickel**		Metals	0	0	1.2833	0.27977	2.6	1.7
11	Selenium		Metals	0	0	0	0	0.9	0.3
12	Silver		Metals	0	0	0	0	0.32	0.1
13	Thallium		Metals	0	0	0	0	0	0
14	Zinc**		Metals	0	0	11.465	3.08	18.8	18
15	Cyanide		Metals	0	0	0	0	0	0.330
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0
17	Hardness (As CaCO3)		Metals	0	0	258000	233250	171000	143000
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	Bromofarm*	YES	VOC	0	0	0	0	0	0
23	Carbon Tetrachloride*	YES	VOC	0	0	0	0	0	0
24	Chlordane	YES	VOC	0	0	0	0	0	0
25	Chlorobenzene		VOC	0	0	0	0	0	0
26	Chlorodibromo-Methane*	YES	VOC	0	0	0	0	3.29	1.09
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	33.2	15.88
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	8.87	2.95
34	1,1-Dichloroethane*	YES	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, 1, 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	Triethylamine (TBT)	YES	VOC	0	0	0	0	0	0
50	1, 1, 1-Trichloroethane		VOC	0	0	0	0	0	0
51	1, 1, 1-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	2-Chloro-N-Cresol		Acids	0	0	0	0	0	0
55	2-Chlorophenol		Acids	0	0	0	0	0	0
56	2, 4-Dichlorophenol		Acids	0	0	0	0	0	0
57	2, 4-Dimethylphenol		Acids	0	0	0	0	0	0
58	4, 6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0
59	4, 6-Dinitrophenol		Acids	0	0	0	0	0	0
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0	0
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0	0
62	2-Nitrophenol		Acids	0	0	0	0	0	0
63	4-Nitrophenol		Acids	0	0	0	0	0	0
64	Pentachlorophenol*	YES	Acids	0	0	0	0	0	0
65	Phenol		Acids	0	0	0	0	0	0
66	2, 4, 6-Trichlorophenol*	YES	Acids	0	0	0	0	0	0
67	Acephenanthrene		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	Benzo(a)Anthracene*	YES	Bases	0	0	0	0	0	0
71	Benzo(a)Pyrene*	YES	Bases	0	0	0	0	0	0
72	Benzo(b)Fluoranthene		Bases	0	0	0	0	0	0
73	Benzo(g,h,i)Perylene		Bases	0	0	0	0	0	0
74	Benzo(k)Fluoranthene		Bases	0	0	0	0	0	0
75	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0
76	Bis (2-Chloroethyl) Ether*	YES	Bases	0	0	0	0	0	0
77	Bis (2-Chloroisopropyl) Ether		Bases	0	0	0	0	0	0
78	Bis (2-Ethoxyethyl) Phthalate*	YES	Bases	0	0	0	0	0	0
79	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0
80	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0
81	2-Chloronaphthalene		Bases	0	0	0	0	0	0
82	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0
83	Chrysene*	YES	Bases	0	0	0	0	0	0
84	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0
85	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0
86	Dibenz(a,h)Anthracene*	YES	Bases	0	0	0	0	0	0
87	1, 2-Dichlorobenzene		Bases	0	0	0	0	0	0
88	1, 3-Dichlorobenzene		Bases	0	0	0	0	0	0
89	1, 4-Dichlorobenzene		Bases	0	0	0	0	0	0
90	1, 3, 5-Trichlorobenzidine*	YES	Bases	0	0	0	0	0	0
91	Diethyl Phthalate		Bases	0	0	0	0	0	0
92	Dimethyl Phthalate		Bases	0	0	0	0	0	2.6
93	2, 4-Dinitrophenol*	YES	Bases	0	0	0	0	0	0
94	2, 6-Dinitrotoluene		Bases	0	0	0	0	0	0
95	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0
96	Endosulfan (alpha)	YES	Bases	0	0	0	0	0	0
97	Endosulfan (beta)	YES	Bases	0	0	0	0	0	0
98	Endosulfan sulfate	YES	Bases	0	0	0	0	0	0
99	Endrin	YES	Bases	0	0	0	0	0	0
100	Endrin Aldehyde	YES	Bases	0	0	0	0	0	0
101	Fluoranthene		Bases	0	0	0	0	0	0
102	Fluorene		Bases	0	0	0	0	0	0
103	Heptachlor	YES	Bases	0	0	0	0	0	0
104	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0
105	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	0
106	Hexachlorobutadiene*	YES	Bases	0	0	0	0	0	0
107	Hexachlorocyclohexane (alpha)	YES	Bases	0	0	0	0	0	0
108	Hexachlorocyclohexane (beta)	YES	Bases	0	0	0	0	0	0
109	Hexachlorocyclohexane (gamma)	YES	Bases	0	0	0	0	0	0
110	Hexachlorocyclopentadiene		Bases	0	0	0	0	0	0
111	Hexachloroethane		Bases	0	0	0	0	0	0
112	Indeno(1, 2, 3-CK)Pyrene*	YES	Bases	0	0	0	0	0	0
113	Isophorone		Bases	0	0	0	0	0	0
114	Naphthalene		Bases	0	0	0	0	0	0
115	Nitrobenzene		Bases	0	0	0	0	0	0
116	N-Nitrosodimethyl-N-Propylamine*	YES	Bases	0	0	0	0	0	0
117	N-Nitrosodimethyl-N-Methylamine*	YES	Bases	0	0	0	0	0	0
118	N-Nitrosodimethyl-N-Phenylamine*	YES	Bases	0	0	0	0	0	0
119	PCB-1016	YES	Bases	0	0	0	0	0	0
120	PCB-1221	YES	Bases	0	0	0	0	0	0
121	PCB-1232	YES	Bases	0	0	0	0	0	0
122	PCB-1242	YES	Bases	0	0	0	0	0	0
123	PCB-1248	YES	Bases	0	0	0	0	0	0
124	PCB-1254	YES	Bases	0	0	0	0	0	0
125	PCB-1260	YES	Bases	0	0	0	0	0	0
126	Phenanthrene		Bases	0	0	0	0	0	0
127	Pyrene		Bases	0	0	0	0	0	0
128	1, 2, 4-Trichlorobenzene		Bases	0	0	0	0	0	0

4.8	Enter Q _d = wastewater discharge flow from facility (MGD)
7.4266992	Q _d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q _{d2} = background stream flow in MGD above point of discharge
0	Q _{d2} = background stream flow from upstream source (cfs)
0.89	Enter Q ₁₀ , Q _s = background stream flow in cfs above point of discharge
0.667	Enter or estimated, Q ₁₀ , Q _s = background stream flow in cfs above point of discharge (Q ₁₀ estimated at 75% of Q ₁₀)
10.198	Enter Mean Annual Flow, Q _s = background stream flow in cfs above point of discharge
4.544	Enter Q ₁₀ , Q _s = background stream flow in cfs above point of discharge (For LWF class streams)
Enter to LWF	Enter C _s = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q _d + Q _{d2} + Q _s	Q _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)
205	Enter, Background Hardness above point of discharge (assumed 50 South of Birmingham and 100 North of Birmingham)
7.00 u.s.g.	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

December 18, 2024

Freshwater F&W classification				Freshwater Acute (µg/l) Q _s = 1Q10				Freshwater Chronic (µg/l) Q _s = 7Q10				Human Health Consumption Fish only (µg/d)								
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C _u) Daily Max	Max Daily Discharge as reported by Applicant (C _{app})	Water Quality Criteria (C _c)	Draft Permit Limit (C _{pl})	20% of Draft Permit Limit	RP?	Background from upstream source (C _u) Monthly Ave	Avg Daily Discharge as reported by Applicant (C _{app})	Water Quality Criteria (C _c)	Draft Permit Limit (C _{pl})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C _c)	Draft Permit Limit (C _{pl})	20% of Draft Permit Limit	RP?	
1	Antimony			0	0.55					0	0.18						4.18E+02	8.36E+01	No	
2	Arsenic	YES	YES	0	0					0	0						3.03E-01	4.46E-01	Yes	
3	Beryllium			0	0.21					0	0.07									
4	Cadmium			0	0					0	0									
5	Chromium Chromium (III)			0	0					0	0									
6	Chromium Chromium (VI)			0	0					0	0									
7	Copper	YES		0	36					0	15.78									
8	Lead			0	0.3					0	0.1									
9	Mercury			0	0.00287					0	0.00201						4.24E+02	4.75E+02	9.50E+03	No
10	Nickel			0	2.6					0	1.7						9.93E+02	1.11E+03	2.22E+02	No
11	Selenium			0	0.9					0	0.3						2.72E+03	5.44E+02		No
12	Silver			0	0.32					0	0.1									
13	Thallium			0	0					0	0									
14	Zinc			0	18.9					0	16						1.49E+04	1.67E+04	3.34E+03	No
15	Cyanide			0	0					0	0						1.05E+04	2.09E+03		No
16	Total Phenolic Compounds			0	0					0	0									
17	Hardness (As CaCO ₃)			0	171000					0	143000									
18	Acrolein			0	0					0	0						6.08E+00	1.22E+00		No
19	Acrylonitrile	YES		0	0					0	0						3.42E-01	6.84E-02		No
20	Aldrin	YES		0	0					0	0						6.97E-05	1.39E-05		No
21	Benzene	YES		0	0					0	0						3.87E+01	7.74E+00		No
22	Bromodichloromethane	YES		0	0					0	0						1.87E+02	3.74E+01		No
23	Carbon Tetrachloride	YES		0	0					0	0						2.27E+00	4.54E-01		No
24	Chlordane	YES		0	0					0	0						1.12E-03	2.24E-04		No
25	Chlorobenzene			0	0					0	0						1.01E+03	2.03E+02		No
26	Chlorodibromomethane	YES		0	3.29					0	1.09						1.78E+01	3.52E+00		No
27	Chloroethane			0	0					0	0									
28	2-Chloro-Ethylvinyl Ether			0	0					0	0									
29	Chloroform	YES		0	33.2					0	15.86						2.42E+02	4.84E+01		No
30	4,4'-DDD	YES		0	0					0	0						3.04E-04	6.08E-05		No
31	4,4'-DDE	YES		0	0					0	0						3.04E-04	6.08E-05		No
32	4,4'-DDT	YES		0	0					0	0						3.04E-04	6.08E-05		No
33	Dichlorodibromomethane	YES		0	8.87					0	2.95						2.39E+01	4.78E+00		No
34	1,1-Dichloroethane			0	0					0	0									
35	1,2-Dichloroethane	YES		0	0					0	0						5.07E+01	1.01E+01		No
36	Trans-1,2-Dichloro-Ethylene			0	0					0	0						6.82E+03	1.32E+03		No
37	1,1-Dichloroethylenes	YES		0	0					0	0						9.89E+03	1.98E+03		No
38	1,2-Dichloropropane			0	0					0	0						9.51E+00	1.90E+00		No
39	1,3-Dichloro-Propylene			0	0					0	0						1.38E+01	2.75E+00		No
40	Dieldrin	YES		0	0					0	0						7.41E-05	1.48E-05		No
41	Ethylbenzene			0	0					0	0						1.39E+03	2.79E+02		No
42	Methyl Bromide			0	0					0	0						9.78E+02	1.95E+02		No
43	Methyl Chloride			0	0					0	0									
44	Methylene Chloride	YES		0	0					0	0						8.20E+02	1.64E+02		No
45	1,1,2,2-Tetrachloro-Ethane	YES		0	0					0	0						5.54E+00	1.11E+00		No
46	Tetrachloro-Ethylene	YES		0	0					0	0						4.59E+00	9.10E-01		No
47	Toluene			0	0					0	0						9.77E+03	1.95E+03		No
48	Toxaphene	YES		0	0					0	0						3.84E-04	7.68E-05		No
49	Tributyltin (TBT)	YES		0	0					0	0						0.081	0.016		No
50	1,1,1-Trichloroethane			0	0					0	0									
51	1,1,2-Trichloroethane	YES		0	0					0	0						2.16E+01	4.32E+00		No
52	Trichloroethylene	YES		0	0					0	0						4.15E+01	8.29E+00		No
53	Vinyl Chloride	YES		0	0					0	0						3.36E+00	6.78E-01		No
54	p-Chloro-M-Cresol			0	0					0	0									
55	2-Chlorophenol			0	0					0	0						9.75E+01	1.95E+01		No
56	2,4-Dichlorophenol			0	0					0	0						1.85E+02	3.85E+01		No
57	2,4-Dimethylphenol			0	0					0	0						5.57E+02	1.11E+02		No
58	4,6-Dinitro-O-Cresol			0	0					0	0									
59	2,4-Dinitrophenol			0	0					0	0						3.48E+03	6.97E+02		No
60	4,6-Dinitro-2-methylphenol	YES		0	0					0	0						3.93E+02	7.85E+01		No
61	Dioxin (2,3,7,8-TCDD)	YES		0	0					0	0						6.33E-08	1.27E-08		No
62	2-Nitrophenol			0	0					0	0									
63	4-Nitrophenol			0	0					0	0									
64	Pentachlorophenol	YES		0	0					0	0						4.19E+00	8.39E-01		No
65	Phenol			0	0					0	0						5.80E+03	1.12E+03		No
66	2,4,6-Trichlorophenol	YES		0	0					0	0						3.39E+00	6.71E-01		No
67	Acenaphthene			0	0					0	0						6.46E+02	1.30E+02		No
68	Acenaphthylene			0	0					0	0									
69	Anthracene			0	0					0	0						2.61E+04	5.23E+03		No
70	Benidine			0	0					0	0						1.30E-04	2.60E-05		No
71	Benzo(a)Anthracene	YES		0	0					0	0						2.53E-02	5.06E-03		No
72	Benzo(a)Pyrene	YES		0	0					0	0						2.53E-02	5.06E-03		No
73	Benzo(b)Fluoranthene			0	0					0	0						1.19E-02	2.39E-03		No
74	Benzo(g,h,i)Perylene			0	0					0	0									
75	Benzo(k)Fluoranthene			0	0					0	0						1.19E-02	2.39E-03		No
76	Bis (2-Chloroethoxy) Methane			0	0					0	0									
77	Bis (2-Chloroethyl) Ether	YES		0	0					0	0						7.29E-01	1.46E-01		No
78	Bis (2-Chloroisopropyl) Ether			0	0					0	0						4.23E+04	8.46E+03		No
79	Bis (2-Ethylhexyl) Phthalate	YES		0	0					0	0						3.04E+00	6.08E-01		No
80	4-Bromophenyl Phenyl Ether			0	0					0	0									
81	Butyl Benzyl Phthalate			0	0					0	0						1.26E+03	2.52E+02		No
82	2-Chloronaphthalene			0	0					0	0						1.05E+03	2.07E+02		No
83	4-Chlorophenyl Phenyl Ether			0	0					0	0									
84	Chrysene	YES		0	0					0	0						2.53E-02	5.06E-03		No
85	Di-N-Butyl Phthalate			0	0					0	0						2.94E+03	5.87E+02		No
86	Di-N-Octyl Phthalate			0	0					0	0									
87	Dibenz(a,h)Anthracene	YES		0	0					0	0						2.53E-02	5.06E-03		No
88	1,2-Dichlorobenzene			0	0					0	0						8.46E+02	1.69E+02		No
89	1,3-Dichlorobenzene			0	0					0	0						6.30E+02	1.26E+02		No
90	1,4-Dichlorobenzene			0	0					0	0						1.26E+02	2.52E+01		No
91	3,3-Dichlorobenzidine	YES		0	0					0	0						3.94E-02	7.89E-03		No
92	Diethyl Phthalate			0	0					0	0						2.86E+04	5.73E+03		No
93	Dimethyl Phthalate			0	8					0	2.6						7.26E+05	1.45E+05		No
94	2,4-Dinitrotoluene	YES		0	0					0	0						4.70E+00	9.40E-01		No
95	1,2-Diphenylhydrazine			0	0					0	0									
96	Endosulfan (alpha)	YES		0	0					0	0						1.31E			

Facility Name: J. Earl Ham WWTP - Outfall 0013

NPDES No.: AL0020001

8/19/2017

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$										Enter Max	Enter Avg	Partition
ID	Pollutant	Carcinogen Year*	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	Background as reported by Applicant (C _d) Daily Max	Background as reported by Applicant (C _d) Monthly Ave	(C _d) Max	(C _d) Ave	Coefficient (Stream / Lair)
1	Antimony		Metals	0	0	0.000	0.000	0.55	0.18	-	-	-
2	Arsenic**	YES	Metals	0	0	0.000	0.000	0.574	0.18	-	-	-
3	Beryllium		Metals	0	0	0	0	0.21	0.07	-	-	-
4	Cadmium**		Metals	0	0	0	0	0	0	0.236	0.210	-
5	Chromium / Chromium III**		Metals	0	0	4.314	1.092	0	0	-	-	-
6	Chromium / Chromium VI**		Metals	0	0	0.000	0.000	0	0	-	-	-
7	Copper**		Metals	0	0	20.63	5.438	30	15.78	0.388	0.206	-
8	Lead**		Metals	0	0	0	0	0.3	0.1	0.302	0.505	-
9	Mercury**		Metals	0	0	0	0	0.00287	0.00201	-	-	-
10	Nickel**		Metals	0	0	1.0013	0.2787	2.6	1.7	-	-	-
11	Selenium		Metals	0	0	0	0	0.9	0.3	-	-	-
12	Silver		Metals	0	0	0	0	0.32	0.1	-	-	-
13	Thallium		Metals	0	0	0	0	0	0	-	-	-
14	Zinc**		Metals	0	0	11.389	3.358	18.8	16	0.330	-	-
15	Cyanide		Metals	0	0	0	0	0	0	-	-	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0	-	-	-
17	Hardness (As CaCO3)		Metals	0	0	20000	20000	171000	143000	-	-	-
18	Acrolein		VOC	0	0	0	0	0	0	-	-	-
19	Azobenzene	YES	VOC	0	0	0	0	0	0	-	-	-
20	Aldrin	YES	VOC	0	0	0	0	0	0	-	-	-
21	Benzene*	YES	VOC	0	0	0	0	0	0	-	-	-
22	Bromoform*	YES	VOC	0	0	0	0	0	0	-	-	-
23	Carbon Tetrachloride*	YES	VOC	0	0	0	0	0	0	-	-	-
24	Chlordane	YES	VOC	0	0	0	0	0	0	-	-	-
25	Chlorobenzene	YES	VOC	0	0	0	0	0	0	-	-	-
26	Chlorodibromomethane*	YES	VOC	0	0	0	0	3.29	1.09	-	-	-
27	Chloroethane	YES	VOC	0	0	0	0	0	0	-	-	-
28	2-Chloro-Ethylvinyl Ether	YES	VOC	0	0	0	0	0	0	-	-	-
29	Chloroform*	YES	VOC	0	0	0	0	33.2	15.86	-	-	-
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	Dichlorobromomethane*	YES	VOC	0	0	0	0	8.87	2.95	-	-	-
34	1,1-Dichloroethane	YES	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	YES	VOC	0	0	0	0	0	0	-	-	-
37	1,1-Dichloroethylene*	YES	VOC	0	0	0	0	0	0	-	-	-
38	1,2-Dichlorobenzene	YES	VOC	0	0	0	0	0	0	-	-	-
39	1,3-Dichlorobenzene	YES	VOC	0	0	0	0	0	0	-	-	-
40	Dieldrin	YES	VOC	0	0	0	0	0	0	-	-	-
41	Ethylbenzene	YES	VOC	0	0	0	0	0	0	-	-	-
42	Methyl Bromide	YES	VOC	0	0	0	0	0	0	-	-	-
43	Methyl Chloride	YES	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	YES	VOC	0	0	0	0	0	0	-	-	-
48	Triphenylene	YES	VOC	0	0	0	0	0	0	-	-	-
49	Triphenylene (TBT)	YES	VOC	0	0	0	0	0	0	-	-	-
50	1,1,1-Trichloroethane	YES	VOC	0	0	0	0	0	0	-	-	-
51	1,1,1-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	YES	Acids	0	0	0	0	0	0	-	-	-
55	2-Chlorophenol	YES	Acids	0	0	0	0	0	0	-	-	-
56	2,4-Dichlorophenol	YES	Acids	0	0	0	0	0	0	-	-	-
57	2,4-Dinitrophenol	YES	Acids	0	0	0	0	0	0	-	-	-
58	4,6-Dinitro-Cresol	YES	Acids	0	0	0	0	0	0	-	-	-
59	2,4-Dinitrophenol	YES	Acids	0	0	0	0	0	0	-	-	-
60	4,6-Dinitro-2-methylphenol	YES	Acids	0	0	0	0	0	0	-	-	-
61	Dioxin (2,3,7,8-TCDD)	YES	Acids	0	0	0	0	0	0	-	-	-
62	2-Nitrophenol	YES	Acids	0	0	0	0	0	0	-	-	-
63	4-Nitrophenol	YES	Acids	0	0	0	0	0	0	-	-	-
64	2-Nitrophenol*	YES	Acids	0	0	0	0	0	0	-	-	-
65	Phenol	YES	Acids	0	0	0	0	0	0	-	-	-
66	2,4,6-Trichlorophenol*	YES	Acids	0	0	0	0	0	0	-	-	-
67	Acenaphthene	YES	Bases	0	0	0	0	0	0	-	-	-
68	Acenaphthylene	YES	Bases	0	0	0	0	0	0	-	-	-
69	Anthracene	YES	Bases	0	0	0	0	0	0	-	-	-
70	Benzo(a)Anthracene*	YES	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	YES	Bases	0	0	0	0	0	0	-	-	-
74	Benzo(ghi)Perylene	YES	Bases	0	0	0	0	0	0	-	-	-
75	Benzo(k)Fluoranthene	YES	Bases	0	0	0	0	0	0	-	-	-
76	Bis (2-Chloroethoxy) Methane	YES	Bases	0	0	0	0	0	0	-	-	-
77	Bis (2-Chloroethoxy) Ether*	YES	Bases	0	0	0	0	0	0	-	-	-
78	Bis (2-Chloroethoxy) Ether	YES	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	YES	Bases	0	0	0	0	0	0	-	-	-
81	Butyl Benzyl Phthalate	YES	Bases	0	0	0	0	0	0	-	-	-
82	2-Chloronaphthalene	YES	Bases	0	0	0	0	0	0	-	-	-
83	4-Chloronaphthalene	YES	Bases	0	0	0	0	0	0	-	-	-
84	Chrysene*	YES	Bases	0	0	0	0	0	0	-	-	-
85	Di-N-Butyl Phthalate	YES	Bases	0	0	0	0	0	0	-	-	-
86	Di-N-Octyl Phthalate	YES	Bases	0	0	0	0	0	0	-	-	-
87	Dibenz(a,h)Anthracene*	YES	Bases	0	0	0	0	0	0	-	-	-
88	1,2-Dichlorobenzene	YES	Bases	0	0	0	0	0	0	-	-	-
89	1,3-Dichlorobenzene	YES	Bases	0	0	0	0	0	0	-	-	-
90	1,4-Dichlorobenzene	YES	Bases	0	0	0	0	0	0	-	-	-
91	3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	0	0	-	-	-
92	Diethyl Phthalate	YES	Bases	0	0	0	0	0	0	-	-	-
93	Dimethyl Phthalate	YES	Bases	0	0	0	0	0	0	-	-	-
94	2,4-Dinitrophenol*	YES	Bases	0	0	0	0	0	0	-	-	-
95	2,6-Dinitrophenol	YES	Bases	0	0	0	0	0	0	-	-	-
96	1,2-Dichloroethane	YES	Bases	0	0	0	0	0	0	-	-	-
97	Endosulfan (alpha)	YES	Bases	0	0	0	0	0	0	-	-	-
98	Endosulfan (beta)	YES	Bases	0	0	0	0	0	0	-	-	-
99	Endosulfan sulfate	YES	Bases	0	0	0	0	0	0	-	-	-
100	Endrin	YES	Bases	0	0	0	0	0	0	-	-	-
101	Endrin Aldehyde	YES	Bases	0	0	0	0	0	0	-	-	-
102	Fluoranthene	YES	Bases	0	0	0	0	0	0	-	-	-
103	Fluorene	YES	Bases	0	0	0	0	0	0	-	-	-
104	Heptachlor	YES	Bases	0	0	0	0	0	0	-	-	-
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	-	-	-
106	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	0	-	-	-
107	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	0	-	-	-
108	Hexachlorocyclohexane (alpha)	YES	Bases	0	0	0	0	0	0	-	-	-
109	Hexachlorocyclohexane (beta)	YES	Bases	0	0	0	0	0	0	-	-	-
110	Hexachlorocyclohexane (gamma)	YES	Bases	0	0	0	0	0	0	-	-	-
111	Hexachlorocyclopentadiene	YES	Bases	0	0	0	0	0	0	-	-	-
112	Hexachloroethane	YES	Bases	0	0	0	0	0	0	-	-	-
113	Indeno(1,2,3-cd)Pyrene*	YES	Bases	0	0	0	0	0	0	-	-	-
114	Isophorone	YES	Bases	0	0	0	0	0	0	-	-	-
115	Naphthalene	YES	Bases	0	0	0	0	0	0	-	-	-
116	Nitrobenzene	YES	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	YES	Bases	0	0	0	0	0	0	-	-	-
128	Pyrene	YES	Bases	0	0	0	0	0	0	-	-	-
129	1,2,3-Trichlorobenzene	YES	Bases	0	0	0	0	0	0	-	-	-

4.8	Enter C _d = wastewater discharge flow from facility (MGD)
7.4266992	Q _d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q _{d2} = background stream flow in MGD above point of discharge
0	Q _{d2} = background stream flow from upstream source (cfs)
4.641	Enter TQ10, Q _s = background stream flow in cfs above point of discharge
3.46	Enter or estimated, TQ10, Q _s = background stream flow in cfs above point of discharge (TQ10 estimated at 75% of TQ10)
10.196	Enter Mean Annual Flow, Q _s = background stream flow in cfs above point of discharge
4.544	Enter TQ2, Q _s = background stream flow in cfs above point of discharge (For LWF class streams)
0.0000000	Enter C _s = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
0.0000000	Enter C _d = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there

Freshwater F&W classification					Freshwater Acute (µg/l) Q ₉ = 1Q10					Freshwater Chronic (µg/l) Q ₉ = 7Q10					Human Health Consumption Fish only (µg/l) Carcinogen Q ₉ = Annual Average Non-Carcinogen Q ₉ = 7Q10					
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C _{bg}) Daily Max	Max Daily Discharge as reported by Applicant (C _{max})	Water Quality Criteria (C ₁)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP?	Background from upstream source (C _{bg}) Monthly Ave	Avg Daily Discharge as reported by Applicant (C _{avg})	Water Quality Criteria (C ₁)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C ₁)	Draft Permit Limit (C _{max})	20% of Draft Permit Limit	RP?	
1	Antimony			0	0.55					0	0.18						3.03E-01	6.07E-02	1.21E+02	No
2	Arsenic	YES	YES	0	0	155.000	868.618	173.723	No	0	0	155.000	424.098	84.819	No		4.48E-01	-8.96E-02		Yes
3	Beryllium			0	0.21					0	0.07									
4	Cadmium			0	0	15.000	25.189	5.034	No	0	0	15.000	2.788	0.558	No					
5	Chromium/ Chromium III			0	0	1170.858	7170.858	1434.172	No	0	0	1170.858	1031.729	206.346	No					
6	Chromium/ Chromium VI			0	0	16.000	23.052	4.610	No	0	0	11.000	17.737	3.547	No					
7	Copper	YES		0	36	68.120	80.377	16.075	Yes	0	15.78	42.625	87.114	13.423	Yes					
8	Lead			0	0.3	155.000	896.328	169.268	No	0	0.1	155.000	42.958	8.592	No					
9	Mercury			0	0.00287	2.400	3.525	0.705	No	0	0.00201	0.012	0.019	0.004	No	4.24E-02	6.89E-02	1.38E-02	No	
10	Nickel			0	2.8	1701.833	2488.686	499.737	No	0	1.7	189.021	308.970	61.394	No	9.93E+02	1.81E+03	3.23E+02	No	
11	Selenium			0	0.9	15.000	29.372	5.874	No	0	0.3	15.000	8.125	1.625	No		3.95E+03	7.90E+02	No	
12	Silver			0	0.52	11.057	16.238	3.248	No	0	0.1									
13	Thallium			0	0					0	0									
14	Zinc			0	16.8	652.364	952.668	190.534	No	0	16	657.701	1066.700	213.340	No	1.49E+04	2.42E+04	4.84E+03	No	
15	Cyanide			0	0	171000	32.309	6.462	No	0	0	171000	8.450	1.690	No	1.52E+04	3.03E+03			
16	Total Phenolic Compounds			0	0					0	0									
17	Hardness (As CaCO3)			0	171000					143000										
18	Acrolein			0	0					0						8.82E+00	1.78E+00		No	
19	Acrylonitrile	YES		0	0					0						3.42E-01	6.84E-02		No	
20	Aldrin	YES		0	0	155.000	4.406	0.881	No	0	0					6.97E-05	1.39E-05		No	
21	Benzene	YES		0	0					0						3.67E-01	7.34E-02		No	
22	Bromoform	YES		0	0					0						1.87E+02	3.74E+01		No	
23	Carbon Tetrachloride	YES		0	0					0						2.27E+00	4.54E-01		No	
24	Chlordane	YES		0	0	155.000	3.525	0.705	No	0	0	155.000	0.007	0.001	No	1.12E-03	2.24E-04		No	
25	Chlorobenzene			0	0					0						1.47E+03	2.94E+02		No	
26	Chlorodibromo-Methane	YES		0	3.29					1.09						1.78E+01	3.52E+00		No	
27	Chloroethane			0	0					0										
28	2-Chloro-Ethylvinyl Ether			0	0					0										
29	Chloroform	YES		0	33.2					15.86						2.42E+02	4.84E+01		No	
30	4,4'- DDD	YES		0	0					0						4.30E-04	8.61E-05		No	
31	4,4'- DDE	YES		0	0					0						3.04E-04	6.08E-05		No	
32	4,4'- DDT	YES		0	0	1.100	1.615	0.323	No	0	0	0.001	0.002	0.000	No	3.04E-04	6.08E-05		No	
33	Dichlorobromo-Methane	YES		0	8.87					2.85						2.38E+01	4.76E+00		No	
34	1,1-Dichloroethane			0	0					0										
35	1,2-Dichloroethane	YES		0	0					0						5.07E+01	1.01E+01		No	
36	Trans-1,2-Dichloro-Ethylene			0	0					0						9.80E+03	1.92E+03		No	
37	1,1-Dichloroethylene	YES		0	0					0						9.89E+03	1.98E+03		No	
38	1,2-Dichloropropane			0	0					0						1.38E+01	2.76E+00		No	
39	1,3-Dichloro-Propylene			0	0					0						2.00E+01	3.99E+00		No	
40	Dieldrin	YES		0	0	155.000	0.352	0.070	No	0	0	155.000	0.091	0.018	No	1.41E+03	2.82E+02		No	
41	Ethylbenzene			0	0					0						2.02E+03	4.04E+02		No	
42	Methyl Bromide			0	0					0						1.42E+03	2.83E+02		No	
43	Methyl Chloride			0	0					0										
44	Methylene Chloride	YES		0	0					0						8.20E+02	1.64E+02		No	
45	1,1,2,2-Tetrachloro-Ethane	YES		0	0					0						5.54E+00	1.11E+00		No	
46	Tetrachloro-Ethylene	YES		0	0					0						4.50E+00	9.10E-01		No	
47	Toluene			0	0					0						1.42E+04	2.83E+03		No	
48	Tosaphene	YES		0	0	155.000	1.072	0.214	No	0	0	155.000	0.000	0.000	No	3.84E-04	7.68E-05		No	
49	Tributyltin (TBT)	YES		0	0	155.000	0.878	0.135	No	0	0	155.000	0.117	0.023	No					
50	1,1,1,1-Tetrachloroethane			0	0					0										
51	1,1,2-Trichloroethane	YES		0	0					0						2.16E+01	4.32E+00		No	
52	Trichloroethylene	YES		0	0					0						4.19E+01	8.29E+00		No	
53	Vinyl Chloride	YES		0	0					0						3.38E+00	6.78E-01		No	
54	p-Chloro-m-Cresol			0	0					0										
55	2-Chlorophenol			0	0					0						1.41E+02	2.83E+01		No	
56	2,4-Dichlorophenol			0	0					0						2.79E+02	5.59E+01		No	
57	2,4-Dimethylphenol			0	0					0						8.05E+02	1.62E+02		No	
58	4,6-Dinitro-O-Cresol			0	0					0										
59	2,4-Dinitrophenol			0	0					0						5.06E+03	1.01E+03		No	
60	4,6-Dinitro-2-methylphenol	YES		0	0					0						3.93E+02	7.85E+01		No	
61	Dioxin (2,3,7,8-TCDD)	YES		0	0					0						8.33E-05	1.27E-08		No	
62	2-Nitrophenol			0	0					0										
63	4-Nitrophenol			0	0					0										
64	Pentachlorophenol	YES		0	0	155.000	12.811	2.562	No	0	0	155.000	10.875	2.175	No	4.19E+03	8.29E+01		No	
65	Phenol			0	0					0						9.12E+03	1.82E+05		No	
66	2,4,6-Trichlorophenol	YES		0	0					0						3.38E+00	6.71E-01		No	
67	Acenaphthene			0	0					0						9.40E+02	1.88E+02		No	
68	Acenaphthylene			0	0					0										
69	Anthracene			0	0					0						3.79E+04	7.58E+03		No	
70	Benzidine			0	0					0						1.88E-04	3.77E-05		No	
71	Benzo(A)Anthracene	YES		0	0					0						2.53E-02	5.06E-03		No	
72	Benzo(A)Pyrene	YES		0	0					0						2.53E-02	5.06E-03		No	
73	Benzo(b)fluoranthene			0	0					0						1.73E-02	3.46E-03		No	
74	Benzo(GH)Perylene			0	0					0										
75	Benzo(k)Fluoranthene			0	0					0						1.73E-02	3.46E-03		No	
76	Bis (2-Chloroethoxy) Methane			0	0															

$Q_d * C_d + Q_{d2} * C_{d2} + Q_s * C_s = Q_r * C_r$										Enter Max Daily Discharge as reported by Applicant (C _d) Max	Enter Avg Daily Discharge as reported by Applicant (C _d) Avg	Partition Coefficient (Stream / Lake)
ID	Pollutant	Candrogen Type*	Type	Background from upstream source (C _{d2}) Daily Max	Background from upstream source (C _{d2}) Monthly Avg	Background from Instream (C _d) Daily Max	Background from Instream (C _d) Monthly Avg	Background from Instream (C _d) Daily Max	Background from Instream (C _d) Monthly Avg	Enter Max Daily Discharge as reported by Applicant (C _d) Max	Enter Avg Daily Discharge as reported by Applicant (C _d) Avg	Partition Coefficient (Stream / Lake)
1	Antimony		Metals	0	0	0.288	0.328	0.55	0.18	-	-	-
2	Arsenic**	YES	Metals	0	0	2.72	2.86	0	0	0.574	0.574	-
3	Beryllium		Metals	0	0	0	0	0.21	0.07	-	-	-
4	Cadmium		Metals	0	0	0	0	0	0	0.236	0.236	-
5	Chromium / Chromium III**		Metals	0	0	1.814	1.836	0	0	0.210	0.210	-
6	Chromium / Chromium VI**		Metals	0	0	2.36	2.32	0	0	-	-	-
7	Copper**		Metals	0	0	25.82	1.49	38	15.78	0.389	0.389	-
8	Lead**		Metals	0	0	0	0	0.3	0.1	0.206	0.206	-
9	Mercury**		Metals	0	0	0	0	0.00287	0.00201	0.302	0.302	-
10	Nickel**		Metals	0	0	1.2488	0.2787	2.6	1.7	0.505	0.505	-
11	Selenium		Metals	0	0	0	0	0.9	0.3	-	-	-
12	Silver		Metals	0	0	0	0	0.32	0.1	-	-	-
13	Thallium		Metals	0	0	0	0	0	0	-	-	-
14	Zinc**		Metals	0	0	11.46	2.28	18.8	16	0.330	0.330	-
15	Cyanide		Metals	0	0	0	0	0	0	-	-	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0	0	-	-	-
17	Hardness (As CaCO3)		Metals	0	0	20000	20000	171000	143000	-	-	-
18	Acrolein		VOC	0	0	0	0	0	0	-	-	-
19	Acrylonitrile*	YES	VOC	0	0	0	0	0	0	-	-	-
20	Alkyls	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	Chloroform	YES	VOC	0	0	0	0	0	0	-	-	-
25	Chlorobenzene		VOC	0	0	0	0	0	0	-	-	-
26	Chlorodibromomethane*	YES	VOC	0	0	0	0	3.29	1.09	-	-	-
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	33.2	15.86	-	-	-
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	Dibromobenzene-Methane*	YES	VOC	0	0	0	0	6.87	2.95	-	-	-
34	1,1-Dichloroethane	YES	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	Tributyltin (TBT)	YES	VOC	0	0	0	0	0	0	-	-	-
50	1,1,1-Trichloroethane		VOC	0	0	0	0	0	0	-	-	-
51	1,1,2-Trichloroethane*	YES	VOC	0	0	0	0	0	0	-	-	-
52	Trichloroethylene*	YES	VOC	0	0	0	0	0	0	-	-	-
53	Vinyl Chloride*	YES	VOC	0	0	0	0	0	0	-	-	-
54	p-Chloro-m-Cresol		Acids	0	0	0	0	0	0	-	-	-
55	2-Chlorophenol		Acids	0	0	0	0	0	0	-	-	-
56	2,4-Dichlorophenol		Acids	0	0	0	0	0	0	-	-	-
57	2,4-Dimethylphenol		Acids	0	0	0	0	0	0	-	-	-
58	4,6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	-	-	-
59	2,4-Dinitrophenol		Acids	0	0	0	0	0	0	-	-	-
60	4,6-Dinitro-2-methylphenol		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	Acanaphthene		Bases	0	0	0	0	0	0	-	-	-
68	Acanaphthylene		Bases	0	0	0	0	0	0	-	-	-
69	Anthracene		Bases	0	0	0	0	0	0	-	-	-
70	Benzidine		Bases	0	0	0	0	0	0	-	-	-
71	Benzo(A)Anthracene*	YES	Bases	0	0	0	0	0	0	-	-	-
72	Benzo(A)Pyrene*	YES	Bases	0	0	0	0	0	0	-	-	-
73	3,4-Benzo-Fluoranthene		Bases	0	0	0	0	0	0	-	-	-
74	Benzo(GH)Perylene		Bases	0	0	0	0	0	0	-	-	-
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	0	-	-	-
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0	-	-	-
77	Bis (2-Chloroethyl)-Ether*	YES	Bases	0	0	0	0	0	0	-	-	-
78	Bis (2-Chloro-Propyl) Ether		Bases	0	0	0	0	0	0	-	-	-
79	Bis (2-Ethylhexyl) Phthalate*	YES	Bases	0	0	0	0	0	0	-	-	-
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-	-	-
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0	-	-	-
82	2-Chloronaphthalene		Bases	0	0	0	0	0	0	-	-	-
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-	-	-
84	Chrysene*	YES	Bases	0	0	0	0	0	0	-	-	-
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0	-	-	-
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0	-	-	-
87	Dibenz(A,H)Anthracene*	YES	Bases	0	0	0	0	0	0	-	-	-
88	1,2-Dichlorobenzene		Bases	0	0	0	0	0	0	-	-	-
89	1,3-Dichlorobenzene		Bases	0	0	0	0	0	0	-	-	-
90	1,4-Dichlorobenzene		Bases	0	0	0	0	0	0	-	-	-
91	3,3-Dichlorobenzidine*	YES	Bases	0	0	0	0	0	0	-	-	-
92	Diethyl Phthalate		Bases	0	0	0	0	0	0	-	-	-
93	Dimethyl Phthalate		Bases	0	0	0	0	0	0	-	-	-
94	2,4-Dinitrotoluene*	YES	Bases	0	0	0	0	0	0	-	-	-
95	2,6-Dinitrotoluene		Bases	0	0	0	0	0	0	-	-	-
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0	-	-	-
97	Endosulfan (alpha)	YES	Bases	0	0	0	0	0	0	-	-	-
98	Endosulfan (beta)	YES	Bases	0	0	0	0	0	0	-	-	-
99	Endosulfan sulfate	YES	Bases	0	0	0	0	0	0	-	-	-
100	Endrin	YES	Bases	0	0	0	0	0	0	-	-	-
101	Endrin Aldehyde	YES	Bases	0	0	0	0	0	0	-	-	-
102	Fluoranthene		Bases	0	0	0	0	0	0	-	-	-
103	Fluorene		Bases	0	0	0	0	0	0	-	-	-
104	Heptachlor	YES	Bases	0	0	0	0	0	0	-	-	-
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	-	-	-
106	Hexachlorobenzene*	YES	Bases	0	0	0	0	0	0	-	-	-
107	Hexachlorobutadiene*	YES	Bases	0	0	0	0	0	0	-	-	-
108	Hexachlorocyclohexan (alpha)	YES	Bases	0	0	0	0	0	0	-	-	-
109	Hexachlorocyclohexan (beta)	YES	Bases	0	0	0	0	0	0	-	-	-
110	Hexachlorocyclohexan (gamma)	YES	Bases	0	0	0	0	0	0	-	-	-
111	Hexachlorocyclopentadiene		Bases	0	0	0	0	0	0	-	-	-
112	Hexachloroethane		Bases	0	0	0	0	0	0	-	-	-
113	Indeno(1,2,3-CD)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	1,2,3-Trichlorobenzene		Bases	0	0	0	0	0	0	-	-	-

4.8	Enter Q _d = wastewater discharge flow from facility (MGD)
7.4266992	Q _d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Q _{d2} = background stream flow in MGD above point of discharge
0	Q _{d2} = background stream flow from upstream source (cfs)
9.282	Enter 7Q10, Q _s = background stream flow in cfs above point of discharge
6.9615	Enter or estimated, 1Q10, Q _s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
10.198	Enter Mean Annual Flow, Q _s = background stream flow in cfs above point of discharge
4.544	Enter 7Q2, Q _s = background stream flow in cfs above point of discharge (For LWF class streams)
0.0000	Enter C _s = background in-stream pollutant concentration in

Facility Name: J. Earl Ham WWTP - Outfall 0014																				
NPDES No.: AL0020001																				
Freshwater P&W classification:										Human Health Consumption Fish only (µg/l)										
Freshwater Acute (µg/l) C _a = 1Q10										Freshwater Chronic (µg/l) C _a = 7Q10										
Carcinogen C _a = Annual Average										Non-Carcinogen C _a = 7Q10										
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (C _u) Daily Max	Max Daily Discharge as reported by Applicant (C _u)	Water Quality Criteria (C _a)	Draft Permit Limit (C _u)	20% of Draft Permit Limit	RP?	Background from upstream source (C _u) Monthly Ave	Avg Daily Discharge as reported by Applicant (C _u)	Water Quality Criteria (C _a)	Draft Permit Limit (C _u)	20% of Draft Permit Limit	RP?	Water Quality Criteria (C _a)	Draft Permit Limit (C _u)	20% of Draft Permit Limit	RP?	
1	Antimony			0	0.55	-	-	-	No	0	0.18	-	-	-	No	8.40E+02	1.68E+02	-		
2	Arsenic	YES	YES	0	0	-	1145.016	229.003	No	0	0	-	506.868	117.374	No	3.03E-01	4.48E-01	8.96E-02	Yes	
3	Beryllium			0	0.21	-	-	-	No	0	0.07	-	-	-	No	-	-	-	-	
4	Cadmium			0	0	-	33.204	6.641	No	0	0	-	3.860	0.772	No	-	-	-	-	
5	Chromium/ Chromium III			0	0	-	9458.400	1891.682	No	0	0	-	1428.113	285.623	No	-	-	-	-	
6	Chromium/ Chromium VI			0	0	-	18.000	3.600	No	0	0	-	11.000	2.473	4.895	No	-	-	-	-
7	Copper	YES	YES	0	36	-	112.644	22.529	Yes	0	15.78	-	42.625	8.504	18.321	No	-	-	-	-
8	Lead			0	0.3	-	1314.354	262.873	No	0	0.1	-	59.479	11.698	-	No	-	-	-	-
9	Mercury			0	0.00287	-	2.400	0.480	No	0	0.00201	-	0.012	0.002	0.005	No	4.24E-02	9.54E-02	1.91E-02	No
10	Nickel			0	2.6	-	1701.833	329.881	059.176	No	0	1.7	180.021	424.918	84.984	No	9.93E+02	2.23E+03	4.47E+02	No
11	Selenium			0	0.9	-	36.747	7.349	No	0	0.3	-	11.248	2.250	-	No	5.47E+03	1.09E+03	-	No
12	Silver			0	0.32	-	11.057	2.212	4.284	No	0	0.1	-	-	-	No	-	-	-	-
13	Thallium			0	0	-	-	-	No	0	0	-	-	-	-	No	-	-	-	-
14	Zinc			0	18.8	-	652.384	123.100	250.020	No	0	16	657.701	1475.889	295.140	No	1.48E+04	3.35E+04	6.70E+03	No
15	Cyanide			0	0	-	25.000	5.000	8.524	No	0	0	11.698	2.340	-	No	2.10E+04	4.20E+03	-	No
16	Total Phenolic Compounds			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
17	Hardness (As CaCO3)			0	171000	-	-	-	-	0	143000	-	-	-	-	No	-	-	-	-
18	Acrolein			0	0	-	-	-	-	0	0	-	-	-	-	No	1.22E+01	2.44E+00	-	No
19	Acrylonitrile	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	3.42E-01	6.84E-02	-	No
20	Aldrin	YES	YES	0	0	-	5.812	1.162	-	0	0	-	-	-	-	No	6.97E-05	1.39E-05	-	No
21	Benztene	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	3.87E+01	7.34E+00	-	No
22	Bromoforn	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	1.87E+02	3.74E+01	-	No
23	Carbon Tetrachloride	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	2.27E+03	4.54E+01	-	No
24	Chlordane	YES	YES	0	0	-	4.850	0.930	-	0	0	-	0.010	0.002	No	1.12E+03	2.24E+04	-	No	
25	Chlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	No	2.04E+03	4.08E+02	-	No
26	Chlorodibromo-Methane	YES	YES	0	3.29	-	-	-	-	0	1.09	-	-	-	-	No	1.78E+01	3.52E+00	-	No
27	Chloroethane			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
28	2-Chloro-Ethylvinyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
29	Chloroform	YES	YES	0	33.2	-	-	-	-	0	15.86	-	-	-	-	No	2.42E+02	4.84E+01	-	No
30	4,4'-DDD	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	4.30E-04	8.61E-05	-	No
31	4,4'-DDE	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	3.04E-04	6.08E-05	-	No
32	4,4'-DDT	YES	YES	0	0	-	1.100	2.131	0.428	No	0	0.001	0.002	0.000	-	No	3.04E-04	6.08E-05	-	No
33	Dichlorobromo-Methane	YES	YES	0	8.87	-	-	-	-	0	2.95	-	-	-	-	No	2.38E+01	4.76E+00	-	No
34	1,1-Dichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
35	1,2-Dichloroethane	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	5.07E+01	1.01E+01	-	No
36	Trans-1,2-Dichloro-Ethylene			0	0	-	-	-	-	0	0	-	-	-	-	No	1.33E+04	2.66E+03	-	No
37	1,1-Dichloroethylene	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	9.88E+03	1.98E+03	-	No
38	1,2-Dichloropropane			0	0	-	-	-	-	0	0	-	-	-	-	No	1.91E+01	3.82E+00	-	No
39	1,3-Dichloro-Propylene			0	0	-	-	-	-	0	0	-	-	-	-	No	2.78E+01	5.53E+00	-	No
40	Dieldrin	YES	YES	0	0	-	0.465	0.093	-	0	0	-	0.126	0.025	No	7.41E+05	1.48E+05	-	No	
41	Ethylbenzene			0	0	-	-	-	-	0	0	-	-	-	-	No	2.60E+03	5.00E+02	-	No
42	Methyl Bromide			0	0	-	-	-	-	0	0	-	-	-	-	No	1.98E+03	3.92E+02	-	No
43	Methyl Chloride			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
44	Methylene Chloride	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	8.20E+02	1.64E+02	-	No
45	1,1,1,2-Tetrachloro-Ethane	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	5.54E+00	1.11E+00	-	No
46	Tetrachloro-Ethylene	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	4.55E+00	9.10E-01	-	No
47	Toluene			0	0	-	-	-	-	0	0	-	-	-	-	No	1.98E+04	3.92E+03	-	No
48	Tosaphene	YES	YES	0	0	-	1.414	0.283	-	0	0	-	0.000	0.000	No	3.84E-04	7.68E-05	-	No	
49	Tributyltin (TBT)	YES	YES	0	0	-	0.891	0.178	-	0	0	-	0.162	0.032	No	-	-	-	-	
50	1,1,1-Trichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
51	1,1,2-Trichloroethane	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	2.16E+01	4.32E+00	-	No
52	Trichloroethylene	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	4.15E+01	8.29E+00	-	No
53	Vinyl Chloride	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	3.38E+00	6.76E-01	-	No
54	p-Chloro-m-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
55	2-Chlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	No	1.98E+02	3.92E+01	-	No
56	2,4-Dichlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	No	3.87E+02	7.74E+01	-	No
57	2,4-Dimethylphenol			0	0	-	-	-	-	0	0	-	-	-	-	No	1.12E+03	2.24E+02	-	No
58	4,6-Dinitro-o-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
59	2,4-Dinitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	No	7.00E+03	1.40E+03	-	No
60	4,6-Dinitro-2-methylphenol	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	3.93E+02	7.85E+01	-	No
61	Dioxin (2,3,7,8-TCDD)	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	6.33E-05	1.27E-05	-	No
62	2-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
63	4-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
64	Pentachlorophenol	YES	YES	0	0	-	16.900	3.380	-	0	0	-	15.057	3.011	No	4.19E+00	8.39E-01	-	No	
65	Phenol			0	0	-	-	-	-	0	0	-	-	-	-	No	1.12E+05	2.25E+05	-	No
66	2,4,6-Trichlorophenol	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	3.38E+00	6.71E-01	-	No
67	Acenaphthene			0	0	-	-	-	-	0	0	-	-	-	-	No	1.30E+03	2.60E+02	-	No
68	Acenaphthylene			0	0	-	-	-	-	0	0	-	-	-	-	No	-	-	-	-
69	Anthracene			0	0	-	-	-	-	0	0	-	-	-	-	No	5.25E+04	1.05E+04	-	No
70	Benzidine			0	0	-	-	-	-	0	0	-	-	-	-	No	2.61E-04	5.22E-05	-	No
71	Benzo(A)Anthracene	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	2.53E-02	5.08E-03	-	No
72	Benzo(A)Pyrene	YES	YES	0	0	-	-	-	-	0	0	-	-	-	-	No	2.53E-02	5.08E-03	-	No
73	Benzo(B)Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	No	2.40E-02	4.79E-03	-	No
74	Benzo(GH)Fluoranthene			0	0	-	-	-												

Permit Number: AL0020001

Monitoring Point: 001

Stage: Effluent Gross Value

Parameter Name: Total Recoverable Copper

Parameter Code: 01119

Monitoring Period	Monthly Average	Daily Maximum	Conc. Unit
June 2019	14	14.00	µg/L
July 2019	19.1	19.10	µg/L
August 2019	16.2	16.20	µg/L
September 2019	17.2	17.20	µg/L
October 2019	16.1	16.10	µg/L
November 2019	20.5	20.50	µg/L
December 2019	18	18.00	µg/L
January 2020	6.3	6.30	µg/L
February 2020	23.4	23.40	µg/L
March 2020	16.6	16.60	µg/L
April 2020	24.2	24.20	µg/L
May 2020	17.2	17.20	µg/L
June 2020	8.1	8.10	µg/L
July 2020	33.2	33.20	µg/L
August 2020	31.8	31.80	µg/L
September 2020	20.6	20.60	µg/L
October 2020	34.9	34.90	µg/L
November 2020	27.5	27.50	µg/L
December 2020	20.4	20.40	µg/L
January 2021	25.8	25.80	µg/L
February 2021	18.9	18.90	µg/L
March 2021	32.6	32.60	µg/L
April 2021	11.9	11.90	µg/L
May 2021	38	38.00	µg/L
June 2021	28	28.00	µg/L
July 2021	13.2	13.20	µg/L
August 2021	13.8	13.80	µg/L
September 2021	13.2	13.20	µg/L
October 2021	20.2	20.20	µg/L
November 2021	20.5	20.50	µg/L
December 2021	12.9	12.90	µg/L
January 2022	6	6.00	µg/L
February 2022	8.1	8.10	µg/L
March 2022	7.5	7.50	µg/L
April 2022	11.9	11.90	µg/L
May 2022	12.7	12.70	µg/L
June 2022	11.7	11.70	µg/L
July 2022	11.7	11.70	µg/L
August 2022	9.9	9.90	µg/L
September 2022	8.2	8.20	µg/L
October 2022	13.3	13.30	µg/L
November 2022	11.2	11.20	µg/L
December 2022	9.1	9.10	µg/L
January 2023	17.6	17.60	µg/L
February 2023	9.2	9.20	µg/L
March 2023	11.3	11.30	µg/L
April 2023	20.4	20.40	µg/L
May 2023	15.2	15.20	µg/L
June 2023	13.2	13.20	µg/L
July 2023	10.4	10.40	µg/L
August 2023	15	15.00	µg/L
September 2023	11.6	11.60	µg/L

October 2023	13.3	13.30	µg/L
November 2023	13.1	13.10	µg/L
December 2023	11.3	11.30	µg/L
January 2024	13.6	13.60	µg/L
February 2024	10.2	10.20	µg/L
March 2024	12.9	12.90	µg/L
April 2024	15.4	15.40	µg/L
May 2024	15.3	15.30	µg/L
June 2024	14.2	14.20	µg/L
July 2024	10	10.00	µg/L
August 2024	8.2	8.20	µg/L
September 2024	15.4	15.40	µg/L
October 2024	10.3	10.30	µg/L
November 2024	14	14.00	µg/L
Application	10.7	13.90	µg/L
Application	10.7	13.90	µg/L
Application	10.7	13.90	µg/L

<i>Average</i>	15.78		µg/L
<i>Maximum</i>		38.00	µg/L

Waste Load Allocation Summary

Page 1

REQUEST INFORMATION

Request Number: 3981

From:	Shanda Torbert	In Branch/Section	Municipal
Date Submitted	11/16/2023	Date Required	12/16/2023
FUND Code	605		
Date Permit application received by NPDES program 11/15/2023			
Receiving Waterbody	Shirtee Creek		
Previous Stream Name			
Facility Name	J Earl Ham WWTP	(Name of Discharger-WQ will use to file)	
Previous Discharger Name			
River Basin	Coosa	Outfall Latitude	33.197178 (decimal degrees)
*County	Talladega	Outfall Longitude	-86.271999 (decimal degrees)
Permit Number	AL0020001	Permit Type	Permit Reissuance
Permit Status		Active	
Type of Discharger		MUNICIPAL	
Do other discharges exist that may impact the model?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

If yes, impacting dischargers names.

Fairmont WWTP

Impacting dischargers permit numbers.

AL0020010

Existing Discharge Design Flow

4.8

MGD

Proposed Discharge Design Flow

4.8

MGD

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

Comments included

☒ Yes ☐ No

Information Verified By

HAW

Year File Was Created

Response ID Number 1988

Lat/Long Method

GPS

12 Digit HUC Code 031501070104

Use Classification F&W

Site Visit Completed? ☒ Yes ☐ NoWaterbody Impaired? ☒ Yes ☐ NoAntidegradation ☐ Yes ☒ No

Waterbody Tier Level Tier I

Use Support Category 5

Date of Site Visit 11/29/2023

Date of WLA Response 3/5/2024

Approved TMDL?

☒ Yes ☐ No

Approval Date of TMDL 8/31/2023

Waste Load Allocation Information

Modeled Reach Length 11.601

Miles

Date of Allocation 3/5/2024

Name of Model Used SWQM

Allocation Type 2 Seasons

Model Completed by HAW

Type of Model Used Calibrated / Verified

Allocation Developed by Water Quality Branch

Waste Load Allocation Summary

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Annual Effluent Limits	Conventional Parameters				Other Parameters			
	Qw	4.8	MGD	Qw	4.8	MGD	Qw	MGD
	Season	Summer		Season	Winter		Season	
	From	May		From	Dec		From	
	Through	Nov		Through	Apr		Through	
CBOD5				CBOD5	13	mg/L	TP	
NH3-N				NH3-N	2.4	mg/L	TN	
TKN				TKN	7.5	mg/L	TSS	
D.O.				D.O.	6	mg/L		

"Monitor Only" Parameters for Effluent:

Parameter	Frequency	Parameter	Frequency
TP	Monthly		
NO2+NO3-N	Monthly		

Water Quality Characteristics Immediately Upstream of Discharge

Parameter	Summer		Winter	
CBODu	2.16	mg/l	2.625	mg/l
NH3-N	0.141	mg/l	0.17	mg/l
Temperature	30	°C	20	°C
pH	7	su	7	su

Hydrology at Discharge Location

Drainage Area Qualifier
Exact

Drainage Area	17.008	sq mi
Stream 7Q10	0.89	cfs
Stream 1Q10	0.667	cfs
Stream 7Q2	4.544	cfs
Annual Average	10.196	cfs

Method Used to Calculate

ADEM Estimate w/USGS Gage Data
75% of 7Q10
ADEM Estimate w/USGS Gage Data
ADEM Estimate w/USGS Gage Data

Comments and/or Notations

The facility requested a tiered permit for consideration of additional headwater flow from an upstream quarry. The Water Quality Branch has determined the seasonal effluent limits for low-flow conditions (7Q10 and 7Q2) and for headwaters at 3 MGD (4.641 cfs) and 6 MGD (9.282 cfs). The limits above are for 7Q10 and 7Q2 conditions. See memo/WLA report for limits for other flow conditions.

The ammonia-nitrogen limit is toxicity-based for all summer conditions (7Q10 = 0.890 cfs, HW = 4.641 cfs, HW = 9.282 cfs).



Alabama Department of Environmental Management
adem.alabama.gov

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

March 5, 2024

MEMORANDUM

TO: Shanda Torbert
Industrial/Municipal Branch

FROM: Hayden Willis
Water Quality Branch

RE: J. Earl Ham WWTP (AL0020001) – Shirtee Creek WLA

A seasonal wasteload allocation (WLA) was completed for the existing discharge from J. Earl Ham Wastewater Treatment Plant (WWTP) to Shirtee Creek. The facility requested a tiered permit for consideration of additional headwater flow from an upstream quarry. The Department's Spreadsheet Water Quality Model was utilized to determine the seasonal effluent limits for low-flow conditions ($7Q_{10}$ and $7Q_2$) and for headwater flows of 3 MGD (4.641 cfs) and 6 MGD (9.282 cfs). The use classification for Shirtee Creek at the discharge point is Fish and Wildlife (F&W). ADEM Admin Code r. 335-6-10-.09(5)(e)(4.) (i) states the following in regard to the dissolved oxygen (DO) criteria for the F&W use classification: "For a diversified warm water biota, including game fish, daily dissolved oxygen concentrations shall not be less than 5 mg/L at all times." The following seasonal effluent limits are expected to be protective of water quality and maintain instream DO concentrations above 5 mg/L:

J. Earl Ham WWTP ($Q_w = 4.8$ MGD)						
Seasonal Effluent Limits (mg/L)						
	Summer			Winter		
	$7Q_{10}$	4.641 cfs	9.282 cfs	$7Q_2$	4.641 cfs	9.282 cfs
CBOD ₅	13	10	8	9	7	7
NH ₃ -N	2.4*	3.4*	4.7*	4	3.5	3
TKN	7.5	8.5	9	9	5.5	5
Minimum DO	6	6	6	6	6	6

*Ammonia-nitrogen (NH₃-N) limit is toxicity-based.

Shirtee Creek is a Tier 1 waterbody within the Coosa River Basin. Shirtee Creek is currently impaired for pathogens (*E. coli*) and total dissolved solids.

HAW: haw



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

version 1.11

(Submission #: HPZ-5ZZN-HR2PC, version 1)

Digitally signed by:
AEPACS
Date: 2023.11.15 15:18:31 -06:00
Reason: Copy Of Record
Location: State of Alabama

Details

Submission ID HPZ-5ZZN-HR2PC

Form Input

General Instructions

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

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

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

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

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

Applicable Fees:

Permit Transfers and/or Permittee/Facility Name Changes

\$800

Minor Modifications

\$800

Major Modifications (No Effluent Limit Change)

\$3,140 (Major Sources)

\$2,250 (Minor Sources or Public Water Supply Treatment Plants)

Major Modifications (Effluent Limit Change)

\$7,060 (Major Sources)

\$4,290 (Minor Sources or Public Water Supply Treatment Plants)

Reissuances

\$7,060 (Major Sources)

\$4,290 (Minor Sources or Public Water Supply Treatment Plants)

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

Processing Information

Purpose of Application

Reissuance of Permit Due to Approaching Expiration

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

None

Action Type

Reissuance

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

None

Do you have additional contacts associated with this site?

No

Permit Information

Permit Number

AL0020001

Current Permittee Name

Utilities Board of the City of Sylacauga

Permittee

Permittee Name

Utilities Board of the City of Sylacauga

Mailing Address

Post Office Box 207

Sylacauga, AL 35150

Is the Operator the same as the Permittee?

Yes

Has the Operator's scope of responsibility changed?

No

Responsible Official

Prefix

Mr.

First Name Last Name

David Green

Title

Water Quality Supervisor

Organization Name

Utilities Board of the City of Sylacauga

Phone Type Number Extension

Mobile 256-267-0002

Email

dgreen@sylacauga.net

Mailing Address

Post Office Box 207

Sylacauga, AL 35150

Existing Permit Contacts

Affiliation Type	Contact Information	Remove?
Responsible Official, Notification Recipient, Emergency Contact, DMR Contact, Environmental Contact	David Green, Utilities Board of the City of Sylacauga	NONE PROVIDED
Permittee	Utilities Board of the City of Sylacauga	NONE PROVIDED

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

Facility/Site Information

Facility/Site Name

J Earl Ham WWTP

Organization/Ownership Type

Water/Sewer/Utility District or Board

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

Facility/Site Physical Location Address

610 Old Sylacauga Highway
Sylacauga, AL 35150

Facility/Site County

Talladega

Facility/Site Contact

Prefix

Mr.

First Name Last Name

Steven Morris

Title

Plant Manager

Organization Name

Utilities Board of the City of Sylacauga

Phone Type Number Extension

Business 2562453721

Email

smorris@sylacauga.net

Note

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

Detailed Directions to the Facility/Site

Confirmed with Google Earth Pro

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

[Map Instruction Help](#)

Facility/Site Front Gate Latitude and Longitude

33.1909000000000,-86.2724000000001

610 Old Sylacauga Highway, Sylacauga, AL

Primary SIC Code

4952-Sewerage Systems

Primary NAICS Code

221320-Sewage Treatment Facilities

Emergency Contact

Prefix

Mr.

First Name Last Name

David Green

Title

Water Quality Supervisor

Phone Type Number Extension

Business 2564012536

Email

dgreen@sylacauga.net

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

No

Enforcement History

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

Yes

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

Facility/Site Name	Permit Number	Type of Action	Date of Action
J. Earl Ham WWTP	AL0020001	Notice of Violation	05/19/2020

Wastewater Treatment & Discharge Information

Please indicate which type of operations occur at this facility:

Treatment Works Treating Domestic Sewage

What treatment type is used at this facility:

Mechanical (WWTP)

What discharge options are used at this facility:

Surface Water

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

4.8

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

2.77

Does this facility have any current or proposed stormwater outfalls from the treatment facility?

Yes

Process Flow Schematic

[Storm Water Outfalls J. Earl Ham WWTP.pdf - 11/15/2023 11:39 AM](#)

[J. E. Ham Block Diagram.doc - 11/15/2023 12:35 PM](#)

Comment

NONE PROVIDED

Do you share an outfall with another facility?

No

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

this facility:

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

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

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

Schematic Diagram

[Sampling eq.jpg - 11/15/2023 12:46 PM](#)

Comment

NONE PROVIDED

Are any wastewater collection or treatment modifications or expansions planned during the next three years that could alter wastewater volumes or characteristics (Note: Permit Modification may be required)?

No

Treatment Methods (TWTDS)

Treatment Level

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

Secondary Treatment [e.g., suspended growth biological treatment; attached growth and combined biological treatment].

Wastewater Disinfection Technology Information

Chlorination

Dechlorination

Please select all POTW Treatment Categories that apply.

Activated Sludge Process & Modifications

Aeration

Clarification

Dechlorination

Disinfection

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

Activated Sludge, Extended Aeration

Activated Sludge, Complete Mix

Please select all unit operations that apply for Aeration:

Aeration (general)

Please select all unit operations that apply for Clarification:

Clarification, Secondary

Please select all unit operations that apply for Disinfection:

Disinfection, Gaseous Chlorine

Please select all unit operations that apply for Preliminary Treatment:

Aerated Grit Chambers

Screen, Mechanical Bar

Grit Removal

Waste Storage & Disposal Information

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

Yes

Describe the location of all sites used for the storage of solids or liquids that have any potential for accidental

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

Description of Waste	Description of Storage Location	Disposal Location
Treated solids in digester	Located in a 500,000 gallon digester	Off-site

Collection System Information

Collection Systems

Collection System ID	Collection System Name	Owner Type of Collection System	Population of Collection System
0020001	Sylacauga Utilities Board Sewer System	Publicly owned (Owned by State, municipality, or Tribal government. This includes a district association or other public body created by or pursuant to State law and having jurisdiction over the disposal of sewage).	15,600

Industrial Indirect Discharge Contributors

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

Yes

How will you be submitting the list of existing and proposed industrial source wastewater contributions to the municipal wastewater treatment system?

I want to add my data directly on this form.

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

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?
Bluebell creameries	Industrial wastewater resulting from non-contact cooling water, process wastewater, and sanitation wastewater from the manufacturing of ice cream products	Existing	0.140	Yes
Nemak USA, Inc	Process wastewater resulting from die casting operations	Existing	0.025	Yes
Heritage Plastics, INC	Wastewater resulting from the compounding of pelletized plastic and mineral materials	Existing	0.040	Yes
IKO Southeast, INC	Process wastewater resulting from the manufacturing of asphalt materials and blower blowdown	Existing	0.008	Yes
B & H Transfer	Process wastewater resulting from truck tank washout of calcium carbonate and kaolin clay	Existing	0.011	Yes
Imerys Carbonite	Wastewater resulting from the mining of marble and processing operations	Existing	0.016	Yes

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

Yes

Please attach a copy of the ordinance.

Sewer Use Regulations August 2011.pdf - 11/15/2023 01:07 PM

Comment

NONE PROVIDED

Coastal Zone Information

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

Anti-Degradation Evaluation

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

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

EPA Application Forms

All Applicants must submit certain EPA permit application forms. More than one application form may be required from a POTW or other TWTDS depending on the number and types of discharges or outfalls.

The EPA application forms must be submitted as follows:

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

The EPA application forms are found on the Department's website here.

EPA Form 2A

2A scanned.pdf - 11/15/2023 01:19 PM

Toxicity Test results scanned.pdf - 11/15/2023 03:00 PM

Comment

NONE PROVIDED

EPA Form 2F

2F scanned.pdf - 11/15/2023 01:19 PM

Stormwater results.pdf - 11/15/2023 03:00 PM

Comment

NONE PROVIDED

EPA form 2S

2S scanned.pdf - 11/15/2023 01:19 PM

Comment

NONE PROVIDED

Other attachments (as needed)

Notice of violation and response 2020.pdf - 11/15/2023 03:01 PM

Comment

NONE PROVIDED

Topographic Map

Attach topographic map here.

J. Earl Ham WWTP TOPO.pdf - 11/15/2023 02:49 PM

Comment

NONE PROVIDED

Engineering Report/BMP Plan Requirements

Engineering Report/BMP Plan Requirements

[J.E Ham WWTP SPCC 2022.pdf - 11/15/2023 03:02 PM](#)

[J.E Ham WWTP BMP 2022.pdf - 11/15/2023 03:02 PM](#)

Comment

NONE PROVIDED

Outfalls (1 of 1)

Outfall: 001

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

No

Outfall Identifier

001

Is this Outfall equipped with a diffuser?

No

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

2.77

Receiving Water

Shirtee Creek

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

NONE PROVIDED

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

[Map Instruction Help](#)

Location of Outfall or Discharge Point/Receiving Water

33.19725000000000, -86.27195000000000

[A list of the 303\(d\) impaired waters can be found here.](#)

303(d) Segment?

Yes

[A list of waters subject to a TMDL can be found here.](#)

TMDL Segment?

Yes

NOTE

If a TMDL Compliance Schedule is requested, the following should be attached as supporting documentation: (1) Justification for the requested Compliance Schedule (e.g., time for design and installation of control equipment, etc.); (2) Monitoring results for the pollutant(s) of concern which have not previously been submitted to the Department (sample collection dates, analytical results (mass and concentration), methods utilized, and MDL/ML, etc. should be submitted as available); (3) Requested interim limitations, if applicable; (4) Date of final compliance with the TMDL limitations; and (5) Any other additional information available to support the requested compliance schedule.

TMDL Attachments

NONE PROVIDED

Comment

NONE PROVIDED

Stormwater Outfall(s) (1 of 3)

Stormwater Outfall: 002

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

No

Stormwater Outfall Identifier

002

Receiving Water

Shirtee Creek

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

NONE PROVIDED

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

[Map Instruction Help](#)

Location of Outfall or Discharge Point/Receiving Water

33.19032200000000, -86.27233300000000

303(d) Segment?

Yes

TMDL Segment?

Yes

Stormwater Outfall(s) (2 of 3)

Stormwater Outfall: 003

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

No

Stormwater Outfall Identifier

003

Receiving Water

Darby Branch

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

NONE PROVIDED

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

[Map Instruction Help](#)

Location of Outfall or Discharge Point/Receiving Water

33.19030600000000, -86.27219200000000

303(d) Segment?

No

TMDL Segment?

No

Stormwater Outfall(s) (3 of 3)

Stormwater Outfall: 004

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

No

Stormwater Outfall Identifier

004

Receiving Water

Shirtee Creek

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

NONE PROVIDED

Please refer to the link below for Lat/Long map instruction help.[Map Instruction Help](#)**Location of Outfall or Discharge Point/Receiving Water**

33.19129400000000, -86.27057499999999

303(d) Segment?

Yes

TMDL Segment?

Yes

Fee**Fee**

7060

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

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

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

Modeling - desktop - \$4,855

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

Seasonal Limits - \$4,855/additional season

Biomonitoring & Toxicity Limits - \$1,015

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

Application Preparer**Application Preparer****Prefix**

NONE PROVIDED

First Name

NONE PROVIDED

Last Name

NONE PROVIDED

Title

NONE PROVIDED

Organization Name

NONE PROVIDED

Phone Type**Number****Extension**

NONE PROVIDED

Email

NONE PROVIDED

Address

[NO STREET ADDRESS SPECIFIED]

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

Revisions

Revision	Revision Date	Revision By
Revision 1	11/15/2023 11:25 AM	David Green
Revision 2	12/17/2024 10:40 AM	David Green



**Influent
Sample Point**

**Effluent
Sample
Point**

Street View

W 86°16'26.4"

N33°11'18.24"

© 2000 EarthLink Inc.

SEWER USE REGULATIONS

OF

THE UTILITIES BOARD
OF
THE CITY OF SYLACAUGA



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SEWER USE REGULATIONS
OF
The Utilities Board
OF
The City of Sylacauga, ALABAMA

Regulations to provide for the operation, maintenance and management of the sewerage system (wastewater collection and treatment system) (POTW) of the Utilities Board of the City of Sylacauga, Talladega county, Alabama and to regulate and control discharge of wastewaters into the sewerage system of the Utilities Board of the City of Sylacauga, Alabama.

The Utilities Board of the City of Sylacauga, Alabama does hereby adopt the following sewer use regulations.

SECTION 1 GENERAL PROVISIONS

Section 1.01

These Regulations are adopted for the purposes of regulating and controlling the discharge of wastewaters into the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama to set forth uniform requirements for Users of the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama and to enable the Utilities Board Of The City of Sylacauga, Alabama to comply with all applicable State and Federal laws required by the Clean Water Act of 1977(P.L. 95—217) as amended, the General Pretreatment Regulations (40 'CFR Part 403) and the Alabama Water Pollution Control Act (Code of Alabama 1975, Section 22-22-1 et seq.). These Regulations provide for the regulation of Users of the Sewerage System through the execution of contracts with certain non-domestic Users and through enforcement of general requirements for all Users, authorize monitoring and enforcement activities, require User reporting, assure that existing customers' capacities will not be preempted and provide for the setting of fees for the equitable distribution of costs resulting from the program established herein. These Regulations shall apply to all persons who are Users of the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama. Except as otherwise provided herein, the Utilities Board of the City of Sylacauga, Alabama shall administer, implement and enforce the provisions of these Regulations. The objectives of these Regulations are:

1.01.01

To prevent the introduction of pollutants into the Sewerage System which will interfere with the operation of the Sewerage System or contaminate the resulting sludge.

1.01.02

To prevent the introduction of pollutants into the Sewerage System which will pass through the Sewerage System, inadequately treated, into receiving waters or the atmosphere or otherwise be incompatible with the operation of the Sewerage System.

1.01.03

To improve the opportunity to recycle and reclaim waste-waters and sludges from the Wastewater Treatment Plants.

1.01.04

To provide for equitable distribution of the costs attributable to the construction, operation and maintenance of the Sewerage System.

1.01.05

To define areas of responsibility and procedures for joint management of the Alabama. Industrial Wastewater Pretreatment Program as it applies to the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama by the Alabama Department of Environmental Management and the Utilities Board of the City of Sylacauga, Alabama.

Section 1.02

The following abbreviations shall have the designated meanings:

1.02.01	ADEM	Alabama Dept of Environmental Management
1.02.02	BOD	Biochemical Oxygen Demand
1.02.03	CFR	Code Of Federal Regulations
1.02.04	COD-	Chemical Oxygen Demand
1.02.05	EPA-	U.S. Environmental Protection Agency
1.02.06	L-	Liter
1.02.07	mg-	Milligrams
1.02.08	mg/l-.....	Milligrams per Liter
1.02.09	NPDES	National Pollutant Discharge Elimination System
1.02.10	O&M	Operation and Maintenance
1.02.11	OSHA	Occupational Safety and Health Administration
1.02.12	P.L	Public Law
1.02.13	POTW.....	Publicly Owned Treatment Works
1.02.14	SWDA.....	(The) Solid Waste Disposal Act
1.02.15	SIU.....	Significant Industrial User
1.02.16	SID Permit	State Indirect Discharge Permit
1.02.17	SS	Suspended Solids
1.02.18	USC	United States Code

Section 1.03

The following words, terms and phrases, wherever used in these Regulations, shall have the meanings respectively ascribed to them in this Section unless the context plainly indicates otherwise or that a more restricted or extended meaning is intended.

1.03.01

Accidental Discharge Any release, of wastewater which, for any reason, fails to comply with any prohibition or limitation in these Regulations.

1.03.02

Act or "the Act" The Federal Water Pollution Control Act, (P.L. 92-500) as amended by the Clean Water Act of 1977 (P.L.95-217) and as further amended, including, without limitation, any amendment enacted after the date of adoption of these Regulations (33 USC Paragraph 1251 et.seq.).

1.03.03

Approval Authority The Director of the Alabama Department of Environmental Management (ADEM).

1.03.04

Authorized Representative of Industrial User An authorized representative of an Industrial User shall be:

1.03.04.01

A principal executive officer of at least the level of vice-president if the Industrial User is a corporation.

1.03.04.02

A general partner, manager, or proprietor if the Industrial User is a partnership limited liability company, or proprietorship, respectively.

1.03.04.03

A duly authorized representative of the individual designated above if such representative is responsible for the overall operation of the facilities from which the indirect discharge originates.

1.03.05

Biochemical Oxygen Demand or BOD The quantity of oxygen utilized in the biochemical oxidation of organic matter under standard laboratory procedures in five (5) days at 20° C (68° F) expressed in terms of weight and volume (milligrams per liter).

1.03.06

Board - The Utilities Board of the City of Sylacauga, Alabama.

1.03.07

Building Sewer or House Connection - The connecting pipe from a building to the sanitary sewer.

1.03.08

Categorical Standard National - Categorical Pretreatment Standard or Pretreatment Standard.

1.03.09

City - The City of Sylacauga, Alabama.

1.03.10

Color - Considered to be the true color of the light transmitted by a waste solution after removing suspended material including pseudocolloidal particles.

1.03.11

Combined Sewer - A sewer receiving both surface runoff and wastewater. Combined sewers are not permitted by ADEM policy.

1.03.12

Constituents -The specific compounds and components, which comprise the wastewater.

1.03.13

Control Authority - The approval authority defined hereinabove. The term Control Authority shall also apply to the Utilities Board of the City of Sylacauga, Alabama as defined hereinafter as per Memorandum of Agreement between the Alabama Department of Environmental Management and the Utilities Board of the City of Sylacauga, Alabama.

1.03.14

Cooling Water -The water discharged from any use such as air conditioning, cooling or

refrigeration, or to which the only pollutant added is heat.

1.03.15

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

1.03.16

Domestic Wastewater - All liquid and waterborne pollutants, exclusive of unpolluted water as defined in Section 1.03.60, or wastewater or wastes from processes or operations of Industrial Users as defined in Section 1.03.22.

1.03.17

Environmental Protection Agency or EPA - The U. S. Environmental Protection Agency or, where appropriate, the term may also be used as a designation for the Administrator or other duly authorized official of said Agency.

1.03.18

Flammable - Shall be as defined in Section 5.03.01.

1.03.19

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

1.03.20

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

1.03.21

Indirect Discharge - The discharge or the introduction of non-domestic pollutants from any source regulated under Section 307(b) or (c) of the Act into the Sewerage System (including holding tank waste discharged into the Sewerage System).

1.03.22

Industrial User - Any User of the Sewerage System who is a source of Indirect Discharge, which does not constitute a "discharge of pollutants" under regulations issued pursuant to Section 402 of the Act. (A user who discharges Industrial Waste into the Sewerage System.)

1.03.23

Industrial Waste - The liquid or other wastes resulting from any process of industry, manufacture, trade or business or from the development of natural resources.

1.03.24

Infiltration - The water entering sewers and building sewer connections from the soil through defective joints, broken or cracked pipe, improper connections, manhole walls, etc. infiltration does not include, and is distinguished from inflow.

1.03.25

Inflow - The water discharged into sewer lines from such sources as roof leaders, cellar and yard area drains, foundation drains, commercial and industrial discharges of Unpolluted Wastewater as defined in Section 1.03.60, drains from springs and swampy areas, etc. It does not include and is distinguished from infiltration.

1.03.26

Interference - The inhibition or disruption of the wastewater treatment processes or

operations, or acts or discharges which may cause damage to any portion of the Sewerage System and/or which contribute to a violation of any requirement of the Sylacauga NPDES Permits. The term includes interference with sewage sludge use or disposal in accordance with Section 405 of the Act or any criteria, guidelines or regulations developed pursuant to the SWDA (P.L. 89-272 as Amended), the Clean Air Act, (P.L. 91-604 as Amended) or more stringent State criteria (including those contained in any State sludge management plan prepared pursuant to Title IV of the SWDA) applicable to the method of disposal or use employed by the Sewerage System.

1.03.27

Manager - The chief administrative officer of the Utilities Board of the City of Sylacauga, Alabama who is charged with administrative control of all operations of the Board and is responsible directly to the Board. As used herein, it may also include any other Board employee delegated to act for the Board by the Manager or by the Board.

1.03.28

National Categorical Pretreatment Standard, Categorical Pre-treatment Standard or Pretreatment Standard - Any regulation containing pollutant discharge limits promulgated by EPA in accordance with Sections 307(b) and (c) of the Act which apply to a specific category of Industrial Users.

1.03.29

National Pollutant Discharge Elimination System or NPDES Permit - A permit to discharge wastewater issued pursuant to Section 402 of the Act.

1.03.30

New Source - Any source, the construction of which is commenced after the adoption of these Regulations or the publication of proposed regulations prescribing a Section 307(c) Categorical Pretreatment Standard which will be applicable to such source, if such Standard is thereafter promulgated within 120 days of proposal in the Federal Register. Where the Standard is promulgated later than 120 days after proposal, a New Source means any source, the construction, of which is commenced after the date of promulgation of the Standard.

1.03.31

Normal Waste - A waste having average concentrations of 300 milligrams per liter of BOD, or less, and 300 milligrams per liter of suspended solids, or less, as determined by samples taken before entering the Sewerage System.

1.03.32

Person - Any individual, firm company, association, corporation, governmental agency, board, commission or municipal corporation other than the Utilities' Board of the City of Sylacauga, Alabama.

1.03.33

pH - The logarithm of the reciprocal of the concentration of hydrogen ions in moles per liter of solution. Stabilized ph is that determined after a sample of waste has been subjected to natural aeration.

1.03.34

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

1.03.35

Pollutant - Any solid waste, chemical waste, biological material, radioactive material,

thermal waste or industrial, municipal or agricultural waste discharged into water.

1.03.36

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

1.03.37

Pretreatment Requirement - Any substantive or procedural requirement related to pretreatment, other than a National Categorical Pretreatment Standard, imposed on an Industrial User.

1.03.38

Private Wastewater Disposal System - Any facilities for wastewater treatment and disposal not maintained and operated by the Utilities Board of the City of Sylacauga, Alabama.

1.03.39

Properly Shredded Garbage - The organic wastes resulting from the preparation, cooking and dispensing of foods that have been shredded to such degree that all particles will be carried freely under flow conditions normally prevailing in public sewers with no particle being greater than ½ inch in any dimension.

1.03.40

Public Sewer - A sewer in which all owners of abutting properties shall have equal rights and which is controlled by a governmental agency or public utility.

1.03.41

Publicly Owned Treatment Works or POTW - Treatment works as defined by Section 212 of the Act which are owned in this instance by the Utilities Board of the City of Sylacauga, Alabama. This definition includes the Wastewater Treatment Plants and any sewers that convey wastewater to the Waste-water Treatment Plants (Sewerage System).

1.03.42

Receiving Stream - That body of water, stream or watercourse receiving the discharge from a Wastewater Treatment Plant or that body of water, stream or watercourse formed by the effluent from a Wastewater Treatment Plant.

1.03.43

Sanitary Sewage - Sewage excluding process wastes from Industrial Users.

1.03.44

Sanitary Sewer A Public Sewer controlled by a governmental agency or public utility that carries liquid and waterborne wastes from residences, commercial buildings, industrial plants and institutions, together with minor quantities of ground and surface waters that are not intentionally admitted.

1.03.45

Sewage - A combination of waterborne wastes from residences and Industrial Users (Wastewater).

1.03.46

Sewer - A pipe or conduit for carrying wastewater.

1.03.47

Sewerage System - All facilities for collecting, pumping, treating and disposing of wastewater (POTW).

1.03.48

Shall - "Shall" is mandatory; "may" is permissible.

1.03.49

Significant Industrial User or SIU - Any Industrial User of the Sylacauga Sewerage System who:

1.03.49.01

Has a discharge flow of 25,000 gallons or more per average workday.

1.03.49.02

Has a discharge, which is greater than five percent (5%) of the hydraulic flow or organic design capacity of the Sewerage System serving the Industrial User.

1.03.49.03

Has a discharge, which contains toxic pollutants or Priority Pollutants as defined pursuant to Section 307 of the Act or Alabama Statutes and Rules and Regulations.

1.03.49.04

Is found by the Utilities Board of The City of Sylacauga, Alabama, the Approval Authority or EPA to have significant impact, either singly or in combination with other contributing industries, on the Sewerage System, the quality of sludge, the System's effluent quality or air emissions generated by the Sewerage System.

1.03.50

Slug - Any discharge of water or wastewater for any duration during which the rate of flow or concentration of any constituent increases to such magnitude so as to adversely affect the operation of the Sewerage System or the ability of the Board's Wastewater Treatment Plants to meet applicable water quality objectives.

1.03.51

Standard Industrial Classification or SIC - A classification of an industry based on its product or service pursuant to the Standard Industrial Classification Manual, 1972, Office of Management and Budget of the Federal Government, as amended.

1.03.52

Standard Methods - The analytical procedures set forth in the latest edition of "Standard Methods for the Examination of Water and Wastewater" published by the American Public Health Association or "EPA Methods for Chemical Analysis of Water and Wastes" as per 40 CFR Part 136 and amendments thereto.

1.03.53

State - State of Alabama.

1.03.54

Storm Sewer or Storm Drain - A sewer which carries storm and surface waters and drainage but which excludes sanitary sewage and polluted industrial wastes.

1.03.55

Storm Water - Any flow occurring during or following any form of natural precipitation and resulting there from.

1.03.56

Strength of Waste - The concentration of pollutants or substances contained in a liquid waste.

1.03.57

Suspended Solids - The total solid matter that either floats on the surface of or is suspended in water or liquid waste and which is removable by laboratory filtration.

1.03.58

Toxic Pollutant - Any Pollutant or combination of Pollutants listed as toxic in regulations promulgated by EPA under provisions of Section 307(a) of the Act or by the State of Alabama.

1.03.59

Twenty-Four Hour, Flow Proportional Composite Sample or Composite Sample - A sample consisting of at least eight (8) portions collected during a twenty-four hour period or the total period of waste flow if less than twenty-four hours and in which the sample portions are collected proportionate to the flow and then proportionately combined into a single sample. Alternate sampling requirements may be established in a User's SID Permit and/or by the Control Authority.

1.03.60

Unpolluted Wastewater - Any wastewater, which is substantially free of pollutants and is discharged from the following:

1.03.60.01

Rain downspouts and drains

1.03.60.02

Footing Drains

1.03.60.03

Storm and surface water drains

1.03.60.04

Cooling water systems unpolluted wastewater shall contain, by definition, none of the following:

1.03.60.05

BOD in excess of 10mg/l

1.03.60.06

Suspended solids in excess of 10 mg/l

1.03.60.07

Free or emulsified grease or oils

1.03.60.08

Acid or alkalines

1.03.60.09

Phenols or other substances imparting taste or odor to receiving waters

1.03.60.10

Toxic or poisonous substances.

1.03.60.11

Noxious or odorous gases.

1.03.60.12

Any wastewater with a temperature which exceeds 60°C (140°F) at its introduction into a Storm Sewer or which exceeds 40°C (104°F) at its introduction into a receiving stream.

1.03.61

User - Any person, who contributes, causes or permits the contribution of wastewater into the sewage system.

1.03.62

Utilities Board or Board – The Utilities Board City of Sylacauga, Alabama or, where appropriate, the term may also be used as a designation for the Manager or other duly authorized official of the Board.

1.03.63

Wastewater - Sewage.

1.03.64

Wastewater Treatment Plant(s) - The facilities of the Utilities Board of the City of Sylacauga, Alabama for treating and disposing of wastewater.

1.03.65

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

1.03.66

Waters of the State - All bodies or accumulations of water, surface or underground, within the boundaries of the State of Alabama.

Section 1.04

Definitions include both the singular and the plural and all pronouns include both the singular and the plural and cover all genders.

SECTION 2 USE OF PUBLIC SEWERS REQUIRED**Section 2.01**

In accordance with provisions of Ordinance No. 1631 of the City, it shall be unlawful for any person to discharge to any outlet other than a sanitary sewer, within the Corporate Limits of the City, any domestic or industrial wastes except where suitable treatment has been provided in accordance with subsequent provisions of these Regulations and where an appropriate NPDES Permit has been obtained from ADEM pursuant to Section 402 of the Act.

Section 2.02

The owner(s) of all houses, buildings or properties used for human occupancy, employment, recreation or other purposes, situated within the City and abutting on any street, alley or right-of-way in which there is now located or may in the future be located directly adjacent to said property a public sanitary sewer of the Board with available capacity that discharges to any of the Sylacauga Wastewater Treatment Plants, who has installed suitable toilet and other facilities therein necessary for the discharge of domestic and/or industrial wastes, is hereby required at the owner(s) expense to connect such facilities directly with the proper public sanitary sewer in accordance with provisions of Ordinance No. 1631 of the City and Section 4 of these Regulations except where a private wastewater disposal system complying with the requirements of the State, Talladega County and/or the City has been installed prior to the adoption of Ordinance No. 1631, or in the case of a Significant Industrial User to whom the Board has declined to extend service because the Board reasonably believes that the Significant Industrial User's discharge will interfere with the operation of the Board's wastewater facility or facilities, the Board's facility's or facilities' ability to meet NPDES requirements, or may directly or indirectly cause degradation of the receiving stream[wca1].

SECTION 3 PRIVATE WASTEWATER DISPOSAL**Section 3.01**

Where a public sanitary sewer is not available under the provisions of Section 2.02, such toilet and other facilities necessary for the discharge of domestic and/or industrial wastes shall be connected to a private wastewater disposal system complying with the requirements of the State, Talladega County and/or the City.

Section 3.02

Holding tank wastes and septic tank wastes from private systems shall be discharged into the Sewerage System only under the following conditions:

3.02.01

No person owning vacuum-pump or septic tank trucks or other liquid waste transport trucks shall discharge directly or indirectly such wastewater into the Sewerage System unless such person shall first have applied for and received a Wastewater Haulers Discharge Permit from the Board. All applicants for Wastewater Haulers Discharge Permits shall complete such forms as required by the Board, pay appropriate fees and agree in writing to abide by the provisions of this Section and any special conditions or regulations established by the Board. The owners of such vehicles shall affix and display a permit on the side of each vehicle used for such purposes. Such permits shall be valid for a maximum period of one (1) year from date of issuance, provided that such permit shall be subject to revocation by the Board for violation of any provision of this Section or reasonable regulation established by the Board. Such permits shall be limited to the discharge of Sanitary Sewage containing no industrial waste. Pumpage from commercial grease traps is specifically prohibited from discharge into the Sewerage System. The Board shall designate the locations and times where such trucks may be discharged and may refuse to accept any truckload of waste at their absolute discretion where it appears that the waste could interfere with the effective operation of the Sewerage System.

3.02.02

No person shall discharge any other holding tank waste including industrial process wastes into the Sewerage System unless he shall have applied for and have been issued a permit by the Board. Unless otherwise allowed under the terms and conditions of the permit, a separate permit must be secured for each separate discharge. The permit shall state the specific location of discharge, the time of day the discharge is to occur, the volume of the

discharge and shall limit the wastewater constituents and characteristics of the discharge. Such User shall pay any applicable charges or fees therefore and shall comply with the conditions of the permit issued by the Board.

3.02.03

No person shall operate a dumping station for the discharge of sanitary sewage from recreation vehicles into the Sewerage System unless the User of the dumping station has first applied for and received a Recreational Vehicle Dumping Station Permit from the Board. All applicants for Recreational Vehicle Dumping Station Permits shall complete such forms as required by the Board, pay appropriate fees and agree in writing to abide by the provisions of this Section and any special conditions or regulations established by the Board. These permits shall be issued only for approved facilities designed to receive Sanitary Sewage.

Section 3.03

No statement contained in this Section shall be construed to interfere with any additional requirements that may be imposed by Federal or State agencies.

SECTION 4 BUILDING SEWERS, CONNECTIONS AND PERMITS

Section 4.01

No unauthorized person(s) shall uncover, make any connections with or opening into, use, alter or disturb any public sewer or appurtenance thereof without first obtaining a written permit from the Board.

Section 4.02

Sewer permits shall be divided into two classes, as follows:

4.02.01

Building Sewer Permits for residential, commercial, industrial or public facilities.

4.02.02

State Indirect Discharge (SID) Permits for Significant Industrial Users as defined in Section 1.03.49.

Section 4.03

Building Sewer Permits for all connections shall be obtained under these Regulations and in accordance with the requirements promulgated by the Board.

Section 4.04

In addition to the requirements of Section 4.03, any person who, after the effective date of these Regulations, proposes to originate the discharge of any industrial waste for the first time into the Sewerage System or who proposes to make a significant change in the character or volume of any industrial waste theretofore discharged into the Sewerage System, shall make application to ADEM through the Board for an SID Permit and obtain a permit prior to connecting to the Sewerage System or making a significant change in his contribution thereto. The applications shall be supplemented by any information, which may have been furnished by the applicant to any other governmental agency and by such other plans or other data as the Board may reasonably require for purposes of determining whether the qualifications are met as specified in Section 4.09.

Section 4.05

A significant change in the character or volume of an industrial waste, for purposes of Section 4.04, shall be deemed to be proposed if substances, compounds and elements not previously

constituting any part of a User's industrial waste are to be introduced into such waste or if the average concentration of any substance, compound or element in the waste or average volume proposed to be discharged will cause a violation of any permit limitation. In case of doubt as to whether an intended change constitutes a significant change, it shall be the responsibility of the User intending to make such a change to make the necessary application or obtain a written ruling from the Board and ADEM that an application for an SID Permit is not required.

Section 4.06

Any User who, on the effective date of these Regulations, is operating within the City and is a SIU within the meaning of Section 1.03.49 from which industrial waste is discharged into the Sewerage System (hereafter called "an existing Significant Industrial User") may continue such discharge until notified by the Board in writing that an SID Permit will be required and until an application has been submitted to and denied by the Board and ADEM in accordance with the following provisions:

4.06.01

The Board, after consultation with ADEM shall issue written notices to existing Significant Industrial Users (in such time sequence as it may determine in the light of the staff resources available to him for the processing of SID Permit applications) specifying in each such notice the time within which an existing Significant Industrial User shall file application for an SID Permit.

4.06.02

Within the specified time limit, the existing SIU shall file the required application together with any other information, as described in Section 4.04.

4.06.03

An existing SIU may continue to discharge, after complying with the requirement to file an application for an SID Permit, unless and until receipt by the applicant of a written notice specifying the reasons for denial of an SID Permit and specifying what remedial action, if any, must be taken to qualify the applicant for a Permit.

Section 4.07

Any User subject to a new National Categorical Pretreatment Standard shall apply for a new SID Permit within one hundred eighty (180) days after the promulgation of the applicable National Categorical Pretreatment Standard. Unless denied for any reason, SID Permits of Users subject to such Standards shall be issued or reissued in compliance with such Standards within the time frames prescribed by such Standards.

Section 4.08

In any case, where a final determination has been made denying an SID Permit it shall be unlawful for any person so denied an SID Permit to discharge industrial waste into the Sewerage System.

Section 4.09

An SID Permit will be issued or renewed by ADEM only when satisfactory information has been submitted to indicate that:

4.09.01

Sewerage System capacity is available for receiving the discharge of industrial waste at the proposed point of discharge.

4.09.02

The waste being discharged or proposed to be discharged is amenable to treatment by the processes employed in the Wastewater Treatment Plant receiving said wastewater and will not impair the ability of the City to comply with water quality standards or effluent standards established by the State or by Federal regulatory agencies.

4.09.03

The waste being discharged or proposed to be discharged will not cause damage to the Sewerage System including the waste water treatment facilities, will not constitute a hazard to humans or animals and will not be capable of creating a public nuisance.

4.09.04

The concentrations of substances, compounds and elements in the waste being discharged or proposed to be discharged do not exceed limits established by the Board, State or Federal authorities.

4.09.05

Where the wastewater contains or may contain any substances, compounds or elements controlled or limited by these Regulations, an adequate program of self-monitoring of flow and wastewater characteristics will be established and maintained by the industry affected by these Regulations to assure that the discharge meets the requirements of these Regulations and any SID Permit conditions.

4.09.06

The SIU agrees to execute with the Board a "Contract for Discharge and Use of the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama."

Section 4.10

An SID Permit shall include all appropriate requirements of these Regulations and all other applicable regulations established by the Board and ADEM. SID Permits may contain the following:

4.10.01

Limits on the average and maximum wastewater constituents and characteristics. The Board or ADEM may impose mass limitations on Users which are using dilution to meet applicable Pretreatment Standards or Requirements or in other cases where the imposition of mass limitations are appropriate.

4.10.02

Limits on average and maximum rates and time of discharge or requirements for flow regulations and equalization.

4.10.03

Requirements for installation and maintenance of inspection and or sampling facilities.

4.10.04

Specifications for monitoring programs which may include sampling locations, frequency of sampling, number, types and standards for tests and reporting schedules, and sharing of samples with the Board.

4.10.05

Compliance schedules.

4.10.06

Requirements for submission of technical reports or discharge reports as per Section 10.

4.10.07

Requirements for maintaining and retaining plant records relating to wastewater discharges as specified by the Board and ADEM and affording the Board and ADEM access thereto.

4.10.08

Requirements for notification of the Board and ADEM of any new introduction of wastewater constituents or any substantial changes in the volume or character of the waste-water constituents being introduced into the Sewerage System.

4.10.09

Limitations on, or requirements for notification of, Slug discharges as per Sections 7 and 8.

4.10.10

Other conditions as deemed appropriate by the Board or ADEM to insure compliance with the requirements and purposes of these Regulations.

Section 4.11

An SID Permit shall be issued for a specified time period, not to exceed five (5) years. The User shall apply for SID Permit reissuance a minimum of ninety (90) days prior to the expiration of the User's existing SID Permit. The Board reserves the right to recommend to ADEM changes in the SID Permit at any time as limitations or requirements as identified in Section 5 are modified or other just cause exists. The terms and conditions of the SID Permit may be subject to modification by ADEM during the term of the SID Permit as limitations or requirements as identified in Section 5 are modified or other just cause exists. The User shall be informed of any proposed changes in his SID Permit at least thirty (30) days prior to the effective date of change. Any changes or new conditions in the SID Permit shall include a reasonable time schedule for compliance.

Section 4.12

An SID Permit is issued to a specified User for a specific operation. An SID Permit shall not be reassigned or transferred or sold to a new owner, new User, different premises or a new or exchanged operation without prior submission of applicable revisions to the application for the existing SID Permit and without the recommendation of the Board and approval by ADEM. Any succeeding owner or User shall also comply with the terms and conditions of the existing SID Permit.

Section 4.13

All building sewer installations shall be in accordance with provisions of Ordinance No. 1631 of the City.

Section 4.14

All construction activities shall conform to all applicable OSHA regulations.

SECTION 5 EXCLUDED WASTES**Section 5.01**

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

Section 5.02

No User shall discharge or deposit any of the following materials, waste materials, wastes, gases or liquids into any sewer forming part of the Sewerage System except where these may constitute

occasional, intermittent inclusions in the wastewaters discharged from residential premises:

5.02.01

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

5.02.02

Any water or waste containing more than 100 mg/l of fat, oil, or grease or other substances that will solidify or become viscous at temperatures between 0°C (32°F) and 60°C (140°F).

5.02.03

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

5.02.04

Any garbage that has not been properly shredded so that no particles are any greater than one-half inch (½") in any dimension.

5.02.05

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

5.02.06

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

Section 5.03

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

5.03.01

Any liquids, solids or gases which by reason of their nature or quantity are or may be sufficient, either alone or by interaction with other substances, to cause fire or explosion ("Flammable") or be injurious in any other way to the Sewerage System or to the operation of the System. At no time shall two successive readings (15 to 30 minutes between readings) on an explosion hazard meter¹ at the point of discharge into the Sewerage System be more than five percent (5%) nor any single reading over ten percent (10%) of the Lower Explosive Limit (L.E.L.) of the meter. Prohibited materials covered by this Section include, but are not limited to, gasoline, kerosene, naphtha, benzene, 'fuel oil, motor oil, mineral spirits, commercial solvents, toluene, xylene, ethers, alcohols, ketones, aldehydes, peroxides, chlorates, perchlorates, bromates, carbides and hydrides.

5.03.02

Any other solid or viscous substance in quantity or character capable of causing obstruction to flow in sewers or interference with proper operation of wastewater treatment facilities such as, but not limited to, eggshells from egg processors, ashes, cinders, ceramic wastes,

sand, mud, straw, shavings, thread, glass, rags, metal, feathers, bones, tar, plastics, wood, paunch manure, insulation materials, fibers of any kind, stock or poultry feeds, processed grains, viscera or other fleshy particles from processing or packing plants or lime or similar sludges.

5.03.03

Any noxious or malodorous solids, liquids or gases, which, either singly or by interaction with other wastes, are capable of creating a public nuisance or hazard to life or are or may be sufficient to prevent entry into a sewer for its maintenance and repair.

5.03.04

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

5.03.05

Any substance, which will or has reasonable potential to cause the Sewerage System to violate its NPDES or causes degradation to the receiving stream.

5.03.06

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

5.03.07

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

5.03.08

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

5.03.09

Any unpolluted wastewater, as defined in Section 1.03.60.

5.03.10

Wastewater which alone or in conjunction with other sources may cause or have reasonable potential to cause the POTW's effluent to fail a toxicity test.

5.03.11

Any wastewater containing radioactive wastes or isotopes except in compliance with applicable Federal, State, and local laws and regulations and as specifically authorized by the Board.

5.03.12

Any wastewater generated from offsite facilities other than described in section 3.02 of this document.

5.03.13

Wastewater discharged from centralized wastewater facilities.

Section 5.04

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

5.04.01

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

5.04.02

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

5.04.03

Any waters containing suspended solids of such character and quantity that unusual provisions, attention or expense is required to handle such materials at the Wastewater Treatment Plant receiving said wastewater.

5.04.04

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

5.04.05

No person shall discharge wastewater containing in excess of fixed upper limits for constituents (Milligrams per Liter)

	Maximum Instantaneous Concentration mg/l (Grab Sample)	Maximum Daily Average (24 Hour Flow Proportional (Composite Sample) mg/l
Aluminum (Dissolved)	50.0	25.0
Arsenic	0.5	.1
Cadmium	0.2	0.1
Chromium, Hexavalent	0.2	0.1
Chromium, Total	2.5	1.0
Cobalt	1.6	0.8
Copper	2.0	1.0
Cyanide	1.0	0.5
Iron	20.0	10.0
Lead	0.2	0.1
Mercury	0.1	.001
Molybdenum	1.0	
Nickel	1.0	0.5
Silver	0.5	0.25
Tin	10.0	1.0
Zinc	3.6	1.8
Phosphates (Total as P)	40.0	20.0
Total Metals, As+Cd+Cr+Co+Cu+ILg+Pb+Ni+Ag+Su+Zn	10.5	5.0

5.04.06

The admission into the Sewerage System of any waters or wastes, having a BOD in excess of two hundred fifty (250) mg/l on a twenty-four (24) hour composite basis or for any single sample having a BOD in excess of five hundred (500) mg/l, will be subject to review by the Board. Where necessary in the opinion of the Board, the User shall provide and operate, at his own expense, such pretreatment as may be required to reduce the BOD to meet the above requirements.

5.04.07

The admission into the Sewerage System of any waters or wastes, having a suspended solids content in excess of two hundred fifty (250) mg/l on a twenty-four (24) hour composite basis or for any single sample having a suspended solids content greater than five hundred (500) mg/l will be subject to review by the Board. Where necessary in the opinion of the Board, the User shall provide and operate, at his own expense, such pretreatment as may be required 'to reduce the suspended solids content to meet the above requirements.

5.04.08

The admission into the Sewerage System of any waters or wastes, having a Chemical Oxygen Demand (COD) content in excess of five hundred (500) mg/l on a twenty-four (24) hour composite basis or for any single sample having a COD content greater than One thousand (1000) mg/l will be subject to review by the Board. Where necessary in the opinion of the Board, the User shall provide and operate, at his own expense, such pretreatment as may be required 'to reduce the COD content to meet the above requirements.

5.04.09

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

5.04.10

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

5.04.11

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

5.04.12

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

5.04.13

If the Board determines that a User is contributing to the Board's wastewater facilities, any substances in such amounts as to interfere with the operation of the Board's Wastewater facilities the Board may implement any or all of the following:

5.04.13.01

Advise the User(s) of the impact of the contribution on the Board's wastewater treatment facilities.

5.04.13.02

Develop effluent limitation(s) for such User to correct the interferences with the Board's wastewater facilities

5.04.13.03

The Board may suspend or terminate any discharge which may interfere with the operations of the Board's facility or facilities or the Board's wastewater facility's or facilities' ability to meet NPDES requirements, or may directly or indirectly cause degradation to the receiving stream.

5.04.13.04

Impose surcharges to defray additional treatment costs, discourage continued excursions and encourage acceptable pretreatment practices. See Appendix A - Sewer Use Surcharges

SECTION 6 SAND AND OIL/GREASE INTERCEPTORS**Section 6.01**

All Users involved in the preparation of food for commercial purposes shall provide at their own expense oil/grease interceptors or traps. Grease traps shall be designed as appropriate for the size of the facility as specified in international plumbing code. Additionally, any User who generates a wastewater which contains greater than the quantity of oil and grease specified under Section 5.02.02 and provided that the excess oil and grease is floatable and can be effectively removed in an oil/grease interceptor or trap, then said User will be required to install a grease/oil interceptor.

Section 6.02

All Users whose wastewater stream is associated with unusually large quantities of grit, sand or gravel shall be required to install a sand trap. All car/truck wash systems shall be required to install a sand trap.

Section 6.03

All grease, oil and sand interceptors or traps shall be maintained by the User at their expense, in continuously efficient operation at all times.

Section 6.04

In the maintaining of these interceptors, the owner shall be responsible for the proper removal and disposal by appropriate means of the captured material, and shall maintain records of the dates, and means of disposal which are subject to review by the Board. The frequency of removal shall be such as to ensure that no overflows of oil, grease or sand into the wastewater system ever results.

Section 6.05

Proper Disposal of Collected Materials.

Any removal and hauling of the collected materials not performed by the owner's employees must be performed by currently licensed waste disposal firms. Under no circumstances shall the collected materials ever be returned to the wastewater system.

SECTION 7 PRETREATMENT AND ACCIDENTAL DISCHARGE**Section 7.01**

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

7.01.01

Where pretreatment or equalization of industrial wastewater flows prior to discharge into any part of the Sewerage System are required; plans, specifications and other pertinent data or information relating to such pretreatment or flow control facilities shall first be submitted to the Board and ADEM for review and approval in accordance with Section 4. Satisfactory evidence must be included that the method of disposal of pretreatment sludges has the approval of the appropriate State and/or local solid waste program agency. Such approval shall not exempt the discharge or such facilities from compliance with any applicable code, ordinance, rule, regulation or order of any governmental authority. Any subsequent alteration or addition to such pretreatment or flow control facilities shall not be made without due notice to and prior approval by the Board and ADEM.

7.01.02

If pretreatment or control of flows is required, such facilities shall be constructed, maintained in good working order and properly operated as efficiently as possible by the User at his own cost and expense, subject to the requirements of these Regulations and all other applicable codes, ordinances and laws.

Section 7.02

In the event of an Accidental Discharge as defined in Section 1.03.01:

7.02.01

Each Industrial User shall provide protection from Accidental Discharge of prohibited materials or other wastes regulated by these Regulations. Facilities to prevent accidental discharge of prohibited materials shall be provided and maintained at the User's own cost and expense. Detailed plans showing facilities and operating procedures to provide this protection shall be submitted to the Board and ADEM upon request for review and approval. Review and approval of such plans and operating procedures do not relieve the Industrial User from the responsibility to modify his facility as necessary to meet the requirements of these Regulations.

7.02.02

If, after taking action as provided in Section 7.02.01, an industrial facility - for any unforeseen reason - fails to comply with any prohibition or limitation in these Regulations, the User responsible for such noncomplying discharge shall immediately notify the Board so that any feasible corrective action may be taken to protect the treatment system or to minimize adverse effects thereon. In addition, a written report addressed to the Board and to ADEM detailing the date, time and cause of the Accidental Discharge, the quantity and characteristics of the discharge and corrective action taken to prevent future discharges shall be filed by the responsible industrial facility within five (5) days of the occurrence of the noncomplying discharge.

7.02.03

A notice shall be permanently posted on the User's bulletin board or other prominent place advising employees whom to call in the event of an Accidental Discharge. Employers shall insure that all employees, who observe or who may cause or suffer such an Accidental Discharge to occur, are advised of the emergency notification procedure.

SECTION 8 FLOW AND CONCENTRATION CONTROL**Section 8.01**

No person shall discharge any wastes or wastewaters in "Slugs" as defined in Section 1.03.50.

Section 8.02

Any person, now discharging or proposing to discharge wastes which may include "Slugs" as defined in Section 1.03.50, may be required to provide facilities or adopt procedures for regulating, controlling or equalizing the concentration of any constituent and/or the rate of waste discharge.

SECTION 9 MEASUREMENT OF FLOW**Section 9.01**

The volume or quantity of industrial waste discharged by a User into the Sewerage System shall be measured by one or more of the following methods:

9.01.01

If the volume of water used by any User is substantially the same as the volume secured from the Water Department of the Utilities Board of the City of Sylacauga, Alabama, then the volume of water purchased shall be considered to be the volume of waste discharged.

9.01.02

If a substantial portion of the water secured by a User from the Water Department is not returned to the Sewerage System, the quantity of wastewater shall be determined as follows:

9.01.02.01

By a meter (or meters) on the water supply line (or lines) to his industrial and/or process operations not discharging to the Sewerage System, or

9.01.02.02

By a meter (or meters) on his waste line (or waste lines) which discharges into the Sewerage System.

9.01.02.03

If meters as required under Sections 9.01.02.01 and 9.01.02.02 above shall not have been installed, an estimate shall be made by the Board for that proportion of water purchased which is used for industrial purposes and not returned to the Sewerage System.

9.01.03

If any User - now discharging or proposing to discharge industrial waste into the Sewerage System - does not secure his entire water supply requirements from the Water Department, such User shall install and maintain a meter (or meters) on his waste line (or waste lines) which discharge into the Sewerage System or shall install such additional meters on the private water supply as required to permit determination of the total quantity discharged to the Sewerage System from both sources under procedures comparable to Sections 9.01.01 or 9.01.02 above.

Section 9.02

All sources of water supply and all discharges of wastewater into the Sewerage System must be identified in accordance with the provisions of Section 9.01. Any omission shall be considered as an unauthorized use of the Sewerage System.

SECTION 10 MONITORING FACILITIES**Section 10.01**

Any User, who is discharging or proposes to discharge industrial waste into the Sewerage System, shall provide, operate and maintain at the User's own expense monitoring facilities to allow inspection, sampling and flow measurement of the building sewer and/or internal drainage systems. These monitoring facilities shall be as specified in the User's SID Permit. The monitoring facilities should normally be situated on the User's premises but the Board may, in its sole discretion, when such a location would be impractical or cause undue hardship on the User, allow the facilities to be constructed in the public street or sidewalk area and located so that they will not be obstructed by landscaping or parked vehicles.

Section 10.02

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

Section 10.03

When deemed necessary by the Board and/or ADEM, continuous recording and/or sampling equipment shall be installed and maintained at User expense.

Section 10.04

Whether constructed on public or private property, the sampling and monitoring facilities shall be provided in accordance with requirements of the Board, ADEM and/or all applicable local construction standards and specifications. Construction shall be completed within ninety (90) days following written notification by the Board or ADEM. Additional construction time may be granted by the Board or ADEM, as the case may be, in its sole discretion, where so dictated by equipment availability.

Section 10.05

The Board and/or ADEM shall review monitoring facilities of present Users and may require additional monitoring facilities as required for compliance with Sections 10.01, 10.02 and 10.03.

Section 10.06

New Users shall provide monitoring facilities as specified in their SID Permits prior to plant start up.

SECTION 11 INSPECTIONS, MONITORING AND REPORTING**Section 11.01**

Significant Industrial Users shall submit self-monitoring data at monthly intervals to the Board and ADEM. These monthly reports will be submitted using copies of monitoring forms available from the Board as approved by ADEM and will be due by the 28th of the month following the reporting period.

Section 11.02

Facilities generating industrial wastes and/or other pollutants which are discharged into the Sewerage System shall be subject to inspection by the Board, and by ADEM. A determination of character and strength of said wastes may be made annually or more often as may be deemed necessary by the Board and/or ADEM ^[wca2] to ascertain whether the purposes of these Regulations are being met, all requirements are being complied with and to determine strengths of wastes for user charge computations.

Section 11.03

Within 90 days following the date for final compliance with applicable Pretreatment Standards as defined in Section 1.03.28 or, in the case of a New Source, following commencement of the introduction of wastewater into the Sewerage System; any User, subject to Pretreatment Standards or who is so required by the Board or ADEM, shall submit to the Board and ADEM a report indicating the nature and concentrations of all pollutants in the discharge from the regulated process which are limited by Pretreatment Standards and/or limitations established in Section 5 of these Regulations and the average and maximum daily flows for these process units in the User's facility. The report shall state whether the applicable Pretreatment Standards and/or Regulations limitations are being met on a consistent basis and, if not, what additional O & M and/or pretreatment is necessary to bring the User into compliance with the applicable Pretreatment Standards and/or Regulations limitations. This report shall be signed by an Authorized Representative of the Industrial User.

Section 11.04

Samples shall be collected manually or mechanically over such periods of time and composited in such a manner as to be representative of the wastes being discharged. The laboratory methods followed in the examination of said wastes shall be those as set forth in the latest edition of "Standard Methods", as defined in Section 1.03.52.

Section 11.05

When so requested by the Industrial User, samples collected by the Board or ADEM will be split with the Industrial User for verification of analytical results. However, determination of the character, strength or quantity of the wastes as made by the Board or ADEM shall be binding as a basis for computation of charges or for actions by the Board or ADEM.

SECTION 12 AUTHORITY FOR INSPECTION, FACILITY ACCESS AND MAINTENANCE

Section 12.01

The Manager and other duly-authorized employees of the Board and ADEM, bearing proper credentials and identification, shall be permitted to enter upon all properties for the purpose of inspection, observation, flow measurement, sampling and testing of industrial wastes and other pollutants in accordance with these Regulations.

Section 12.02

The Manager and other duly authorized employees of the Board are authorized to obtain information concerning industrial processes, which have a direct bearing on the kinds and sources of discharges to the Sewerage System. As required by Federal regulations, Industrial Users must disclose information on processes; however, the Board agrees that trade secret information will not be disclosed and will be held confidential.

Section 12.03

Persons or occupants of premises where wastewater is created or discharged shall allow the Manager and other duly-authorized employees of the Board and ADEM ready access at all reasonable times to all points on the premises where wastes are discharged into sewers for the purposes of inspection, sampling, records examination or in the performance of any of their duties.

Section 12.04

The Board, their representatives and ADEM shall have the right to set up on the User's property such devices as are necessary to conduct sampling, inspection, compliance monitoring and/or metering operations.

Section 12.05

Where a User has security measures in force which would require proper identification and clearance before entry into his premises, the User shall make necessary arrangements with his security guards so that, upon presentation of suitable identification, personnel from the Board, their representatives and ADEM will be permitted to enter, without delay, for the purposes of performing their specific responsibilities.

Section 12.06

Notwithstanding the foregoing, in the event that the Board reasonably believes that any discharge by User may interfere with the operation of the Board's wastewater facility or facilities or the Board's ability to meet NPDES requirements, or may directly or indirectly cause degradation to the receiving stream, the Board shall be authorized to enter the User's property and, to the extent that it shall be necessary in the Board's reasonable judgment, to take actions affecting User's facilities or equipment, including, without limitation, closing valves, shall be authorized to do so, and to interrupt or discontinue User's service. All actions or determinations of the Board resulting in interruption or discontinuance of User's service pursuant to the provisions of this section may be appealed to the board of directors of The Utilities Board of the City of Sylacauga, Alabama in the manner provided in Section 14.01.

SECTION 13 PROTECTION OF EQUIPMENT

In accordance with provisions of Ordinance No.1631 of the City, no person shall maliciously,

willfully or negligently break, damage, destroy, deface, tamper with or remove any equipment or materials which are a part of the Sewerage System or any equipment or materials used by the Board or ADEM for the purposes of making waste examinations and waste flow measurements and left upon the premises of a User discharging wastes into the Sewerage System. Only persons authorized by the Board or ADEM will be allowed to uncover, adjust, maintain and remove such equipment and materials.

SECTION 14 REVIEWING AUTHORITY AND AMENDMENT

Section 14.01

The board of directors of The Utilities Board of the City of Sylacauga, Alabama shall be the reviewing authority for all appeals of actions or administrative determinations made by the Board pursuant to the provisions of these Regulations. Notice of intent to appeal and request for a hearing shall be addressed to the Utilities Board of the City of Sylacauga, Alabama, 301 N. Elm Avenue, Sylacauga, Alabama 35150-1992, in writing and shall detail the nature of the appeal. An early date for such hearing shall be set by the board of directors and the appellant shall be promptly notified in writing. The decision of the Board after such hearing shall be final and conclusive and shall be conveyed to the persons involved in writing.

Section 14.02

The Board expressly reserves the absolute right to amend, modify, rescind or supplement these Regulations with concurrence by ADEM.

Section 14.03

The Board will adopt and modify from time to time separate Rate Schedules to supplement these Regulations.

SECTION 15 ENFORCEMENT, PENALTIES AND COSTS

Section 15.01

If wastewaters containing any substance described in Section 5 of these Regulations are discharged or accidentally discharged into the Sewerage System by a User, the Board may, in the event that the Board reasonably believes the same to be necessary or appropriate in order to preclude or stop interference with the operation of the Board's wastewater facility or facilities or the Board's ability to meet NPDES requirements, or to preclude or stop degradation to the receiving stream,, take any of the actions described in Section 12.06; issue orders in accordance with the provisions of a "Contract for Discharge into and Use of the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama" between the Board and the User; commence an action for appropriate injunctive, abatement or equitable relief in any court having jurisdiction, commence an action or proceeding for administrative relief or assistance from ADEM; or pursue any combination of the foregoing.

[wca3]Section 15.02

In any case involving a person who has failed to pay any applicable and duly adopted user charges within the time limits prescribed for such payment, procedure for enforcement shall be as follows:

15.02.01

If full payment is not received by the Board on or before the delinquent date shown on a User's bill, a Late Charge will be added to the User's next billing. The Late Charge shall be the greater of one and one-half percent (1-1/2%) of the delinquent balance or five dollars (\$5.00).

15.02.02

If full payment is not received on or before the cutoff date shown on the bill, service may be discontinued without further notice and an additional reinstatement charge of fifty dollars (\$50.00) will be added to the User's delinquent account. If the Board subsequently discontinues additional services of the User, a charge of twenty dollars (\$20.00) will be added to the User's account for each additional service discontinued by the Board. All reinstatement charges, the delinquent amount and the late charges must be paid prior to service being restored. The Board reserves the right to increase the advance payment requirement for any User whose service has been discontinued for nonpayment and the additional advance payment (if required) must be paid before service will be restored to such User.

15.02.03

A User may contact the Board Manager or Finance Director to dispute any alleged delinquency in payment or to present any error that the User believes has occurred in any billing, and the Board Manager and Finance Director each has all authority necessary to hear and resolve all such disputes or alleged errors and to make all such adjustments or to direct such other actions as may be warranted or appropriate in the circumstances.

15.02.04

The Board Manager and the Finance Director are authorized to extend the cutoff date where Users have made arrangements in advance to clear any delinquent amounts by an approved date.

15.02.05

All determinations of the Board Manager and the Finance Director relating to billing disputes or asserted billing errors may be appealed to the board of directors of the Board who shall be the reviewing authority for all appeals of determinations by the Board Manager or Finance Director of billing disputes or asserted billing errors. Notice of intent to appeal and request for a hearing shall be addressed to the Utilities Board of the City of Sylacauga, Alabama, 301 N. Elm Avenue, Sylacauga, Alabama 35150-1992, in writing and shall detail the nature of the appeal. An early date for such hearing shall be set by the board of directors and the appellant shall be promptly notified in writing. The decision of the board of directors after such hearing shall be final and conclusive and shall be conveyed to the persons involved in writing.

Section 15.03

All actions or determinations of the Board resulting in interruption or discontinuance of User's service pursuant to the provisions of Section 12.06 may be appealed to the board of directors of The Utilities Board of the City of Sylacauga, Alabama in the manner provided in Section 14.01.

Section 15.04

The Board has adopted rates, charges and fees to enable it to recover the costs from Users of the Sewerage System of the Utilities Board of the City of Sylacauga, Alabama for the implementation of the program established herein and for the construction, operation and maintenance of said System.

All rates, charges and fees shall be published in a schedule separate from these

Regulations and may be revised from time to time as the Board finds necessary and appropriate to enable it to recover the costs of construction, operation and maintenance of the system.

These fees relate solely to the matters covered by these Regulations and are separate from all other fees chargeable by the City or the Board.

SECTION 16 ASSIGNMENT OF PROGRAM RESPONSIBILITIES

Section 16.01

Implementation of these Regulations may be either a joint effort by the Board and ADEM or an independent effort by the Board under these Regulations or ADEM under its State Pretreatment Regulations.

Section 16.02

ADEM shall assume primary responsibility for implementation of actions involving Significant Industrial Users as defined in Section 1.03.49; provided, however, that nothing contained in these Regulations shall preclude the Board from declining to extend service to, or suspending or terminating any discharge from, any Significant Industrial User whose discharge the Board reasonably believes has interfered, or will interfere, with the operations of the Board's wastewater facility or facilities, the Board's facility's or facilities' ability to meet NPDES requirements, or may directly or indirectly cause degradation to the receiving stream..

Section 16.03

The Board shall assume primary responsibility for implementation of all actions other than those assigned to ADEM under Section 16.02.

SECTION 17 SEVERABILITY

If any Section, clause, provision or portion of these Regulations shall be held to be invalid or unconstitutional by any court of competent jurisdiction; such holding shall not affect any other Section, clause, provision or portion of these Regulations.

SECTION 18 CONFLICT

All other Regulations and parts of other Regulations inconsistent or conflicting with any part of these Regulations are hereby repealed to the extent of such inconsistency or conflict.

SECTION 19 EFFECTIVE DATE

These Regulations shall be in full force and effect from and after their passage and approval as provided by law.

ADOPTED AND APPROVED THIS 16TH DAY OF AUGUST, 2011
THE UTILITIES BOARD OF THE CITY OF SYLACAUGA

Chairman, Utilities Board of the
City of Sylacauga, Alabama

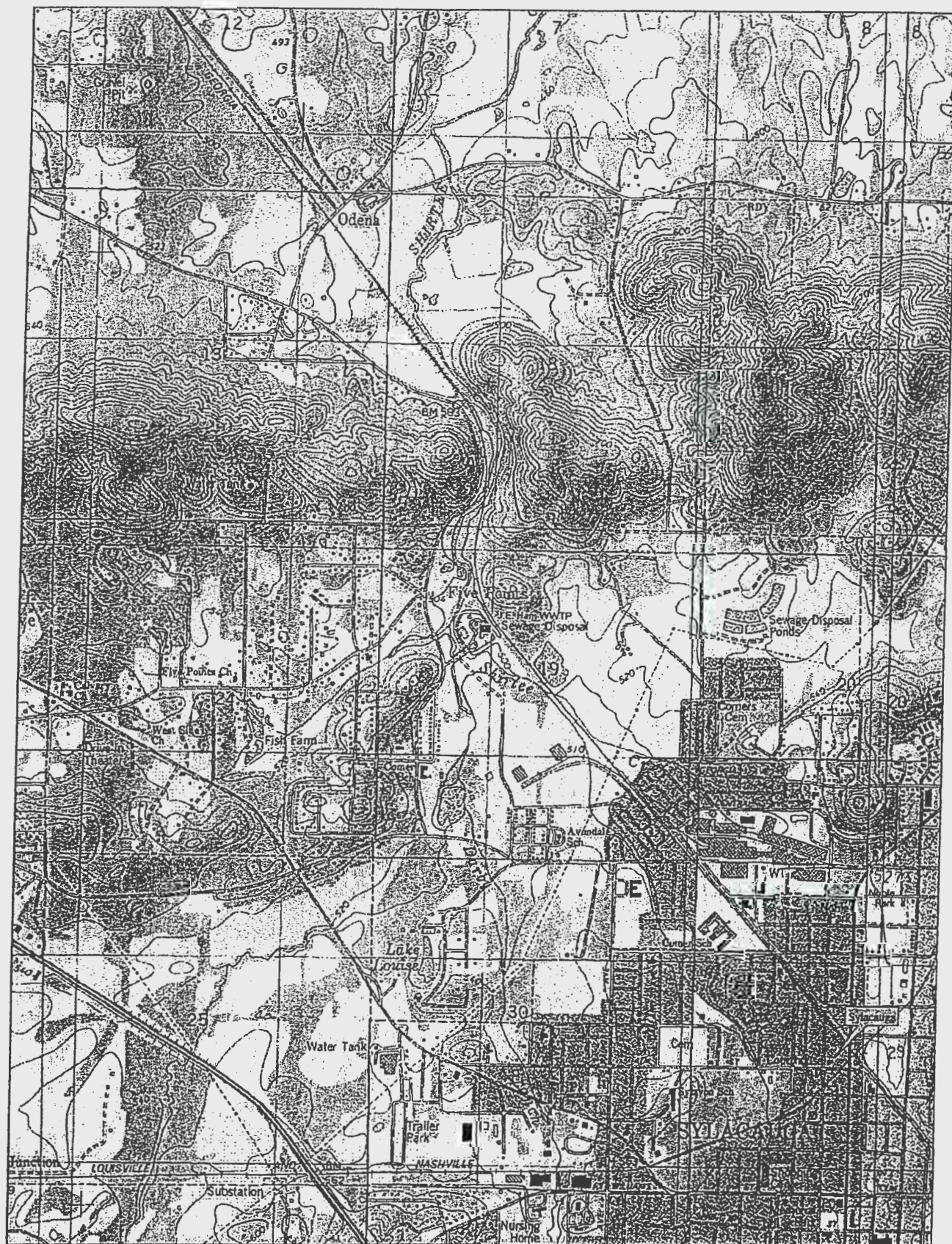
ATTEST: _____ (Seal) *Secretary*

Appendix A – Surcharges

Constituent	Base Allowance	24 Hr Composite Limit	Surcharge
Biochemical Oxygen Demand	Less than 250 mg/l	Greater Than 250 mg/ L	\$0.22 / Lb
Chemical Oxygen Demand	Less Than 500 Mg/l	Greater Than 500 mg/l	\$0.11 / Lb

Note:

- The pounds of contamination for surcharge calculation shall be based on the average monthly sample concentration less the base allowance concentration.
- Surcharge amount of BOD and COD shall be greater of the two; surcharge is not cumulative for these parameters.
- Total mass loading to the POTW from an individual user shall be negotiated on a case by case basis based on available treatment capacity of the POTW.
- The Board reserves the right to amend the surcharge to adjust for fluctuations of treatment costs without prior notice.



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www.delorme.com

Scale 1 : 25,000

1" = 2500 ft



Best Management Practices

J.E. Ham WWTP

610 Old Sylacauga HWY

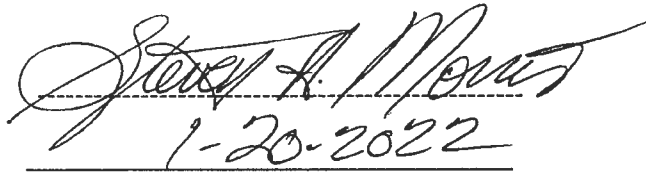
The Utilities Board of the City of Sylacauga operates the J.E. Ham WWTP located on 610 Old Sylacauga Hwy. The facility is operated utilizing best management practices as demonstrated below. (See spill prevention page for detailed guidelines)

1. The facility is properly maintained and the maintenance is documented on the plant computer for inspection.
2. The chief operator is responsible for implementing our BMP.
3. An auxiliary generator is available at the facility. It is tested weekly and a service agreement is maintained with Cummins to assure reliability.
4. The Board has adequate funds to maintain the facility. This is generated from customer revenues, SRF and Bond issues. The facility is in good condition.
5. All operators are certified Grade appropriate. Training is funded by the Utilities Board of the City of Sylacauga.
6. The facility has a lab that has necessary equipment to run the required daily test.
7. Spill prevention measures are in place at the facility.
 - The facility has SCADA that monitors all major equipment including CL2 monitoring.
 - The facility operates below Risk Management Thresholds for CL2 and Sulfur Dioxide to minimize large release threats.
 - SCADA monitors and alarms if any wet well levels start to rise.
 - Operators check all operating equipment daily and record on a log sheet.
 - Since there are no bulk chemicals stored on the premises the only threat would from sludge handling loss.
 - Existing drying beds are used to isolate any spills that could occur from the sludge belt press.

- The biosolids are in transit (via dump truck) from the generating facility to the land application site for approximately 15 minutes. The dump truck has fully enclosed sides and a hydraulic operated cover to ensure that the biosolids stay contained while in transportation. The truck loading site is monitored and cleaned daily.
- The board owns a 2000-gallon tank truck. The tank truck is only mostly used to transport sludge from the Fairmont WWTP to the J.E. Ham WWTP for further treatment before sludge dewatering. The tank truck is inspected routinely and is only operated by a licensed operator when in use. The time in transit if used is approximately 10 minutes. The discharge outlet is double valved to ensure no sludge spillage occurs while in route.
- The facility has a remote alarm on the operations building and a fence that covers all surrounding borders for added security.

Signature of Plant Manager

Date


1-20-2022

**Storm Water Pollution Prevention Plan
J. E. Ham Wastewater Treatment Plant
NPDES# AL0020001**

Plant Information

Name – J. Earl Ham Wastewater Plant
NPDES – AL0020001
Address - 610 Old Sylacauga Highway
Sylacauga, Al 35150

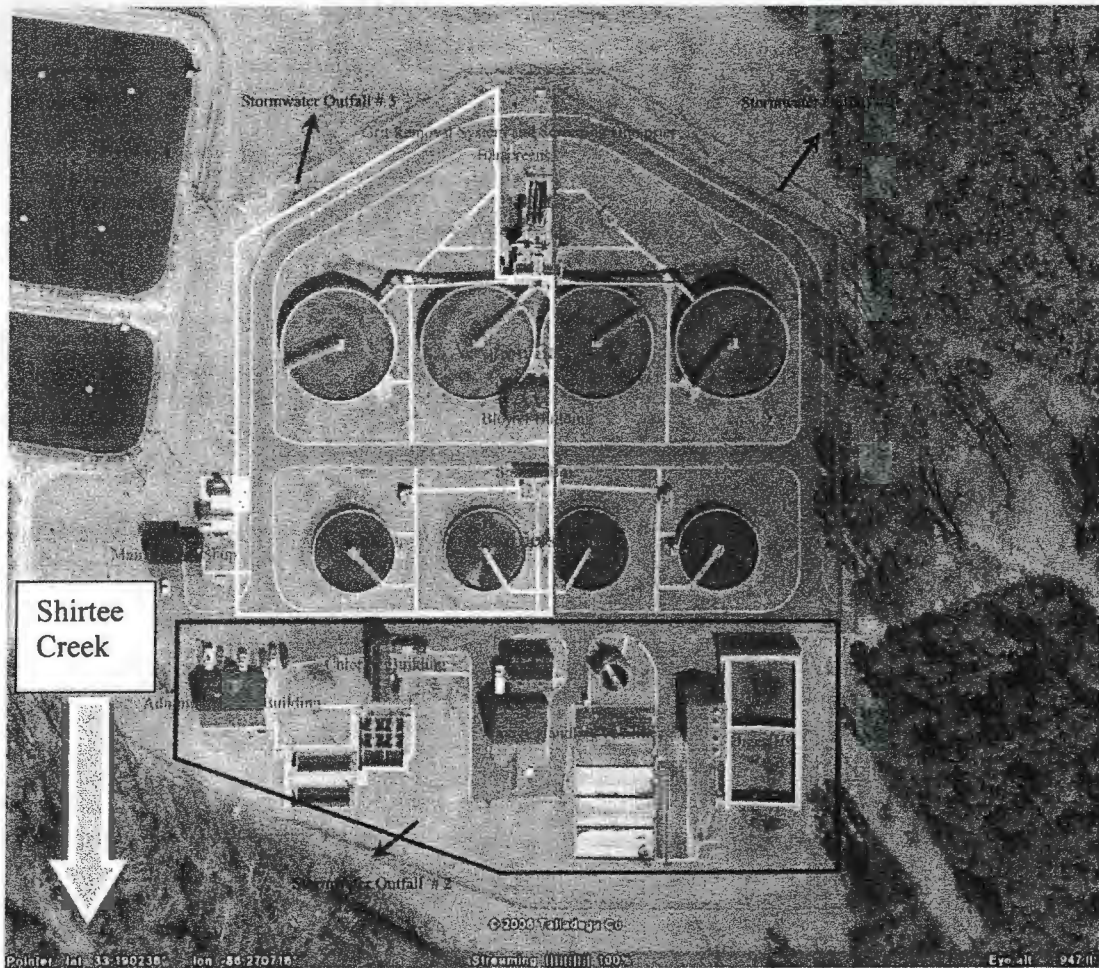
Responsible Official – Steven Morris (Plant Manager) 256-245-3721
BMP Committee- Consist of all operators

Receiving Stream – Shirtee Creek

Storm Water Test- As required by permit we sample storm water runoff once a year at all three sample points and report with one of our monthly DMR's.

Exposed Significant Materials – There are no exposed significant materials. The drying beds are rarely used and all Bio solids are removed to an approved sludge disposal site which complies with EPA's 503 regulations. Paints and solvents used for maintenance are stored in the shop which drains back to the raw sewage pump station.

Site Drainage Map



Potential Pollution Sources	Risk Level High – Medium - Low	Measures To Prevent A Spill
1. Bar Screen – If the bar screens should fail, sewerage could overflow the channel.	Medium	The Bar Screens shall be inspected daily. Should a bar screen fail the SCADA system will alert the operator on call by telephone.
2. Screening Dumpster	Low	The area drains back to the raw pump station
3. Grit Dumpster	Low	The area drains back to the raw pump station
4. Grit Basin – Catastrophic failure	Low	This is highly unlikely. The basins will be inspected monthly for cracks.
5. Inlets to Aeration Basin - Catastrophic failure	Low	This is highly unlikely scenario. The inlet structures will be inspected daily.
6. Blower Building – Potential oil leakage from the blowers.	Low	The blower building is inspected daily and oil leakage is controlled by an absorbent.
7. Splitter Box – Catastrophic failure	Low	This is highly unlikely. The splitter will be inspected monthly for cracks.
8. Clarifiers 1 – 4 Catastrophic failure	Low	This is highly unlikely. The basins will be inspected monthly for cracks.
9. Shop – The shop contains numerous oils and greases for the plant maintenance.	Low	This is highly unlikely. The building drains back to the sewer system.
10. Chlorine and SO2 Building – Potential Cl2 and S02 Leaks	Medium	This is highly unlikely. The building drains flow back to the head of the plant. Gas leak detectors are monitored continuously and sensors are checked weekly. Fire dept. maintains leak kits.
11. Belt press building – This building has Biosolids and polymers. The truck loading site is monitored and cleaned daily.	Low	This is highly unlikely. The building drains flow back to the head of the plant. Any dewatered sludge that falls around loading site is cleaned daily.
12. Digesters – Catastrophic failure.	Low	This is highly unlikely. The basins will be inspected monthly for cracks.

[illegible]

By Steven A. Natus

WACHSEN

1-20-2022

List all materials used, stored or produced on site that may potentially be exposed to precipitation

Description of any treatment the storm water receives.	
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[illegible][illegible]



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

MAY 19 2020

CERTIFIED MAIL 91 7199 9991 7034 1853 4883
RETURN RECEIPT REQUESTED

Mr. David Green, Water Quality Supervisor
Utilities Board of the City of Sylacauga
Post Office Box 207
Sylacauga, AL 35150

RE: Notice of Violation
NPDES Permit No. AL0020001
J. Earl Ham WWTP
Talladega County, Alabama

Dear Mr. Green:

The Department has completed a comprehensive evaluation of the J. Earl Ham WWTP in an effort to determine its compliance with applicable rules and provisions of the National Pollutant Discharge Elimination System (NPDES), ADEM Admin Code r. 335-6-6, and NPDES Permit No. AL0020001. This evaluation is based on all available inspection and sampling data, discharge monitoring reports (DMRs), and other self-reported compliance information for the period between May 2018 and May 2020. The Department observed the following violations:

Permit condition I.A requires that discharges be limited and monitored as specified in the Permit. The DMRs for the monitoring periods listed below indicate that discharges from Outfall 001 did not comply with permit limitations for E. coli, Chronic Ceriodaphnia Toxicity, and Chronic Pimephales Toxicity, Total Suspended Solids (TSS), and Five-Day Carbonaceous Biochemical Oxygen Demand (CBOD₅) and Oil and Grease from Outfall 003S.

<u>Monitoring Period</u>	<u>Outfall</u>	<u>Parameter</u>	<u>Average, Max, Min</u>	<u>Unit</u>	<u>Limit</u>	<u>Reported Value</u>
July 2018	0013	E. coli	Monthly Avg.	col/100 mL	126	247
July 2018	0013	E. coli	Daily Max.	col/100 mL	487	2420
October 2019	001T	Toxicity, <i>Ceriodaphnia</i> Chronic	Single Sample	Pass (0)/Fail (1)	0	1
October 2019	001T	Toxicity, <i>Pimephales</i> Chronic	Single Sample	Pass (0)/Fail (1)	0	1
January 2019 – December 2019	003S	Oil and Grease	Daily Max.	mg/L	15.0	29.9
January 2020	0014	TSS	Weekly Avg.	lbs/day	1801	3305
January 2020	0014	CBOD ₅	Weekly Avg.	lbs/day	420	562
February 2020	0014	CBOD ₅	Monthly Avg.	lbs/day	280	296



Permit Condition IV.B. states toxicity tests shall be conducted for the duration of this permit in the month of October. Should results from the Annual Toxicity test indicate that Outfall 0012, 0013, or 0014 exhibits chronic toxicity, then the Permittee must conduct the follow-up testing described in Part IV.B.4.a.

The DMR submitted to the Department for the October 2019 toxicity test indicates that the Permittee failed both the *Chronic Ceriodaphnia* Toxicity and *Chronic Pimephales* Toxicity. As required by Permit Condition IV.B.4.a, the Permittee performed two additional valid toxicity tests. The analytical results for the additional toxicity tests indicate that the facility failed the first retest (*Chronic Pimephales*) performed on November 12, 2019; however, passed the November 19, 2019 and the December 3, 2019 retests.

Part IV.B.2.d of the Permit states that the Permittee may be required to conduct testing in the months of February, May, August, and November if toxicity tests exhibit chronic toxicity. Due to the failure of consecutive toxicity tests, the Department is requiring four additional quarterly toxicity tests which be performed during the above noted months. If toxicity is indicated, the accelerated testing should also be conducted as required in the Permit. The Department will further evaluate this issue based upon the test results.

Ala. Code §22-22-9(i) (3) (2006 Rplc. Vol.) requires that a permit be obtained prior to discharging any new or increased pollution into any water of the state. The sanitary sewer overflows (SSOs) listed in Attachment 1 which were reported to the Department indicate that wastewater, in form of SSOs, was discharged without a permit.

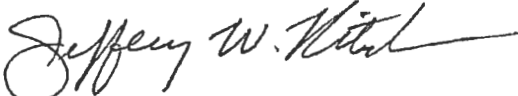
This notice of violation is made pursuant to Ala. Code §22-22-9(e) (2006 Rplc. Vol.). An Engineering Report prepared by an engineer registered and authorized to practice in the State of Alabama describing the steps that have been or will be taken to correct these violations, describing the cause and/or investigation results of the failed toxicity test for the October 2019 toxicity test and the November 12, 2019 toxicity retest, and the Permittee's plans to reduce inflow and infiltration (I&I) in the collection system must be submitted to the Department such that it is received within 60 days from the date of receipt of this notice. If applicable, the Engineering Report should also include a proposed schedule of compliance in which the Permittee will be in compliance with the Permit. Unless waived by the Department, the engineering report must include all available information regarding capital investments, one-time nondepreciable expenditures, and avoided annual recurring costs resulting from delayed compliance. Examples of costs that may have been avoided or delayed include, but are not limited to: monitoring and reporting costs, permitting costs, design costs, capital improvement or repair costs, and operating and maintenance expenses. The information that is provided should be related only to those portions of the costs which would be required for compliance. Please note all information submitted in response to this notice of violations will become a part of the public record, unless there is a satisfactory showing of confidentiality pursuant to ADEM Admin. Code r. 335-1-I-.06(2). This submittal must be mailed or delivered to Ms. Shanda Torbert at the Montgomery address listed above and must arrive at the Department's Montgomery Office by the required submittal date. Failure to submit the document(s) required by this notice is a violation of Ala. Code §22-22-9(c) (2006 Rplc. Vol.) and ADEM Admin. Code r. 335-6-6-.12(h) for which civil penalties or criminal fines may be imposed.

Notice of Violation
NPDES Permit No. AL0020001
Page 3 of 3

The Department encourages you to voluntarily consider pollution prevention strategies to resolve these present and prevent potential future violations.

If you have questions regarding this matter, please contact Ms. Shanda Torbert either by email at storbert@adem.alabama.gov or by phone at (334) 271-7800.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeffery W. Kitchens", with a long horizontal flourish extending to the right.

Jeffery W. Kitchens, Chief
Water Division

File: ENOV/11922

Enclosure: Attachment 1

Pc: Ms. Shanda Torbert/ADEM

Attachment 1: Sanitary Sewer Overflow Report

Facility Name: J. Earl Hamm WWTP Permit Number: AL0020001
Timeline of Reports: May 2018 through May 2020

County: Talladega

Major Municipal

Overflow Date	24 Hr. Notification	Date of Report Received	Volume of SSO (gal.)	Length of SSO	SSO Location	Destination of SSO	Cause	Corrective Actions Taken	Notification
12/28/2018	12/28/2018	12/28/2018	<1,000	4 hours	Manhole #307 on West Fort Williams	Ground absorbed and Drainage Ditch	Grease and heavy rain event.	The section of sewer main that includes that manhole has been added to our sewer replacement program. We have also added it to our routine cleaning cycle to help eliminate any SSO's until we can get that section replaced.	Co. Health Dept. and Placement of signs
1/4/2019	1/4/2019	1/4/2019	<1,000	4 hrs. 15 mins.	Industrial Park Lift Station	Ground absorbed and Drainage Ditch	Inflow and Infiltration. Our area has received 5.8 inches of rainfall over the last week.	Once the flow subsides we are planning on trying to identify any service mains that are contributing to the inflow.	Co. Health Dept. and Placement of signs
1/4/2019	1/4/2019	1/7/2019	1,000 < gallons ≤ 10,000	25 hrs. 30 mins.	Lift Station located on Hickman Quarry Road	Crooked Creek	The ground was already saturated and we received heavy rainfall last night.	Once the flow subsides we are planning on trying to identify any tributary mains that are contributing infiltration and inflow.	Co. Health Dept. and Placement of signs
1/4/2019	1/4/2019	1/7/2019	1,000 < gallons ≤ 10,000	19 hrs. 40 mins.	Manhole 121 off of Saint Johns Street	Drainage Ditch and Darby Branch	Inflow and Infiltration. Our area has received 5.8 inches of rainfall over the last week.	Once the inflow subsides we are planning to identify any tributary mains that are contributing to inflow problems.	Co. Health Dept. and Placement of signs
1/4/2019	1/4/2019	1/7/2019	1,000 < gallons ≤ 10,000	20 hours	Manhole #307 on West Fort Williams	Ground absorbed and Drainage Ditch	Inflow and Infiltration. Our area received 5.8 inches of rainfall over the last week. The ground was saturated and we received heavy rainfall last night	The section of sewer main that includes that manhole has been added to our sewer replacement program. We have also added it to our routine cleaning cycle to help eliminate any SSO's until we can get that section replaced	Co. Health Dept. and Placement of signs

Overflow Date	24 Hr. Notification	Date of Report Received	Volume of SSO (gal.)	Length of SSO	SSO Location	Destination of SSO	Cause	Corrective Actions Taken	Notification
1/24/2019	1/24/2019	1/25/2019	1,000 < gallons ≤ 10,000	12 hrs. 30 mins.	Lift Station located on Hickman Quarry Road	Crooked Creek	Inflow and Infiltration. The ground is very saturated and we received 2.86 inches of heavy rainfall over the last 24 hours. We had a power failure and the backup generator failed to initially start.	We are going to try to identify any tributary mains that are contributing to the infiltration and inflow. We are going to PM the generator more often.	Co. Health Dept. and Placement of signs
1/14/2020	1/14/2020	1/15/2020	1,000 < gallons ≤ 10,000	10 hrs. 55 mins.	Lift Station located on Hickman Quarry Road	Crooked Creek	Inflow and infiltration. Our area has received over 3 inches of rainfall last 48 hours.	We are going to try and identify any mains that contribute to the infiltration and inflow during heavy rainfall events like we experienced during the last 48 hours.	Co. Health Dept. and Placement of signs
1/14/2020	1/14/2020	1/15/2020	<1,000	3 hrs. 30 mins.	Manhole #307 on West Fort Williams	Drainage Ditch and Darby Branch	Inflow and Infiltration. Our area has received almost 4 inches of rainfall in the last 48 hours.	We are going to try and identify any mains that contribute to the infiltration and inflow during heavy rainfall events like we experienced during the last 48 hours.	Co. Health Dept. and Placement of signs
1/14/2020	1/14/2020	1/15/2020	<1,000	3 hrs. 15 mins.	Cleanout at 1102 West Park Street	Drainage Ditch	Inflow and Infiltration. Our area has received over 4 inches of rainfall in the last 48 hours.	We are going to schedule a video of the sewer main to try and identify any restrictions that could contribute to flow restriction during any high flow event like we experienced during the heavy rainfall.	Co. Health Dept. and Placement of signs

Overflow Date	24 Hr. Notification	Date of Report Received	Volume of SSO (gal.)	Length of SSO	SSO Location	Destination of SSO	Cause	Corrective Actions Taken	Notification
2/6/2020	2/6/2020	2/7/2020	1,000 < gallons ≤ 10,000	4 hours	Lift Station located on Hickman Quarry Road	Crooked Creek	We had a pump failure with one of our three pumps. This caused us to struggle during the heavy rainfall event that we were experiencing. Our area has received 4 inches of rainfall in the last 12 hours.	We have a maintenance program in place to minimize any downtime with our equipment but this failure was caused from a power surge at the lift station that tripped one of our three pumps. This caused us to struggle to catch up during the heavy rainfall event. We will continue to try and identify any mains that contribute Inflow and Infiltration to the lift station during heavy rainfall events like we experienced.	Co. Health Dept. and Placement of signs
2/11/2020	2/11/2020	2/15/2020	10,000 < gallons ≤ 25,000	81 hours 30 mins.	Lift Station located on Hickman Quarry Road	Crooked Creek	Inflow and Infiltration. Our area has received 6.5 inches of rainfall in the last 36 hours. Our system had not fully recovered from the previous rains within the last week.	Once the flows subside we will try and identify any contributing sewer lines that affect the system during heavy rainfall events like we experienced.	Co. Health Dept. and Placement of signs
2/11/2020	2/11/2020	2/15/2020	1,000 < gallons ≤ 10,000	79 hours	Manhole #308 off of Hickory Street behind 117 Legion Ave	Darby Branch	Inflow and Infiltration. Our area has received 6.5 inches of rainfall in the last 36 hours. Our system had not fully recovered from the previous rains within the last week.	Once the flows subside we will try and identify any contributing sewer lines that affect the system during heavy rainfall events like we experienced. We will also video the main sewer trunk line to see if we have any deficiencies that is causing issues.	Co. Health Dept. and Placement of signs

Overflow Date	24 Hr. Notification	Date of Report Received	Volume of SSO (gal.)	Length of SSO	SSO Location	Destination of SSO	Cause	Corrective Actions Taken	Notification
2/11/2020	2/11/2020	2/14/2020	1,000 < gallons ≤ 10,000	73 hours 55 mins.	Manhole #329 located off of Earl Ham Drive.	Shirtee Creek and Drainage Ditch	Inflow and Infiltration. Our area has received 6.5 inches of rainfall in the last 36 hours. Our system had not fully recovered from the previous rains within the last week.	Once the flows subside we will try and identify any contributing sewer lines that affect the system during heavy rainfall events like we experienced. We will also video the main sewer trunk line to see if we have any deficiencies that is causing issues.	Co. Health Dept. and Placement of signs
2/11/2020	2/11/2020	2/14/2020	<1,000	55 hours 30 mins.	Cleanout at 1102 West Park Street	Drainage Ditch and Darby Branch	Inflow and Infiltration. Our area has received 6.5 inches of rainfall in the last 36 hours. Our system had not fully recovered from the previous rains within the last week.	Once the flows subside we will try and identify any contributing sewer lines that affect the system during heavy rainfall events like we experienced. We will also video the main sewer trunk line to see if we have any deficiencies that is causing issues.	Co. Health Dept. and Placement of signs
2/13/2020	2/13/2020	2/14/2020	<1,000	4 hours	Manhole #374-A located on South Davis	Drainage Ditch and Darby Branch	Inflow and Infiltration. Our area has received 6.5 in the last 36 hours. Our system had not fully recovered from the previous rains within the last week.	Once the flows subside we will try and identify any contributing sewer lines that affect the system during heavy rainfall events like we experiencing. We will also video the main sewer trunk line to see if we have any deficiencies that is causing issues.	Co. Health Dept. and Placement of signs
2/20/2020	2/20/2020	2/22/2020	1,000 < gallons ≤ 10,000	31 hours	Lift Station located on Hickman Quarry Road	Crooked Creek	Inflow and Infiltration. Our area has received an additional 2.5 inches of rainfall in the last 24 hours and we have totaled 12.75 inches so far for the month of February.	Once the flows subside we will try and identify any mains or services that are contributing inflow during high flow events like we were experiencing. We will also make point repairs as needed.	Co. Health Dept. and Placement of signs

Overflow Date	24 Hr. Notification	Date of Report Received	Volume of SSO (gal.)	Length of SSO	SSO Location	Destination of SSO	Cause	Corrective Actions Taken	Notification
2/20/2020	2/20/2020	2/22/2020	1,000 < gallons ≤ 10,000	27 hrs. 30 mins.	Manhole #329 located off of Earl Ham Drive	Shirtee Creek	Inflow and Infiltration. Our area has received an additional 2.5 inches of rainfall in the last 24 hours. We have totaled 12.75 inches of rainfall for the month of February so far.	Once the flows subside we will try and identify any mains or services that are contributing inflow during high flow events like we were experiencing. We will also make point repairs as needed.	Co. Health Dept. and Placement of signs
2/20/2020	2/20/2020	2/22/2020	1,000 < gallons ≤ 10,000	21 hrs. 21 mins.	Manhole #307 on West Fort Williams	Darby Branch	Inflow and Infiltration. Our area has received an additional 2.5 inches of rainfall in the last 24 hours. We have totaled 12.75 inches of rainfall for the month of February so far.	Once the flows subside we will try and identify any mains or services that are contributing inflow during high flow events like we were experiencing. We will also make point repairs as needed.	Co. Health Dept. and Placement of signs
3/4/2020	3/4/2020	3/6/2020	1,000 < gallons ≤ 10,000	48 hrs. 30 mins.	Manhole #307 located on West Fort Williams	Darby Branch	Inflow and Infiltration. Our area has received 4.79 inches of rainfall in the last 36 hrs. and 28.43 inches since the beginning of the year.	Once the flows subside we will clean and video the main sewer line to help identify any deficiencies. Our plans are to make a modification to the sewer trunk line to improve the sewer flow during heavy rains like we have experienced this year.	Co. Health Dept. and Placement of signs
3/5/2020	3/5/2020	3/6/2020	<1,000	2 hours	Cleanout located on Pine Street	Drainage Ditch	Inflow and Infiltration. We also had a partial grease blockage that restricted the flow on the main. Our area received 4.79 inches of rainfall in the last 36 hours.	Once the flows subside we will clean and video the main sewer line to help identify any deficiencies.	Co. Health Dept. and Placement of signs

Overflow Date	24 Hr. Notification	Date of Report Received	Volume of SSO (gal.)	Length of SSO	SSO Location	Destination of SSO	Cause	Corrective Actions Taken	Notification
4/20/2020	4/20/2020	4/20/2020	<1,000	8 hours	Manhole #307 located on West Fort Williams	Darby Branch	Inflow and Infiltration. Our area has received 4.6 inches of rainfall in the last 24 hrs.	We have identified a section of the main trunk line that we are planning on replacing once we get some drier weather. This should help with the inflow and infiltration that the main is receiving.	Co. Health Dept. and Placement of signs



July 6, 2020

Ms. Shanda Torbert
1400 Coliseum Blvd
Montgomery, Alabama 36130

**Subject: Notice of Violation – J. Earl Ham WWTP
NPDES Permit # AL0020001
Response Letter
Talladega County, Alabama**

Dear Ms. Torbert:

The Utilities Board of The City of Sylacauga (The Board) received your letter dated May 19, 2020 for the J. Earl Ham WWTP in Talladega County, Alabama. As you are aware, several changes have occurred within the Board operations over the past few years. From this point several new protocols, operational changes, and maintenance items have been modified and addressed. The Board has also been in the planning process for some additional treatment plant updates, continued work on their inflow and infiltration program, and updates to the overall sanitary sewer system. These infrastructure improvements are very important to The Board and its citizens.

Additionally with the COVID-19 pandemic, upgrades and programs have been delayed and are taking longer to perform than normal.

Below you will find a brief description of the items listed within your letter and a response / report for each of those items. The data utilized to prepare these responses was derived from conversations with employees, files, records, reports, cost estimates, and various other sources.

Letter Item No. 1 (Chart Line 1 and 2): July 2018 – Parameter E – Coli – Excursion – Monthly Average / Daily Max

Response No. 1: During this timeframe old chemical feed equipment had failed and was replaced. The new equipment had to be calibrated with the correct curve and adjustment to automatically adjust the feed rate based on flow. An automatic analyzer was installed as a secondary review to assist with adjustment in dosing and to help prevent future issues. These improvements were at a cost of approximately \$25,000. After this correction no further excursions of this type have occurred.



Letter Item No. 2 (Chart Line 3 and 4): October 2019 – Parameter Toxicity – Excursion – Fail on Ceriodaphnia Chronic / Pimephales Chronic

Response No. 2: During this timeframe the air blowers were encountering issues. It was originally believed that an industrial discharger may have discharged some stronger wastes than normally encountered. It is anticipated that this also may have been a product of laboratory miscalculations. The Board is contemplating on split sampling to verify that they are obtaining good data back from the laboratory. Furthermore, a new blower system and diffuser upgrades are under design and will be let for bid within the next two months. The project is anticipated at a cost of \$1,300,000. This project is to be completed by May 2021.

Letter Item No. 3 (Chart Line 5): January 2019 – December 2019 – Parameter Oil / Grease – Excursion – Daily Maximum

Response No. 3: During this timeframe excessive rains were happening almost every day. This excursion is anticipated to be either laboratory error or possibly something caught on the outfall weir. No other visual or tested parameters show any additional information supporting this excursion. New protocol for inspection and reviews have been passed on to the operators to ensure the outfalls are kept clean and more routinely visually inspected.

Letter Item No. 4 (Chart Line 6): January 2020 – Parameter TSS – Excursion – Weekly Average

Response No. 4: During this timeframe excessive rains were happening almost every day. This excursion is anticipated to be caused by the excessive flow at the WWTP while a clarifier tube baffle was partially clogged. Upon this excursion one basin was lowered and clarifier tube baffle was cleaned and cleared of the clog. Since this repair, no further excursions of this type have occurred.

Letter Item No. 5 (Chart Line 7 and 8): January 2020 & February 2020 – Parameter CBOD₅ – Excursion – Weekly / Monthly Average

Response No. 5: During this timeframe excessive rains were happening almost every day. This excursion is anticipated to be caused by the excessive flow at the WWTP with limited air able to reach the diffusers. The Board plans on continuing their I & I reduction program and will be installing a new blower system, piping upgrades, and diffuser upgrades. The new blower system and diffuser upgrades are under design and will be let for bid within the next two months. The project is anticipated at a cost of \$1,300,000. This project is to be completed by May 2021.



Letter Item No. 6 (Page 2, Paragraphs 1-3): Toxicity Testing

Response No. 6: As the Board understands the letter received and has asked for clarification on the toxicity testing required. It is understood that all testing, times, etc. shall follow the existing permit as issued. However, the Board is contemplating to choose split sampling between two labs to ensure the best data available is obtained.

Letter Item No. 7 (Page 2, Paragraphs 4): SSO's

Response No. 7: The Board has undertaken an extensive inflow and infiltration reduction program which began around 2003. This includes main replacement and manhole replacement and other means and methods as necessary. This program is still ongoing today and will be a continuous program as funds allow.

Below is a list of the projects already undertaken with their associated cost:

YEAR	PROJECT NAME	WORK PERFORMED	COST
2003	Motes Road & Valleyview	Replaced Clay Main With PVC	\$362,340.00
2006	Noble Park to Oldfield Road	Replaced Clay Main With PVC	\$253,530.00
2010	Hickory Street	Replaced Clay Main With PVC	\$48,340.00
2011	Mobile Avenue to Spring Street	Replaced Clay Main With PVC	\$49,000.00
2013	Seminole Street	Replaced Clay Main With PVC	\$29,933.55
2015	Oldfield Road to J. Earl Ham WWTP	Replaced Clay Main With PVC	\$72,202.40
2015	North Industrial Avenue	Replaced Clay Main With PVC	\$25,958.80
2015	US Highway 21 to Overhill Road	Replaced Clay Main With PVC	\$86,179.80
2015	Woodlawn Creek Crossing	Replaced Clay Main With PVC	\$15,000.00
2017	J. Earl Ham WWTP to Walmart	Replaced Clay Main With PVC	\$546,134.70
2018	Spring Street & South Douglas Avenue	Replaced Clay Main With PVC	\$6,320.84
2019	West 9th Street	Replaced Clay Main With PVC	\$8,000.00
2019	Darby Branch	Replaced Clay Main With PVC	\$34,375.56
2020	Hill Road	Replaced Clay Main With PVC	\$45,091.84

\$1,582,407.49



With the above work performed the Board is seeing the reduction in flows. However, as shown on the attached SSO report it is evident that the excessive rainfalls being received within the drainage basin of the J Earl Ham WWTP have impacts on the overall collection system.

As noted in the SSO reports, television inspection and cleaning, of the mains in the areas of SSO's is underway. This work has shown that root intrusion has been causing a bulk majority of the blockages and back-ups during these heavy rainfall events in some of the areas. These roots are being removed and lines restored to full capacity. Once the above is completed smoke testing will be performed within these areas. Items identified during this process will then be repaired.

Once these issues are addressed the system evaluation will begin and normal I & I reduction work will proceed. Some of the future identified projects are listed below with their anticipated cost:

PROJECT NAME	WORK PERFORMED	COST
Walco / St John	Replace Clay Main With PVC	\$540,000.00
Walco / Alabama Ave	Replace Clay Main With PVC.	\$250,000.00
Ne Mill Village Area	Replace Clay Main With PVC	\$550,700.00
South Central Mill Village Area	Replace Clay Main With PVC	\$399,875.00
Central Mill Village Area	Replace Clay Main With PVC	\$412,925.00
Darby Branch Ph 2	Replace Clay Main With PVC	\$203,180.00
Darby Branch Ph 3	Replace Clay Main With PVC	\$170,647.00
Darby Branch Ph 4	Replace Clay Main With PVC	\$167,578.00
		\$2,694,905.00

As indicated with in the data provided in the NOV, The Board follows the eSSO reporting guidelines set forth by ADEM which include:

1. Once an SSO is observed, the date/time the overflow began is immediately recorded.
2. Then immediately a notification is placed to the public.
3. Then immediately the SSO is reported via the eSSO reporting system, which also includes notification to the County Health Dept.
4. Once the overflow is halted, the eSSO report is revised to include the date/time of stop of overflow and amount of spill.
5. Then proper site remediation measures and disinfection of the area is performed.
6. Copies are then printed of confirmation and kept at the WWTP.
7. Then personnel double check notifications / paperwork.



These procedures are intended to keep The Board in compliance with the immediate notification requirement of the Permit.

As you can see from the above progress, reporting, form 421's, and other items carefully and willfully provided and performed by the Board compliance is a top priority. The Board has worked diligently to make the necessary repairs to their systems as the problems arise. The Board understands that portions of their system are in excess of 100+ years old and require maintenance and replacement. The purpose of the methodology of the inflow and infiltration reduction program is to alleviate the highest water contributors as quickly as possible while using the funding available wisely without creating an undue burden on the rate payers.

We hope this report and information will satisfy your request and explain the issues listed in the NOV. If you have any questions or need any additional information, please give me a call at (205) 733-9696.

Sincerely,
InSite Engineering LLC

A handwritten signature in black ink, appearing to read "J. Cassidy", is written over a horizontal line.

James M. Cassidy, P.E.

Copy: Mitch Miller, PE - SUB
Mike McGinnis - SUB
David Green - SUB



**UTILITIES BOARD
City of Sylacauga**

301 N. Elm Ave.
P. O. Box 207
Sylacauga, AL 35150
(256) 249-8501

**UTILITIES BOARD
OPERATIONS CENTER**
1414 Edwards St.
Sylacauga, AL 35150
(256) 249-0372

Tuesday, November 14, 2023

Attn: Shanda Torbert
Alabama Department of Environmental Management
Water Division – NPDES Permit Branch
P.O. Box 301463
Montgomery, Alabama 36130-1463

RE: Permit Renewal J. Earl Ham WWTP AL0020001 (Sylacauga)

Dear Ms. Torbert,

We wish to continue with a tiered based permit. Please find the following enclosed materials for the renewal of the J. Earl Ham WWTP AL0020001 permit:

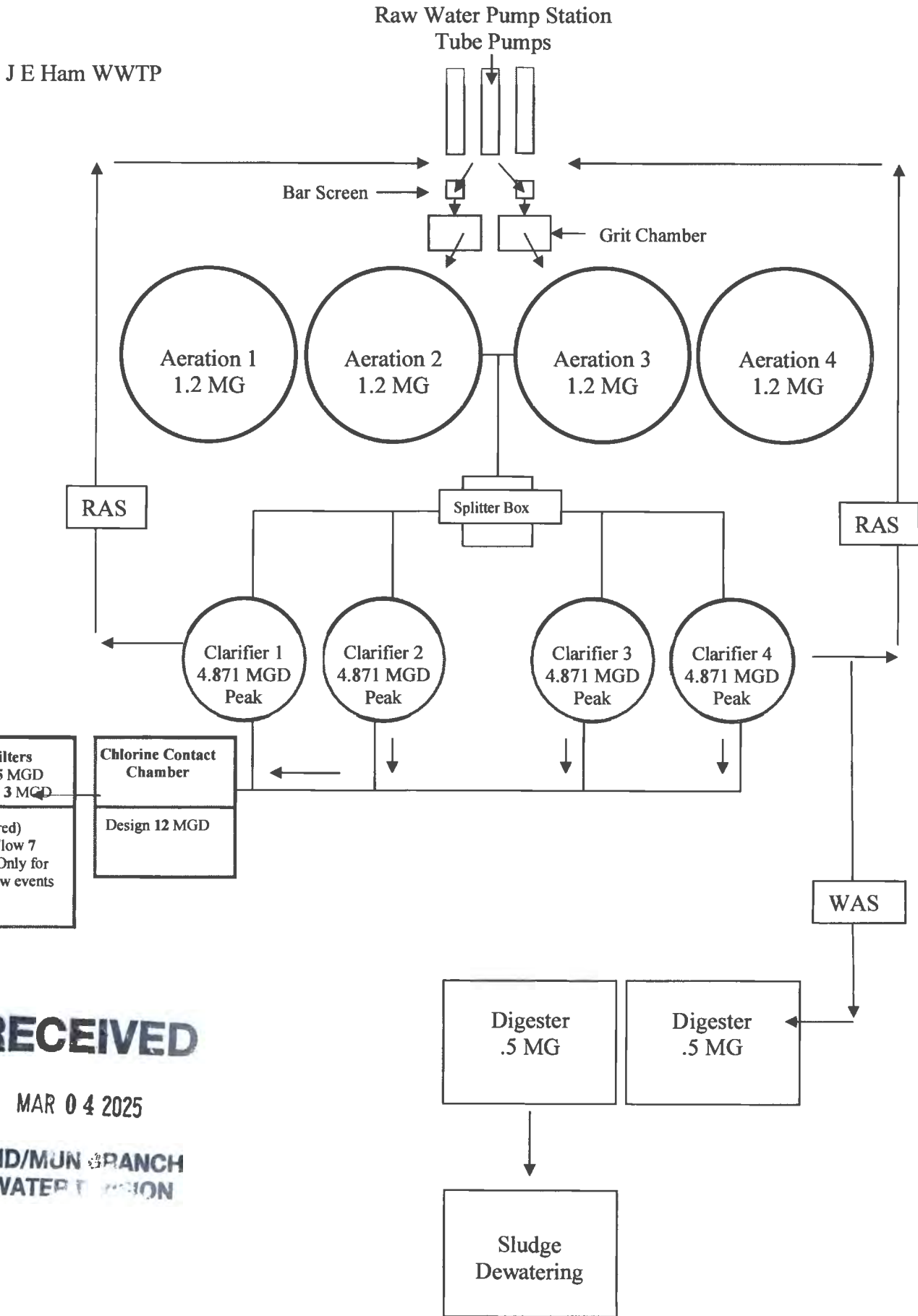
- NPDES Form 2A and 2F
- ADEM form 188
- EPA Form 2S
- Flow Schematic
- Topo Map
- A check for the renewal fee, biomonitoring and toxicity limits and seasonal water quality model.

Should there be any questions or deficiencies please contact me at 256-401-2536 or dgreen@sylacauga.net.

David Green

A handwritten signature in black ink, appearing to read "David Green".

Water Quality Supervisor
Utilities Board of the City of Sylacauga
Office 256-401-2536
Cell 256-267-0002



RECEIVED

MAR 04 2025

IND/MUN BRANCH
WATER TREATMENT

**Clarifier State Point Analysis**

Project: Sylacauga, AL

Date: 12-Feb-2025
Designer: SGR**Characteristics per Clarifier**

	Average	Max Month	Peak hour
MLSS, g/l	3.00	3.00	3.00
Feed Flow, MGD	2.16	3.24	4.87
RAS Flow, MGD	1.73	2.16	2.16
Number of Clarifiers	1	1	1
Clarifier Diameter, ft	80	80	80
Total Clarifier Area, ft ²	5027	5027	5027

Loading Rates Curve

	Average	Max Month	Peak hour
Overflow Rate, gal/ft ² /day	430	645	969
Underflow Rate, gal/ft ² /day	344	430	430
Underflow TSS, g/l	7	8	10
Surface Loading Rate, lb/ft ² /day	19.34	26.85	34.95
State Point Flux, lb/ft ² /day	10.74	16.11	24.21

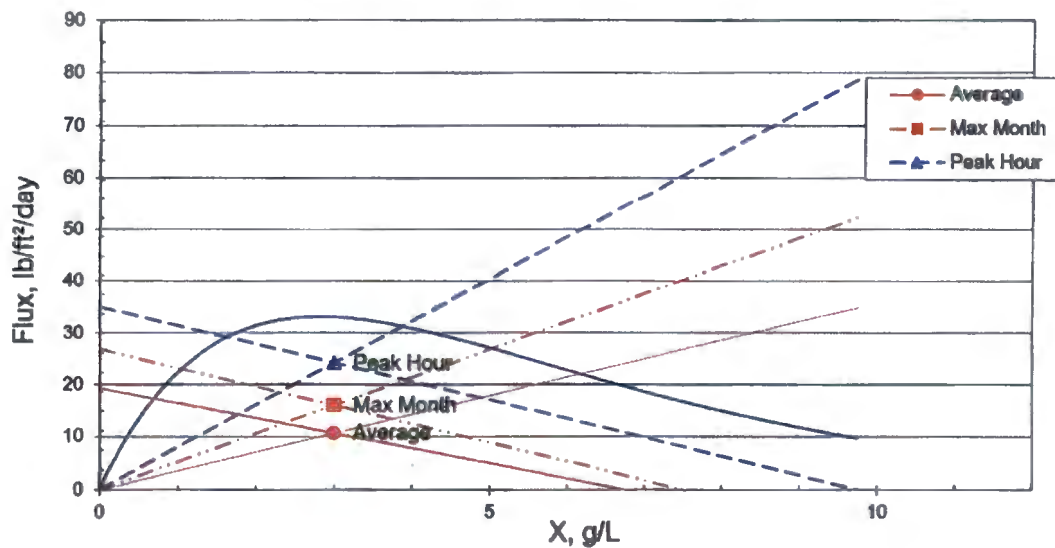
Gravity Flux Curve

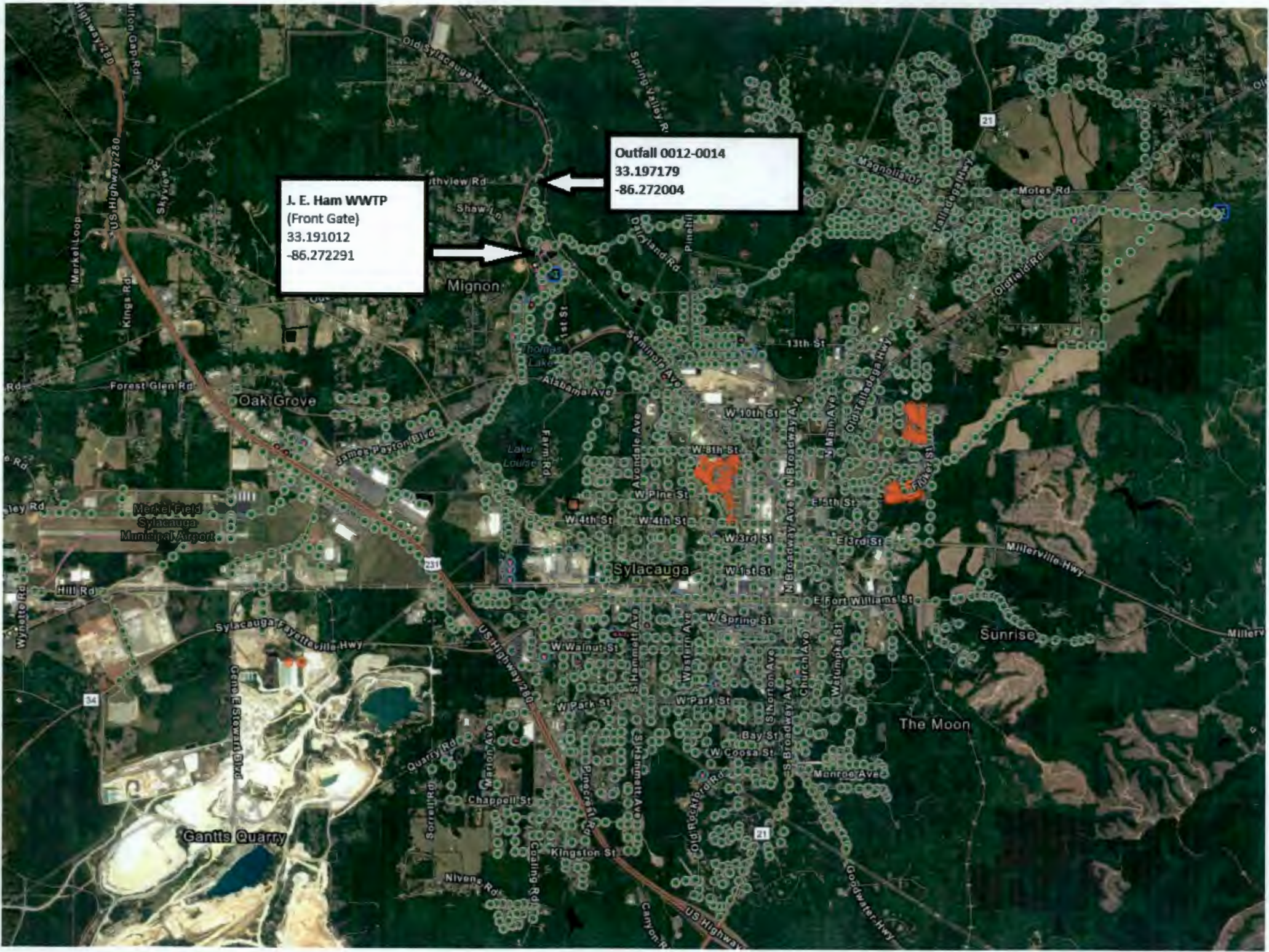
$$G = (V_0)(X)(e^{-kX})$$

V ₀	511.40 ft/day
k	0.35492 1/g
X increment	0.05 g/l
SVI	120 ml/gm

RECEIVED


FEB 12 2025

**IND/MUN BRANCH
WATER DIVISION****State Point Analysis**



J. E. Ham WWTP
(Front Gate)
33.191012
-86.272291

Outfall 0012-0014
33.197179
-86.272004

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Form 2S NPDES		U.S Environmental Protection Agency Application for NPDES Permit for Sewage Sludge Management NEW AND EXISTING TREATMENT WORKS TREATING DOMESTIC SEWAGE	
PRELIMINARY INFORMATION			
Does your facility currently have an effective NPDES permit or have you been directed by your NPDES permitting authority to submit a full Form 2S permit application?			
<input checked="" type="checkbox"/> Yes → Complete Part 2 of application package (begins p. 7). <input type="checkbox"/> No → Complete Part 1 of application package (below).			
PART 1		LIMITED BACKGROUND INFORMATION (40 CFR 122.21(c)(2)(ii))	
Complete this part only if you are a "sludge-only" facility (i.e., a facility that does not currently have, and is not applying for, an NPDES permit for a direct discharge to a surface body of water).			
PART 1, SECTION 1. FACILITY INFORMATION (40 CFR 122.21(c)(2)(ii)(A))			
Facility Information	1.1	Facility name	
		Mailing address (street or P.O. box)	
		City or town	State ZIP code
		Contact name (first and last)	Title Phone number Email address
		Location address (street, route number, or other specific identifier)	
		<input type="checkbox"/> Same as mailing address	
	1.2	Ownership Status	
		<input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input type="checkbox"/> Other public (specify) _____ <input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____	
PART 1, SECTION 2. APPLICANT INFORMATION (40 CFR 122.21(c)(2)(ii)(B))			
Applicant Information	2.1	Is applicant different from entity listed under Item 1.1 above?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 2.3 (Part 1, Section 2).		
	2.2	Applicant name	
		Applicant address (street or P.O. box)	
		City or town	State ZIP code
	2.3	Contact name (first and last)	
Title		Phone number Email address	
2.4	Is the applicant the facility's owner, operator, or both? (Check only one response.)		
	<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Both		
2.4	To which entity should the NPDES permitting authority send correspondence? (Check only one response.)		
	<input type="checkbox"/> Facility <input type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)		
PART 1, SECTION 3. SEWAGE SLUDGE AMOUNT (40 CFR 122.21(c)(2)(ii)(D))			
Sewage Sludge Amount	3.1	Provide the total dry metric tons per the latest 365-day period of sewage sludge generated, treated, used, and disposed of:	
		Practice	Dry Metric Tons per 365-Day Period
		Amount generated at the facility	
		Amount treated at the facility	
		Amount used (i.e., received from off site) at the facility	
		Amount disposed of at the facility	

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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)			
Other (specify)			

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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
		<input type="checkbox"/> Land application of bulk sewage <input type="checkbox"/> Land application of biosolids (bulk) <input type="checkbox"/> Land application of biosolids (bags) <input type="checkbox"/> Surface disposal in a landfill <input type="checkbox"/> Other surface disposal <input type="checkbox"/> Incineration		<input type="checkbox"/> Not applicable <input type="checkbox"/> Class A, Alternative 1 <input type="checkbox"/> Class A, Alternative 2 <input type="checkbox"/> Class A, Alternative 3 <input type="checkbox"/> Class A, Alternative 4 <input type="checkbox"/> Class A, Alternative 5 <input type="checkbox"/> Class A, Alternative 6 <input type="checkbox"/> Class B, Alternative 1 <input type="checkbox"/> Class B, Alternative 2 <input type="checkbox"/> Class B, Alternative 3 <input type="checkbox"/> Class B, Alternative 4 <input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Not applicable <input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2 <input type="checkbox"/> Option 3 <input type="checkbox"/> Option 4 <input type="checkbox"/> Option 5 <input type="checkbox"/> Option 6 <input type="checkbox"/> Option 7 <input type="checkbox"/> Option 8 <input type="checkbox"/> Option 9 <input type="checkbox"/> Option 10 <input type="checkbox"/> Option 11
5.2	For each of the use and disposal practices specified in Item 5.1, identify the treatment process(es) used at your facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge. (Check all that apply.)				
	<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and degritting) <input type="checkbox"/> Thickening (concentration) <input type="checkbox"/> Stabilization <input type="checkbox"/> Anaerobic digestion <input type="checkbox"/> Composting <input type="checkbox"/> Conditioning <input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization) <input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons) <input type="checkbox"/> Heat drying <input type="checkbox"/> Thermal reduction <input type="checkbox"/> Methane or biogas capture and recovery <input type="checkbox"/> Other (specify) _____				

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

Sewage Sludge Sent to Other Facilities	6.1	Does the sewage sludge from your facility meet the ceiling concentrations in Table 1 of 40 CFR 503.13, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), and one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8)?			
		<input type="checkbox"/> Yes → SKIP to Part 1, Section 8 (Certification). <input type="checkbox"/> No			
	6.2	Is sewage sludge from your facility provided to another facility for treatment, distribution, use, or disposal?			
		<input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 1, Section 7.			
	6.3	Receiving facility name			
	Mailing address (street or P.O. box)				
	City or town		State	ZIP code	
	Contact name (first and last)	Title	Phone number	Email address	
6.4	Which activities does the receiving facility provide? (Check all that apply.)				
	<input type="checkbox"/> Treatment or blending <input type="checkbox"/> Sale or give-away in bag or other container <input type="checkbox"/> Land application <input type="checkbox"/> Surface disposal <input type="checkbox"/> Incineration <input type="checkbox"/> Other (describe) <input type="checkbox"/> Composting				


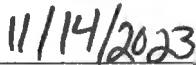
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PART 1, SECTION 7. USE AND DISPOSAL SITES (40 CFR 122.21(c)(2)(ii)(C))

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

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

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

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Checklist and Certification Statement Continued	8.2	Certification Statement <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>		
		Name (print or type first and last name)	Official title	Phone number
		David Green	Water Quality Supervisor	(256) 401-2536
		Signature	Date signed	
				

PART 1 APPLICANTS STOP HERE.

Submit completed application package to your NPDES permitting authority.

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PART 2		PERMIT APPLICATION INFORMATION (40 CFR 122.21(q))	
<p>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.</p> <p>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.</p>			
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 J. Earl Ham WWTP		
	Mailing address (street or P.O. box) Post Office Box 207		
	City or town Sylacauga	State AL	ZIP code 35150
	Phone number (256) 401-2536		
	Contact name (first and last) David Green	Title Water Quality Supervisor	Email address dgreen@sylacauga.net
	Location address (street, route number, or other specific identifier) 1414 Edwards Street		<input type="checkbox"/> Same as mailing address
	City or town Sylacauga	State AL	ZIP code 35150
	1.2 Is this facility a Class I sludge management facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	1.3 Facility Design Flow Rate	4.8 million gallons per day (mgd)	
	1.4 Total Population Served	15,800	
	1.5 Ownership Status		
	<input type="checkbox"/> Public—federal <input type="checkbox"/> Public—state <input checked="" type="checkbox"/> Other public (specify) <u>Municipal</u> <input type="checkbox"/> Private <input type="checkbox"/> Other (specify) _____		
	Applicant Information		
1.6 Is applicant different from entity listed under Item 1.1 above? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.8 (Part 2, Section 1).			
1.7 Applicant name			
Applicant mailing address (street or P.O. box)			
City or town	State	ZIP code	
Contact name (first and last)	Title	Phone number	
Email address			
1.8 Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Both			
1.9 To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input type="checkbox"/> Applicant <input checked="" type="checkbox"/> Facility and applicant (they are one and the same)			


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EPA Identification Number 100000152023		NPDES Permit Number AL0020001		Facility Name J. Earl Ham WWTP	
General Information Continued	1.17 cont.	Contractor 1		Contractor 2	
	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. <input type="checkbox"/> 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	0.00	EPA Method 6010	19.4 mg/kg
		Cadmium	0.94	EPA Method 6010	22.4 mg/kg
		Chromium	27.2	EPA Method 6010	36.5 mg/kg
		Copper	297	EPA Method 6010	131 mg/kg
		Lead	21.8	EPA Method 6010	26.4 mg/kg
		Mercury	0.00	EPA Method 6010	3.81 mg/kg
	Molybdenum	12.4	EPA Method 6010	15.3 mg/kg	
	Nickel	16.1	EPA Method 6010	21.4 mg/kg	
	Selenium	10.1	EPA Method 6010	16.6 mg/kg	
	Zinc	823	EPA Method 6010	112 mg/kg	
Checklist and Certification Statement 1.19 In Column 1 below, mark the sections of Form 2S, Part 2, that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing. Note that not all applicants are required to complete all sections or provide attachments. See Exhibit 2S-2 in the Instructions.					
Column 1			Column 2		
<input checked="" type="checkbox"/> Section 1 (General Information)			<input checked="" type="checkbox"/> w/ attachments		
<input checked="" type="checkbox"/> Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)			<input checked="" type="checkbox"/> w/ attachments		
<input checked="" type="checkbox"/> Section 3 (Land Application of Bulk Sewage Sludge)			<input checked="" type="checkbox"/> w/ attachments		
<input type="checkbox"/> Section 4 (Surface Disposal)			<input type="checkbox"/> w/ attachments		
<input type="checkbox"/> Section 5 (Incineration)			<input type="checkbox"/> w/ attachments		
1.20	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) David Green			Official title Water Quality Supervisor		
Signature 			Date signed 11/19/2023		
Telephone number (256) 401-2536					
Upon the request of the NPDES permitting authority, you must submit any other information the authority deems necessary to assess sewage sludge use or disposal practices at your facility and identify appropriate permitting requirements.					

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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
<input type="checkbox"/> Land application of bulk sewage	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Not applicable
<input checked="" type="checkbox"/> Land application of biosolids (bulk)	<input type="checkbox"/> Class A, Alternative 1	<input type="checkbox"/> Option 1
<input type="checkbox"/> Land application of biosolids (bags)	<input type="checkbox"/> Class A, Alternative 2	<input type="checkbox"/> Option 2
<input type="checkbox"/> Surface disposal in a landfill	<input type="checkbox"/> Class A, Alternative 3	<input type="checkbox"/> Option 3
<input type="checkbox"/> Other surface disposal	<input type="checkbox"/> Class A, Alternative 4	<input checked="" type="checkbox"/> Option 4
<input type="checkbox"/> Incineration	<input type="checkbox"/> Class A, Alternative 5	<input type="checkbox"/> Option 5
	<input type="checkbox"/> Class A, Alternative 6	<input type="checkbox"/> Option 6
	<input checked="" type="checkbox"/> Class B, Alternative 1	<input type="checkbox"/> Option 7
	<input type="checkbox"/> Class B, Alternative 2	<input type="checkbox"/> Option 8
	<input type="checkbox"/> Class B, Alternative 3	<input type="checkbox"/> Option 9
	<input type="checkbox"/> Class B, Alternative 4	<input type="checkbox"/> Option 10
	<input type="checkbox"/> Domestic septage, pH adjustment	<input type="checkbox"/> Option 11

2.9 Identify the treatment process(es) used at your facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge? (Check all that apply.)

<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering)	<input checked="" type="checkbox"/> Thickening (concentration)
<input type="checkbox"/> Stabilization	<input checked="" type="checkbox"/> Anaerobic digestion
<input type="checkbox"/> Composting	<input type="checkbox"/> Conditioning
<input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	<input checked="" type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
<input type="checkbox"/> Heat drying	<input type="checkbox"/> Thermal reduction
<input type="checkbox"/> Methane or biogas capture and recovery	

2.10 Describe any other sewage sludge treatment or blending activities not identified in Items 2.8 and 2.9 (Part 2, Section 2) above.

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

Fairmont WWTP sludge is brought to the J. Earl Ham WWTP and blended with influent for further treatment.

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.

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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
Location address (street, route number, or other specific identifier)		<input type="checkbox"/> Same as mailing address
City or town	State	ZIP code

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

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

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

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

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.23	Which treatment process(es) are used at the receiving facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge from your facility? (Check all that apply.)			
		<input type="checkbox"/> Preliminary operations (e.g., sludge grinding and dewatering)	<input type="checkbox"/> Thickening (concentration)		
		<input type="checkbox"/> Stabilization	<input type="checkbox"/> Anaerobic digestion		
		<input type="checkbox"/> Composting	<input type="checkbox"/> Conditioning		
		<input type="checkbox"/> Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	<input type="checkbox"/> Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)		
		<input type="checkbox"/> Heat drying	<input type="checkbox"/> Thermal reduction		
		<input type="checkbox"/> Methane or biogas capture and recovery	<input type="checkbox"/> Other (specify) _____		
	2.24	Attach a copy of any information you provide the receiving facility to comply with the "notice and necessary information" requirement of 40 CFR 503.12(g). <input type="checkbox"/> Check here to indicate that you have attached material.			
	2.25	Does the receiving facility place sewage sludge from your facility in a bag or other container for sale or give-away for application to the land? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.			
	2.26	Attach a copy of all labels or notices that accompany the product being sold or given away. <input type="checkbox"/> Check here to indicate that you have attached material.			
		<input type="checkbox"/> Check here once you have completed Items 2.17 to 2.26 (Part 2, Section 2), then → SKIP to Item 2.32 (Part 2, Section 2) below.			
	Land Application of Bulk Sewage Sludge				
	2.27	Is sewage sludge from your facility applied to the land? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.			
	2.28	Total dry metric tons per 385-day period of sewage sludge applied to all land application sites:	430.41		
	2.29	Did you identify all land application sites in Part 2, Section 3 of this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → Submit a copy of the land application plan with your application.			
2.30	Are any land application sites located in states other than the state where you generate sewage sludge or derive a material from sewage sludge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.32 (Part 2, Section 2) below.				
2.31	Describe how you notify the NPDES permitting authority for the states where the land application sites are located. Attach a copy of the notification. <input type="checkbox"/> Check here if you have attached the explanation to the application package. <input type="checkbox"/> Check here if you have attached the notification to the application package.				
Surface Disposal					
2.32	Is sewage sludge from your facility placed on a surface disposal site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.39 (Part 2, Section 2) below.				
2.33	Total dry metric tons of sewage sludge from your facility placed on all surface disposal sites per 365-day period:				
2.34	Do you own or operate all surface disposal sites to which you send sewage sludge for disposal? <input type="checkbox"/> Yes → SKIP to Item 2.39 (Part 2, Section 2) below. <input type="checkbox"/> No				
2.35	Indicate the total number of surface disposal sites to which you send your sewage sludge. (Provide the information in Items 2.36 to 2.38 of Part 2, Section 2, for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.				

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Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge Continued	2.36	Site name or number of surface disposal site you do not own or operate		
		Mailing address (street or P.O. box)		
		City or Town	State	ZIP Code
		Contact Name (first and last)	Title	Phone Number
				Email Address
	2.37	Site Contact (Check all that apply.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator		
	2.38	Total dry metric tons of sewage sludge from your facility placed on this surface disposal site per 365-day period:		
	Incineration			
	2.39	Is sewage sludge from your facility fired in a sewage sludge incinerator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 2.46 (Part 2, Section 2) below.		
	2.40	Total dry metric tons of sewage sludge from your facility fired in all sewage sludge incinerators per 365-day period:		
	2.41	Do you own or operate all sewage sludge incinerators in which sewage sludge from your facility is fired? <input type="checkbox"/> Yes → SKIP to Item 2.46 (Part 2, Section 2) below. <input type="checkbox"/> No		
	2.42	Indicate the total number of sewage sludge incinerators used that you do not own or operate. (Provide the information in Items 2.43 to 2.45 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.		
	2.43	Incinerator name or number		
		Mailing address (street or P.O. box)		
		City or town	State	ZIP code
	Contact name (first and last)	Title	Phone number	
	Location address (street, route number, or other specific identifier)		<input type="checkbox"/> Same as mailing address	
	City or town	State	ZIP code	
2.44	Contact (check all that apply) <input type="checkbox"/> Incinerator owner <input type="checkbox"/> Incinerator operator			
2.45	Total dry metric tons of sewage sludge from your facility fired in this sewage sludge incinerator per 365-day period:			
Disposal in a Municipal Solid Waste Landfill				
2.46	Is sewage sludge from your facility placed on a municipal solid waste landfill? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 3.			
2.47	Indicate the total number of municipal solid waste landfills used. (Provide the information in Items 2.48 to 2.52 directly below for each facility.) <input type="checkbox"/> Check here if you have attached additional sheets to the application package.			

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IND/MUN BRANCH
WATER DIVISION

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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PART 2, SECTION 3 LAND APPLICATION OF BULK SEWAGE SLUDGE (40 CFR 122.21(q)(9))

Land Application of Bulk Sewage Sludge

3.1	Does your facility apply sewage sludge to land? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Part 2, Section 4.																				
3.2	Do any of the following conditions apply? <ul style="list-style-type: none"> The sewage sludge meets the ceiling concentrations in Table 1 of 40 CFR 503.12, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), and one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8); The sewage sludge is sold or given away in a bag or other container for application to the land; or You provide the sewage sludge to another facility for treatment or blending. <input type="checkbox"/> Yes → SKIP to Part 2, Section 4. <input checked="" type="checkbox"/> No																				
3.3	Complete Section 3 for every site on which the sewage sludge is applied. <input type="checkbox"/> Check here if you have attached sheets to the application package for one or more land application sites.																				
Identification of Land Application Site																					
3.4	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Site name or number Bon Air Property</td> </tr> <tr> <td colspan="2">Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address</td> </tr> <tr> <td>County Talladega</td> <td>County code <input type="checkbox"/> Not available</td> </tr> <tr> <td>City or town Bon Air</td> <td>State AL</td> </tr> <tr> <td colspan="2">ZIP code 35150</td> </tr> <tr> <td colspan="2" style="background-color: #e0e0e0;">Latitude/Longitude of Land Application Site (see instructions)</td> </tr> <tr> <td style="text-align: center;">Latitude</td> <td style="text-align: center;">Longitude</td> </tr> <tr> <td style="text-align: center;">33° 15' 44.64" N</td> <td style="text-align: center;">86° 19' 39" W</td> </tr> <tr> <td colspan="2" style="background-color: #e0e0e0;">Method of Determination</td> </tr> <tr> <td colspan="2"> <input checked="" type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____ </td> </tr> </table>	Site name or number Bon Air Property		Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address		County Talladega	County code <input type="checkbox"/> Not available	City or town Bon Air	State AL	ZIP code 35150		Latitude/Longitude of Land Application Site (see instructions)		Latitude	Longitude	33° 15' 44.64" N	86° 19' 39" W	Method of Determination		<input checked="" type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____	
Site name or number Bon Air Property																					
Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address																					
County Talladega	County code <input type="checkbox"/> Not available																				
City or town Bon Air	State AL																				
ZIP code 35150																					
Latitude/Longitude of Land Application Site (see instructions)																					
Latitude	Longitude																				
33° 15' 44.64" N	86° 19' 39" W																				
Method of Determination																					
<input checked="" type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____																					
3.5	Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location. <input checked="" type="checkbox"/> Check here to indicate you have attached a topographic map for this site.																				
Owner Information																					
3.6	Are you the owner of this land application site? <input checked="" type="checkbox"/> Yes → SKIP to Item 3.8 (Part 2, Section 3) below. <input type="checkbox"/> No																				
3.7	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4">Owner name</td> </tr> <tr> <td colspan="4">Mailing address (street or P.O. box)</td> </tr> <tr> <td colspan="2">City or town</td> <td>State</td> <td>ZIP code</td> </tr> <tr> <td>Contact name (first and last)</td> <td>Title</td> <td>Phone number</td> <td>Email address</td> </tr> </table>	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				
Owner name																					
Mailing address (street or P.O. box)																					
City or town		State	ZIP code																		
Contact name (first and last)	Title	Phone number	Email address																		
Applier Information																					
3.8	Are you the person who applies, or who is responsible for application of, sewage sludge to this land application site? <input checked="" type="checkbox"/> Yes → SKIP to Item 3.10 (Part 2, Section 3) below. <input type="checkbox"/> No																				
3.9	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4">Applier's name</td> </tr> <tr> <td colspan="4">Mailing address (street or P.O. box)</td> </tr> <tr> <td colspan="2">City or town</td> <td>State</td> <td>ZIP code</td> </tr> <tr> <td>Contact name (first and last)</td> <td>Title</td> <td>Phone number</td> <td>Email address</td> </tr> </table>	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				
Applier's name																					
Mailing address (street or P.O. box)																					
City or town		State	ZIP code																		
Contact name (first and last)	Title	Phone number	Email address																		

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Land Application of Bulk Sewage Sludge Continued

Site Type

3.10 Type of land application:

☒ Agricultural land
☐ Reclamation site
☐ Other (describe)

☐ Forest
☐ Public contact site

Crop or Other Vegetation Grown on Site

3.11 What type of crop or other vegetation is grown on this site?
 Bermuda grass and Hay

3.12 What is the nitrogen requirement for this crop or vegetation?
 224 kg/ha

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	Alabama Department of Environmental Management
Contact person	Alexis Rogers
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 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
PART 2, SECTION 4 SURFACE DISPOSAL (40 CFR 122.21(q)(10))			
Surface Disposal	4.1 Do you own or operate a surface disposal site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Part 2, Section 5.		
	4.2 Complete all items in Section 4 for each active sewage sludge unit that you own or operate. <input type="checkbox"/> Check here to indicate that you have attached material to the application package for one or more active sewage sludge units.		
	Information on Active Sewage Sludge Units		
	4.3 Unit name or number		
	Mailing address (street or P.O. box)		
	City or town		State
	ZIP code		
	Contact name (first and last)	Title	Phone number
	Email address		
	Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address		
	County		County code <input type="checkbox"/> Not available
	City or town		State
	ZIP code		
	Latitude/Longitude of Active Sewage Sludge Unit (see instructions)		
	Latitude		Longitude
Method of Determination <input type="checkbox"/> USGS map <input type="checkbox"/> Field survey <input type="checkbox"/> Other (specify) _____			
4.4 Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location. <input type="checkbox"/> Check here to indicate that you have completed and attached a topographic map.			
4.5 Total dry metric tons of sewage sludge placed on the active sewage sludge unit per 365-day period:			
4.6 Total dry metric tons of sewage sludge placed on the active sewage sludge unit over the life of the unit:			
4.7 Does the active sewage sludge unit have a liner with a maximum permeability of 1×10^{-7} centimeters per second (cm/sec)? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.9 (Part 2, Section 4) below.			
4.8 Describe the liner. <input type="checkbox"/> Check here to indicate that you have attached a description to the application package.			
4.9 Does the active sewage sludge unit have a leachate collection system? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.11 (Part 2, Section 4) below.			
4.10 Describe the leachate collection system and the method used for leachate disposal and provide the numbers of any federal, state, or local permit(s) for leachate disposal. <input type="checkbox"/> Check here to indicate that you have attached the description to the application package.			

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EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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Surface Disposal Continued

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

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

Form Approved 0805/19
OMB No. 2640-0004

EPA Form 3510-2S (Revised 3-19)

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Incineration Continued

Dispersion Factor													
5.13	Dispersion factor in micrograms/cubic meter per gram/second:												
5.14	Name and type of dispersion model:												
5.15	Submit a copy of the modeling results and supporting documentation. <input type="checkbox"/> Check here to indicate that you have attached this information.												
Control Efficiency													
5.16	Provide the control efficiency, in hundredths, for each of the pollutants listed below.												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Pollutant</th> <th style="width: 50%;">Control Efficiency, in Hundredths</th> </tr> <tr><td>Arsenic</td><td></td></tr> <tr><td>Cadmium</td><td></td></tr> <tr><td>Chromium</td><td></td></tr> <tr><td>Lead</td><td></td></tr> <tr><td>Nickel</td><td></td></tr> </table>	Pollutant	Control Efficiency, in Hundredths	Arsenic		Cadmium		Chromium		Lead		Nickel	
Pollutant	Control Efficiency, in Hundredths												
Arsenic													
Cadmium													
Chromium													
Lead													
Nickel													
5.17	Attach a copy of the results or performance testing and supporting documentation (including testing dates). <input type="checkbox"/> Check here to indicate that you have attached this information.												
Risk-Specific Concentration for Chromium													
5.18	Provide the risk-specific concentration (RSC) used for chromium in micrograms per cubic meter:												
5.19	Was the RSC determined via Table 2 in 40 CFR 503.43? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.21 (Part 2, Section 5) below.												
5.20	Identify the type of incinerator used as the basis. <input type="checkbox"/> Fluidized bed with wet scrubber <input type="checkbox"/> Other types with wet scrubber <input type="checkbox"/> Fluidized bed with wet scrubber and wet electrostatic precipitator <input type="checkbox"/> Other types with wet scrubber and wet electrostatic precipitator												
5.21	Was the RSC determined via Table 6 in 40 CFR 503.43 (site-specific determination)? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 5.23 (Part 2, Section 5) below.												
5.22	Provide the decimal fraction of hexavalent chromium concentration to total chromium concentration in stack exit gas:												
5.23	Attach the results of incinerator stack tests for hexavalent and total chromium concentrations, including the date(s) of any test(s), with this application. <input type="checkbox"/> Check here to indicate that you have attached this information. <input type="checkbox"/> Not applicable												
Incinerator Parameters													
5.24	Do you monitor total hydrocarbons (THC) in the exit gas of the sewage sludge incinerator? <input type="checkbox"/> Yes <input type="checkbox"/> No												
5.25	Do you monitor carbon monoxide (CO) in the exit gas of the sewage sludge incinerator? <input type="checkbox"/> Yes <input type="checkbox"/> No												
5.26	Indicate the type of sewage sludge incinerator.												
5.27	Incinerator stack height in meters:												
5.28	Indicate whether the value submitted in Item 5.27 is (check only one response): <input type="checkbox"/> Actual stack height <input type="checkbox"/> Creditable stack height												

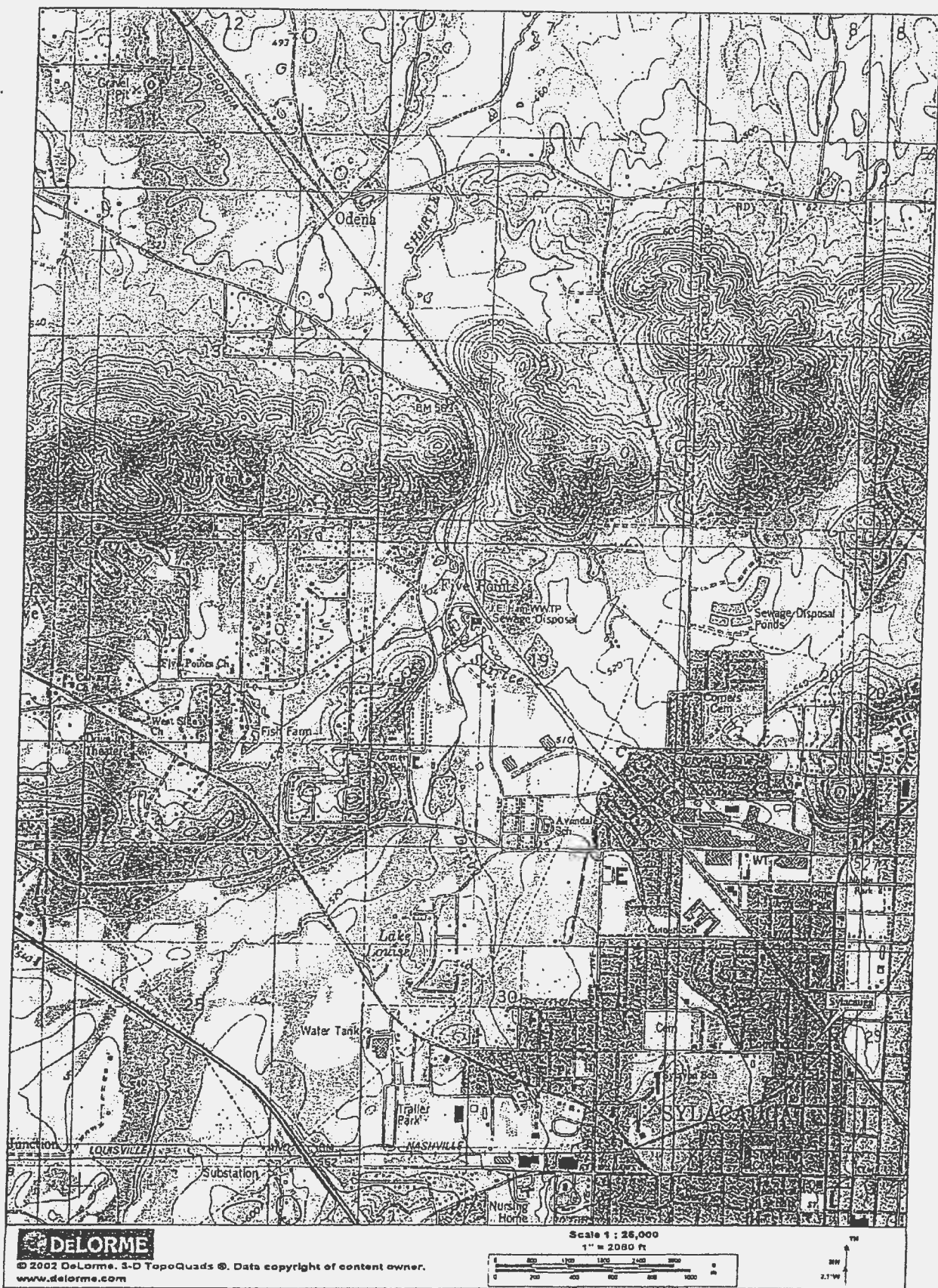
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Incineration Continued

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): <input type="checkbox"/> Average use <input type="checkbox"/> Maximum design												
5.32	Attach supporting documents describing how the feed rate was calculated. <input type="checkbox"/> Check here to indicate that you have attached this information.												
5.33	Submit information documenting the performance test operating parameters for the air pollution control device(s) used for this sewage sludge incinerator. <input type="checkbox"/> Check here to indicate that you have attached this information.												
Monitoring Equipment													
5.34	List the equipment in place to monitor the listed parameters.												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 60%; text-align: center; padding: 2px;">Parameter</th> <th style="text-align: center; padding: 2px;">Equipment in Place for Monitoring</th> </tr> <tr> <td style="padding: 2px;">Total hydrocarbons or carbon monoxide</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Percent oxygen</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Percent moisture</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Combustion temperature</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Other (describe)</td> <td style="padding: 2px;"></td> </tr> </table>	Parameter	Equipment in Place for Monitoring	Total hydrocarbons or carbon monoxide		Percent oxygen		Percent moisture		Combustion temperature		Other (describe)	
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. <input type="checkbox"/> Check here if you have attached the list to the application package for the noted incinerator.												

END of PART 2

Submit completed application package to your NPDES permitting authority.



J E Ham WWTP

Raw Water Pump Station
Tube Pumps

Bar Screen

Grit Chamber

Aeration 1
1.2 MG

Aeration 2
1.2 MG

Aeration 3
1.2 MG

Aeration 4
1.2 MG

RAS

Splitter Box

RAS

Composite
Samplers

Flow
Meter

Clarifier 1
.547 MG

Clarifier 2
.547 MG

Clarifier 3
.547 Mg

Clarifier 4
.547 MG

Sand Filters

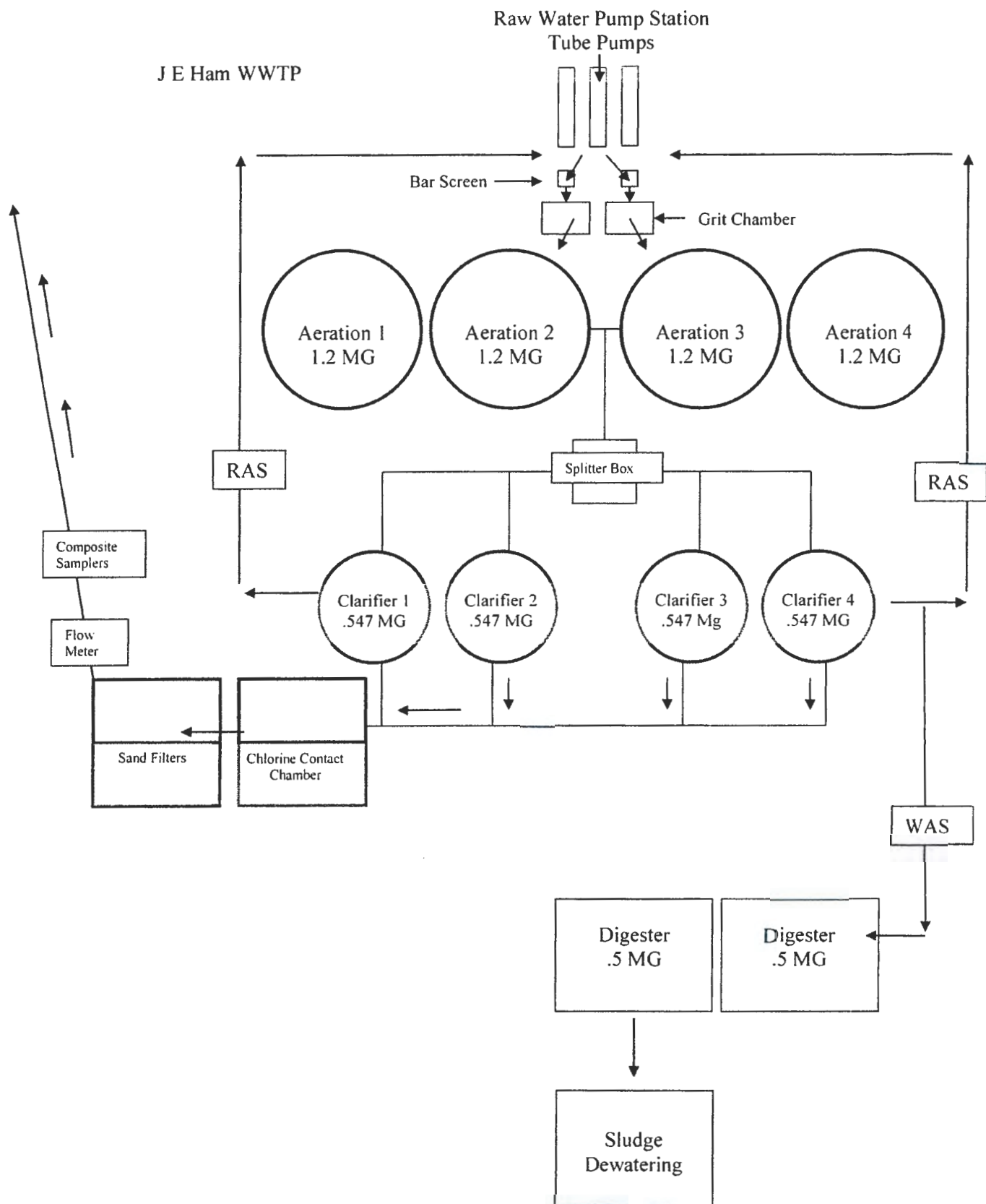
Chlorine Contact
Chamber

WAS

Digester
.5 MG

Digester
.5 MG

Sludge
Dewatering



erty
our map.

ection Agency

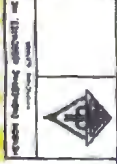
Zoom in to view parcels

Direction: 0.0

Central of Georgia Railroad



UNIVERSITY OF THE CITY OF ST. LOUIS
 SCHOOL OF ENVIRONMENTAL & FORESTRY
 FIGURE 2
 SHEET 11 - HANCOCK COUNTY, MO, 1997



948-0-01

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004	
Form 2F NPDES		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	Shirtee Creek	33° 11' 25.16"	86° 16' 10.29"
	003s	Darby Branch	33° 11' 25.10"	86° 16' 19.89"
	004s	Shirtee Creek	33° 11' 28.66"	86° 16' 14.07"
			. ' "	. ' "
			. ' "	. ' "
			. ' "	. ' "
SECTION 2. IMPROVEMENTS (40 CFR 122.21(g)(6))				
Improvements	2.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 3.		
	2.2	Briefly identify each applicable project in the table below.		
	Brief Identification and Description of Project	Affected Outfalls (list outfall numbers)	Source(s) of Discharge	Final Compliance Dates
				Required Projected
2.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (Optional Item) <input type="checkbox"/> Yes <input type="checkbox"/> No			

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

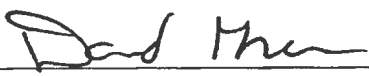
Site Drainage Map	3.1	Have you attached a site drainage map containing all required information to this application? (See instructions for specific guidance.)
	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

Pollutant Sources	4.1	Provide information on the facility's pollutant sources in the table below.																											
		Outfall Number	Impervious Surface Area (within a mile radius of the facility)	Total Surface Area Drained (within a mile radius of the facility)																									
		002	0.75 <i>specify units</i> acres	3.0 <i>specify units</i> acres																									
		003	2.00 <i>specify units</i> acres	4.0 <i>specify units</i> acres																									
		004	0.75 <i>specify units</i> acres	3.48 <i>specify units</i> acres																									
			<i>specify units</i>		<i>specify units</i>																								
			<i>specify units</i>		<i>specify units</i>																								
			<i>specify units</i>		<i>specify units</i>																								
		4.2	<p>Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.)</p> <p>Outfall 002 - There are no materials which could be exposed to storm water in this area. All the materials are contained within aeration basins and clarifiers. Outfall 003 - This area has drying beds that drain back to the head of the plant. A sludge press building exist with loading docks for sludge and polymers used to dewater. Outfall 004 - This area contains dumpsters with screenings and grit. The area drains back to the head of the plant. The shop has oil stored at the facility and the drains also go back to the head of the plant.</p>																										
	4.3	<p>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.)</p> <table border="1"> <tr> <th colspan="3">Stormwater Treatment</th> </tr> <tr> <th>Outfall Number</th> <th>Control Measures and Treatment</th> <th>Codes from Exhibit 2F-1 (list)</th> </tr> <tr> <td>002</td> <td>No treatment</td> <td>N/A</td> </tr> <tr> <td>003</td> <td>No treatment</td> <td>N/A</td> </tr> <tr> <td>004</td> <td>No treatment</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>				Stormwater Treatment			Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)	002	No treatment	N/A	003	No treatment	N/A	004	No treatment	N/A									
Stormwater Treatment																													
Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)																											
002	No treatment	N/A																											
003	No treatment	N/A																											
004	No treatment	N/A																											

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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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	
		David Green		Water Quality Supervisor	
		Signature		Date signed	
				11/14/2023	
	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.
		None

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?
	<input type="checkbox"/>	Yes → See instructions regarding submission of estimated data.
	<input checked="" type="checkbox"/>	No → See instructions regarding submission of actual data.
	Tables A, B, C, and D	
	7.2	Have you completed Table A for each outfall?
	<input checked="" type="checkbox"/>	Yes
	<input type="checkbox"/>	No

EPA Identification Number 100000152023		NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
Discharge Information Continued	7.3	Is the facility subject to an effluent limitation guideline (ELG) or effluent limitations in an NPDES permit for its process wastewater? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.5.		
	7.4	Have you completed Table B by providing quantitative data for those pollutants that are (1) limited either directly or indirectly in an ELG and/or (2) subject to effluent limitations in an NPDES permit for the facility's process wastewater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	7.5	Do you know or have reason to believe any pollutants in Exhibit 2F-2 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.7.		
	7.6	Have you listed all pollutants in Exhibit 2F-2 that you know or have reason to believe are present in the discharge and provided quantitative data or an explanation for those pollutants in Table C? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	7.7	Do you qualify for a small business exemption under the criteria specified in the Instructions? <input type="checkbox"/> Yes → SKIP to Item 7.18. <input checked="" type="checkbox"/> No		
	7.8	Do you know or have reason to believe any pollutants in Exhibit 2F-3 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.10.		
	7.9	Have you listed all pollutants in Exhibit 2F-3 that you know or have reason to believe are present in the discharge in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	7.10	Do you expect any of the pollutants in Exhibit 2F-3 to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.12.		
	7.11	Have you provided quantitative data in Table C for those pollutants in Exhibit 2F-3 that you expect to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	7.12	Do you expect acrolein, acrylonitrile, 2,4-dinitrophenol, or 2-methyl-4,6-dinitrophenol to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.14.		
	7.13	Have you provided quantitative data in Table C for the pollutants identified in Item 7.12 that you expect to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	7.14	Have you provided quantitative data or an explanation in Table C for pollutants you expect to be present in the discharge at concentrations less than 10 ppb (or less than 100 ppb for the pollutants identified in Item 7.12)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	7.15	Do you know or have reason to believe any pollutants in Exhibit 2F-4 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.17.		
7.16	Have you listed pollutants in Exhibit 2F-4 that you know or believe to be present in the discharge and provided an explanation in Table C? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7.17	Have you provided information for the storm event(s) sampled in Table D? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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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?	
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 8.	
	7.19	List the pollutants below, including TCDD if applicable.	
	1.	4.	7.
	2.	5.	8.
	3.	6.	9.

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

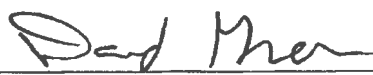
Biological Toxicity Testing Data	8.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last three years?		
		<input type="checkbox"/> Yes <input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

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

Contract Analysis Information	9.1	Were any of the analyses reported in Section 7 (on Tables A through C) performed by a contract laboratory or consulting firm?		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 10.		
	9.2	Provide information for each contract laboratory or consulting firm below.		
		Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
	Name of laboratory/firm	Environmental Resource Analyst		
	Laboratory address	2975 Brown Ct Auburn, AL 36830		
Phone number	(334) 502-3444			
Pollutant(s) analyzed	Total Phosphorus Total Nitrogen Oil and Grease Chemical Oxygen Demand			

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Form Approved 03/05/19 OMB No. 2040-0004
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SECTION 10. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	10.1	In Column 1 below, mark the sections of Form 2F that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.	
		Column 1	Column 2
		<input checked="" type="checkbox"/> Section 1	<input type="checkbox"/> w/ attachments (e.g., responses for additional outfalls)
		<input type="checkbox"/> Section 2	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 3	<input type="checkbox"/> w/ site drainage map
		<input checked="" type="checkbox"/> Section 4	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 5	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 6	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 7	<input checked="" type="checkbox"/> Table A <input type="checkbox"/> w/ small business exemption request <input type="checkbox"/> Table B <input type="checkbox"/> w/ analytical results as an attachment <input type="checkbox"/> Table C <input type="checkbox"/> Table D
		<input type="checkbox"/> Section 8	<input type="checkbox"/> w/attachments
		<input checked="" type="checkbox"/> Section 9	<input type="checkbox"/> w/attachments (e.g., responses for additional contact laboratories or firms)
		<input checked="" type="checkbox"/> Section 10	<input type="checkbox"/>
10.2	Certification Statement <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>		
	Name (print or type first and last name) David Green	Official title Water Quality Supervisor	
	Signature 	Date signed 11/14/2023	

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Outfall Number 02S
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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	BMDL		BMDL		3	
2. Biochemical oxygen demand (BOD ₅)	4 mg/l	N/A	5 mg/l	N/A	3	
3. Chemical oxygen demand (COD)	N/A	N/A	N/A	N/A	N/A	
4. Total suspended solids (TSS)	14 mg/l	N/A	12 mg/l	N/A	3	
5. Total phosphorus	0.234 mg/l	N/A	0.078 mg/l	N/A	3	
6. Total Kjeldahl nitrogen (TKN)	1.03 mg/l	N/A	0.343 mg/l	N/A	3	
7. Total nitrogen (as N)	0.512 mg/l	N/A	0.221 mg/l	N/A	3	
8. pH (minimum)	7.20 s.u.		7.16 s.u.		3	
pH (maximum)	7.85 s.u.		7.16 s.u.		3	

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

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Outfall Number 035
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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	8MDL		8MDL		3	
2. Biochemical oxygen demand (BOD ₅)	4 mg/l	N/A	3 mg/l	N/A	3	
3. Chemical oxygen demand (COD)	N/A	N/A	N/A	N/A	N/A	
4. Total suspended solids (TSS)	32 mg/l	N/A	16 mg/l	N/A	3	
5. Total phosphorus	0.125 mg/l	N/A	0.041 mg/l	N/A	3	
6. Total Kjeldahl nitrogen (TKN)	8MDL	N/A	8MDL	N/A	3	
7. Total nitrogen (as N)	2.27 mg/l	N/A	0.815 mg/l	N/A	3	
8. pH (minimum)	7.41 s.u.		7.62 s.u.		3	
pH (maximum)	7.74 s.u.		7.62 s.u.		3	

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

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Outfall Number 045
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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	5.76 mg/l		1.92 mg/l		3	
2. Biochemical oxygen demand (BOD ₅)	4 mg/l	N/A	3 mg/l	N/A	3	
3. Chemical oxygen demand (COD)	N/A	N/A	N/A	N/A	N/A	
4. Total suspended solids (TSS)	12 mg/l	N/A	7 mg/l	N/A	3	
5. Total phosphorus	0.146 mg/l	N/A	0.048 mg/l	N/A	3	
6. Total Kjeldahl nitrogen (TKN)	BMDL	N/A	BMDL	N/A	3	
7. Total nitrogen (as N)	0.053 mg/l	N/A	0.040 mg/l	N/A	3	
8. pH (minimum)	7.44 s.u.		7.67 s.u.		3	
pH (maximum)	8.18 s.u.		7.67 s.u.		3	

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 100000152023	NPDES Permit Number AL0020001	Facility name J. Earl Ham WWTP	Outfall Number
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE D. STORM EVENT INFORMATION (40 CFR 122.26(c)(1)(i)(E)(6))

Provide data for the storm event(s) that resulted in the maximum daily discharges for the flow-weighted composite sample.

Date of Storm Event	Duration of Storm Event (in hours)	Total Rainfall During Storm Event (in inches)	Number of Hours Between Beginning of Storm Measured and End of Previous Measurable Rain Event	Maximum Flow Rate During Rain Event (in gpm or specify units)	Total Flow from Rain Event (in gallons or specify units)

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



Stormwater 2020

David Green

From: e2admin@adem.alabama.gov
Sent: Monday, July 13, 2020 2:36 PM
To: David Green
Cc: Kellye Remson; Mike McGinnis; S. Morris
Subject: Original Submission 286313 Received Confirmation

E2 System Message:

This email is sent as a confirmation that your online DMR Report Submission (Sub ID # 286313) has been received by ADEM's E2 Reporting System.

The details about your submission are as follows:

Permit Number: AL0020001
Submission ID: 286313
First Name: David
Last Name: Green
Submission Status: received
Report Type: Summary DMR
Facility Name: Sylacauga Ub J Earl Ham Wwtp
Report Frequency: ANNUALLY
Report Period: 1/1/2020 12:00:00 AM - 12/31/2020 12:00:00 AM
List of Attachments: N

You may login to E2 Reporting System and view the submission by clicking on the link provided below.

<https://e2.adem.alabama.gov/npdes>

Thank you for using ADEM's E2 Reporting System.

If you have questions or problems with the E2 System please contact the E2 Admin at e2admin@adem.alabama.gov

7/13/2020

E2 Reporting System



E2 Receipt

Here is your report submission receipt. Click [here](#) to print.

Submission ID: 286313

Submitted on 7/13/2020 2:35:51 PM, at 97.67.1.162

Submitted by: David Green
Sylacauga Ub J Earl Ham Wwtp
PO Box 207
Sylacauga, AL 35150
256-401-2536
dgreen@sylacauga.net

Report Detail

Summary Discharge Monitoring Report
Facility Name Sylacauga Ub J Earl Ham Wwtp
Permit Number AL0020001
Report Frequency ANNUALLY
Report Period 01/01/2020 - 12/31/2020

Attachment Detail

Online Attachments

Mail Attachments

Mail to Address:

Mail in the following attachment(s):

Thank you for using E2 system!

7/13/2020

RequirementForm (15).html

Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Utilities Board of the City of Sylacauga

PERMIT NUMBER: AL0020001

MAILING: Post Office Box 207

MONITORING: 002S

ADDRESS: Sylacauga, AL 35150

POINT:

COUNTY:

Talladega

FACILITY: Sylacauga Up J Earl Hunt Wwtp

LOCATION: 610 Old Sylacauga Highway

Monitoring Period: 2020-01-01 To: 2020-12-31

NO DISCHARGE FROM SITE:

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Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
PH	Sample Measurement	*****	*****		7.2	*****	7.2	0	Annually	Grab
PARAM CODE: 00400 Stage Code: SW	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily	12 S.U.	Annually	Grab
SOLIDS, TOTAL SUSPENDED	Sample Measurement	*****	*****		*****	*****	12	0	Annually	Grab
PARAM CODE: 00330 Stage Code: SW	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily	19 mg/l	Annually	Grab
OIL & GREASE	Sample Measurement	*****	*****		*****	*****	0	0	Annually	Grab
PARAM CODE: 00556 Stage Code: SW	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily	19 mg/l	Annually	Grab
NITROGEN, AMMONIA TOTAL (AS N)	Sample Measurement	*****	*****		*****	*****	0.119	0	Annually	Grab
PARAM CODE: 00610 Stage Code: SW	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily	19 mg/l	Annually	Grab
NITROGEN, KJELDAHL TOTAL (AS N)	Sample Measurement	*****	*****		*****	*****	0	0	Annually	Grab
PARAM CODE: 00625 Stage Code: SW	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily	19 mg/l	Annually	Grab
NITRITE PLUS NITRATE TOTAL (DET. (AS N)	Sample Measurement	*****	*****		*****	*****	0.151	0	Annually	Grab
PARAM CODE: 00630 Stage Code: SW	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily	19 mg/l	Annually	Grab
PHOSPHORUS, TOTAL (AS P)	Sample Measurement	*****	*****		*****	*****	0.234	0	Annually	Grab
PARAM CODE: 00665 Stage Code: SW	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily	19 mg/l	Annually	Grab

Name/Title of Principal Executive Officer Or Authorized Agent: STEVEN A. MORRIS CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, PER 18 U.S.C. § 1001 AND 22 U.S.C. § 1519.

Signature of Principal Executive Officer Or Authorized Agent: STEVEN A. MORRIS Telephone No: 256-510-045 Date (MM/DD/YY): 7-13-2020

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

7/13/2020

RequirementForm (15).html

Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Utilities Board of the City of

PERMIT NUMBER: AL0020001

Sylacauga

MAILING: Post Office Box 207

MONITORING: 0025

ADDRESS: Sylacauga, AL 35150

POINT:

COUNTY:

Talladega

FACILITY: Sylacauga Ub J Earl Hann Wwtp

LOCATION: 610 Old Sylacauga Highway

Monitoring Period: 2020-01-01 To: 2020-12-31

NO DISCHARGE FROM SITE:

()

Sylacauga, AL 35150

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	Sample Measurement	0.005624	03 MGD	*****		0	Annually	Calculated
PARAM CODE: 50050	Permit Requirement	REPORT Maximum Daily		*****			Annually	Calculated
Stage Code: SW								
E. COLI	Sample Measurement	*****		*****	62.4	0	Annually	Grab
PARAM CODE: 51040	Permit Requirement	*****		*****	REPORT Maximum Daily	13 col/100mL	Annually	Grab
Stage Code: SW								
BOD, CARBONACEOUS 05 DAY, 20C	Sample Measurement	*****		*****	5.0	0	Annually	Grab
PARAM CODE: 80082	Permit Requirement	*****		*****	REPORT Maximum Daily	19 mg/l	Annually	Grab
Stage Code: SW								

Name/Title of Principal Executive Officer Or Authorized Agent

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

Signature of Principal Executive Officer Or Authorized Agent

Telephone No

Date (MM/DD/YY)

Steven A. Morris

Steven A. Morris

Steven A. Morris

256-560-0115

7-13-2020

Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months to 3 years.

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

7/13/2020

RequirementForm (15).html

Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Utilities Board of the City of

PERMIT NUMBER: AL0020001

MAILING: Sylacauga

MONITORING 0035

ADDRESS: Post Office Box 207

POINT:

COUNTY:

Talladega

FACILITY: Sylacauga Ub J Earl Ham Wwtp

Monitoring Period: 2020-01-01 To 2020-12-31

NO DISCHARGE FROM SITE:

()

LOCATION: 610 Old Sylacauga Highway

Sylacauga, AL 35150

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
PH	Sample Measurement	*****		7.41		0	Annually	Grab
PARAM CODE: 00400	Permit Requirement	*****		REPORT Minimum Daily		12 S.U.	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				
SOLIDS, TOTAL SUSPENDED	Sample Measurement	*****		*****		0	Annually	Grab
PARAM CODE: 00530	Permit Requirement	*****		*****		19 mg/l	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				
OIL & GREASE	Sample Measurement	*****		*****		0	Annually	Grab
PARAM CODE: 00556	Permit Requirement	*****		*****		19 mg/l	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				
NITROGEN, AMMONIA TOTAL (AS N)	Sample Measurement	*****		*****		0.032	Annually	Grab
PARAM CODE: 00610	Permit Requirement	*****		*****		19 mg/l	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				
NITROGEN, KJELDAHL TOTAL (AS N)	Sample Measurement	*****		*****		0	Annually	Grab
PARAM CODE: 00625	Permit Requirement	*****		*****		19 mg/l	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				
NITRITE PLUS NITRATE TOTAL I DET. (AS N)	Sample Measurement	*****		*****		0.148	Annually	Grab
PARAM CODE: 00630	Permit Requirement	*****		*****		19 mg/l	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				
PHOSPHORUS, TOTAL (AS P)	Sample Measurement	*****		*****		0.125	Annually	Grab
PARAM CODE: 00665	Permit Requirement	*****		*****		19 mg/l	Annually	Grab
Stage Code: SW				REPORT Maximum Daily				

Name/Title of Principal Executive Officer Or Authorized Agent	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months to 3 years.	Signature of Principal Executive Officer Or Authorized Agent	Telephone No	Date (MM/DD/YY)
STEVEN A. MADALA'S		<i>Steven A. Madala's</i>	256-510-0115	7-13-2020

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Page 3

7/13/2020

RequirementForm (15).html

Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Utilities Board of the City of Sylacauga

PERMIT NUMBER: AL0020001

MAILING: Post Office Box 207

MONITORING: 0035

ADDRESS: Sylacauga, AL 35150

POINT:

COUNTY:

Talladega

FACILITY: Sylacauga Ub J Earl Ham Wwtp

LOCATION: 610 Old Sylacauga Highway
Sylacauga, AL 35150

Monitoring Period: 2020-01-01 To: 2020-12-31

NO DISCHARGE FROM SITE:

()

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
FLOW IN CONDUIT OR THRU TREATMENT PLANT	Sample Measurement	*****	0.000581	*****	*****	0	Annually	Calculated
PARAM CODE: 50050 Stage Code: SW	Permit Requirement	*****	REPORT Maximum Daily	*****	*****		Annually	Calculated
E. COLI	Sample Measurement	*****	*****	*****	93	0	Annually	Grab
PARAM CODE: 51040 Stage Code: SW	Permit Requirement	*****	*****	*****	REPORT Maximum Daily	13 col/100mL	Annually	Grab
BOD, CARBONACEOUS 05 DAY, 20C	Sample Measurement	*****	*****	*****	4.0	0	Annually	Grab
PARAM CODE: 80082 Stage Code: SW	Permit Requirement	*****	*****	*****	REPORT Maximum Daily	19 mg/l	Annually	Grab

Name/Title of Principal Executive Officer Or Authorized Agent	CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE: 16 U.S.C. § 1001 AND 33 U.S.C. § 1319	Signature of Principal Executive Officer Or Authorized Agent	Telephone No	Date (MM/DD/YY)
STEWART A. MOORE		STEWART A. MOORE	256-510-0115	7-13-2020

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Page 4

7/13/2020

RequirementForm (15).html

Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Utilities Board of the City of
Sylacauga
MAILING: Post Office Box 207
ADDRESS: Sylacauga, AL 35150
FACILITY: Sylacauga Ub J Earl Ham Wwtp
LOCATION: 610 Old Sylacauga Highway
Sylacauga, AL 35150

PERMIT NUMBER: AL0020001

MONITORING 0045

POINT:

COUNTY

Talladega

Monitoring Period: 2020-01-01 To: 2020-12-31

NO DISCHARGE FROM SITE:

()

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
PH	Sample Measurement	7.44	7.44	12 S.U.	0	Annually	Grab
PARAM CODE: 00400 State Code: SW	Permit Requirement	REPORT Minimum Daily	REPORT Maximum Daily			Annually	Grab
SOLIDS, TOTAL SUSPENDED	Sample Measurement	6.0	6.0	19 mg/l	0	Annually	Grab
PARAM CODE: 00530 State Code: SW	Permit Requirement	REPORT Maximum Daily				Annually	Grab
OIL & GREASE	Sample Measurement	0	0	19 mg/l	0	Annually	Grab
PARAM CODE: 00556 State Code: SW	Permit Requirement	REPORT Maximum Daily				Annually	Grab
NITROGEN, AMMONIA TOTAL (AS N)	Sample Measurement	0.053	0.053	19 mg/l	0	Annually	Grab
PARAM CODE: 00610 State Code: SW	Permit Requirement	REPORT Maximum Daily				Annually	Grab
NITROGEN, KJELDAHL TOTAL (AS N)	Sample Measurement	0	0	19 mg/l	0	Annually	Grab
PARAM CODE: 00625 State Code: SW	Permit Requirement	REPORT Maximum Daily				Annually	Grab
NITRITE PLUS NITRATE TOTAL (AS N)	Sample Measurement	0.137	0.137	19 mg/l	0	Annually	Grab
PARAM CODE: 00630 State Code: SW	Permit Requirement	REPORT Maximum Daily				Annually	Grab
PHOSPHORUS, TOTAL (AS P)	Sample Measurement	0.146	0.146	19 mg/l	0	Annually	Grab
PARAM CODE: 00665 State Code: SW	Permit Requirement	REPORT Maximum Daily				Annually	Grab

Name/Title of Principal Executive Officer Or Authorized Agent

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THESE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

Signature of Principal Executive Officer Or Authorized Agent

Telephone No

Date (MM/DD/YY)

STEVEN A. VORLES

STEVEN A. VORLES

750-510-0115

7-13-2020

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Page 5

7/13/2020

RequirementForm (15).html

Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Utilities Board of the City of

PERMIT NUMBER: AL0020001

MAILING: Sylacauga

MONITORING: 0045

ADDRESS: Post Office Box 207

POINT:

COUNTY:

Talladega

FACILITY: Sylacauga Ub J Earl Ham Wwtp

LOCATION: 610 Old Sylacauga Highway

Monitoring Period: 2020-01-01 To: 2020-12-31

NO DISCHARGE FROM SITE:

()

Sylacauga, AL 35150

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	Sample Measurement	*****	0.005624	*****	*****	0	Annually	Calculated
PARAM CODE: 50050	Permit Requirement	*****	REPORT Maximum Daily	*****	*****		Annually	Calculated
Stage Code: SW								
E.COLI	Sample Measurement	*****	*****	*****	63	0	Annually	Grab
PARAM CODE: 51040	Permit Requirement	*****	*****	*****	REPORT Maximum Daily	13	Annually	Grab
Stage Code: SW					4.0	0	Annually	Grab
BOD, CARBONACEOUS 05 DAY, 20C	Sample Measurement	*****	*****	*****	*****	19	Annually	Grab
PARAM CODE: 80082	Permit Requirement	*****	*****	*****	REPORT Maximum Daily	mg/l	Annually	Grab
Stage Code: SW								

Name/Title of Principal Executive Officer Or Authorized Agent

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

Signature of Principal Executive Officer Or Authorized Agent

Telephone No

Date (M/M/YY)

STEVENA MORRIS

Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months to 3 years.

Signature of Principal Executive Officer Or Authorized Agent

Page 6

David Green

Storm water 2021

From: smorris@sylacauga.net
Sent: Monday, January 10, 2022 4:59 PM
To: David Green
Subject: FW: nVIRO PROD ADEM Internal - DMR Receipt Notification - AL0020001, Period 01/01/2021 - 12/31/2021
Attachments: AL0020001_2021-01-01_to_2021-12-31_DMR.pdf

-----Original Message-----

From: "AEPACS" <aepacs@adem.alabama.gov>
Sent: Monday, January 10, 2022 4:38pm
To: smorris@sylacauga.net
Subject: nVIRO PROD ADEM Internal - DMR Receipt Notification - AL0020001, Period 01/01/2021 - 12/31/2021

AEPACS User,

This notification is to inform you that Alabama Department of Environmental Management has received the following DMR:

Site Name: J Earl Ham WWTP
Permit Number: AL0020001
DMR Period: 01/01/2021 - 12/31/2021
DMR Submission Identifier: DMR-AL0020001-20211231-12
Submitted By: Steven Morris
Submitted Date: 1/10/2022 4:23 PM

This is an automated email sent by the AEPACS application.

DISCHARGE MONITORING REPORT (DMR)

Digitally signed by:
GlobalSign RSA OV SSL CA 2018
Date: 2022.01.10 16:23:56 -06:00
Reason: Copy Of Record
Location: State of Alabama

Permittee Name: Utilities Board of the City of Sylacauga
Facility Name: J Earl Ham WWTP
Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150
County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Outfall: 002-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
pH (00400) STORM WATER	Sample Measurement	*****	*****	*****	7.85	*****	7.85	S.U.	0	Annually	Grab
	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily			Annually	Grab
Solids, Total Suspended (00530) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	14	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Oil & Grease (00556) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily			Annually	Grab
Nitrogen, Ammonia Total (As N) (00610) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.057	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Outfall: 002-S

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Nitrogen, Kjeldahl Total (As N) (00625) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Nitrite Plus Nitrate Total I Det. (As N) (00630) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.512	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Phosphorus, Total (As P) (00665) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Flow, In Conduit or Thru Treatment Plant (50050) STORM WATER	Sample Measurement	*****	0.0019212	MGD	*****	*****	*****	*****	0	Annually	Calculated
	Permit Requirement	*****	REPORT Maximum Daily		*****	*****	*****			Annually	Calculated

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Outfall: 002-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
E. Coli (51040) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	94	col/100mL	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
BOD, Carbonaceous 05 Day, 20C (80082) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	4	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Outfall: 003-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
pH (00400) STORM WATER	Sample Measurement	*****	*****	*****	7.71	*****	7.71	S.U.	0	Annually	Grab
	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily			Annually	Grab
Solids, Total Suspended (00530) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	32	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Oil & Grease (00556) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily			Annually	Grab
Nitrogen, Ammonia Total (As N) (00610) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.045	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Outfall: 003-S

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Nitrogen, Kjeldahl Total (As N) (00625) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	2.27	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Phosphorus, Total (As P) (00665) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Flow, In Conduit or Thru Treatment Plant (50050) STORM WATER	Sample Measurement	*****	0.001127	MGD	*****	*****	*****	*****	0	Annually	Calculated
	Permit Requirement	*****	REPORT Maximum Daily		*****	*****	*****			Annually	Calculated

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Outfall: 003-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
E. Coli (51040) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	1733	col/100mL	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
BOD, Carbonaceous 05 Day, 20C (80082) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	3	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Outfall: 004-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
pH (00400) STORM WATER	Sample Measurement	*****	*****	*****	8.18	*****	8.18	S.U.	0	Annually	Grab
	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily			Annually	Grab
Solids, Total Suspended (00530) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	12	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Oil & Grease (00556) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	5.76	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily			Annually	Grab
Nitrogen, Ammonia Total (As N) (00610) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.044	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Outfall: 004-S

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Nitrogen, Kjeldahl Total (As N) (00625) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.187	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Phosphorus, Total (As P) (00665) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Flow, In Conduit or Thru Treatment Plant (50050) STORM WATER	Sample Measurement	*****	0.002525	MGD	*****	*****	*****	*****	0	Annually	Calculated
	Permit Requirement	*****	REPORT Maximum Daily		*****	*****	*****			Annually	Calculated

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga

Facility Name: J Earl Ham WWTP

Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150

County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2021	To: 12/31/2021

Outfall: 004-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
E. Coli (51040) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	88	col/100mL	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
BOD, Carbonaceous 05 Day, 20C (80082) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	4	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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END OF REPORT

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Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/10/2022

2022 - Stormwater

David Green

From: AEPACS <aepacs@adem.alabama.gov>
Sent: Wednesday, January 18, 2023 10:54 AM
To: David Green
Subject: nVIRO PROD ADEM Internal - DMR Receipt Notification - AL0020001, Period 01/01/2022 - 12/31/2022
Attachments: AL0020001_2022-01-01_to_2022-12-31_DMR.pdf

AEPACS User,

This notification is to inform you that Alabama Department of Environmental Management has received the following DMR:

Permit Number: AL0020001
Permittee: Utilities Board of the City of Sylacauga
Site Name: J Earl Ham WWTP
DMR Period: 01/01/2022 - 12/31/2022
DMR Submission Identifier: DMR-AL0020001-20221231-12
Submitted By: Steven Morris
Submitted Date: 1/18/2023 10:38 AM

This is an automated email sent by the AEPACS application.

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga
Facility Name: J Earl Ham WWTP
Location: 610 Old Sylacauga Highway
Sylacauga, AL 35150
County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2022	To: 12/31/2022

Digitally signed by:
AEPACS
Date: 2023.01.18 10:38:44 -06:00
Reason: Copy Of Record
Location: State of Alabama

Outfall: 002-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
pH (00400) STORM WATER	Sample Measurement	*****	*****	*****	6.44	*****	6.44	S.U.	0	Annually	Gmb
	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily			Annually	Grab
Solids, Total Suspended (00530) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	10.0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Oil & Grease (00556) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily			Annually	Grab
Nitrogen, Ammonia Total (As N) (00610) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.032	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/18/2023

DISCHARGE MONITORING REPORT (DMR)

Permittee Name: Utilities Board of the City of Sylacauga
 Facility Name: J Earl Ham WWTP
 Location: 610 Old Sylacauga Highway
 Sylacauga, AL 35150
 County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2022	To: 12/31/2022

Outfall: 002-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Nitrogen, Kjeldahl Total (As N) (00625) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	1.03	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Nitrite Plus Nitrate Total I Del. (As N) (00630) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.152	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Phosphorus, Total (As P) (00665) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Flow, In Conduit or Thru Treatment Plant (50050) STORM WATER	Sample Measurement	*****	0.0073899	MGD	*****	*****	*****	*****	0	Annually	Calculated
	Permit Requirement	*****	REPORT Maximum Daily		*****	*****	*****			Annually	Calculated

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DISCHARGE MONITORING REPORT (DMR)

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Facility Name: J Earl Ham WWTP
Location: 610 Old Sylacauga Highway
 Sylacauga, AL 35150
County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2022	To: 12/31/2022

Outfall: 002-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
E. Coli (51040) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	col/100mL	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
BOD, Carbonaceous 05 Day, 20C (80082) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	3.0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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Facility Name: J Earl Ham WWTP
Location: 610 Old Sylacauga Highway
 Sylacauga, AL 35150
County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2022	To: 12/31/2022

Outfall: 003-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
pH (00400) STORM WATER	Sample Measurement	*****	*****	*****	7.74	*****	7.74	S.U.	0	Annually	Grab
	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily			Annually	Grab
Solids, Total Suspended (00310) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	8.0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Oil & Grease (00356) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily			Annually	Grab
Nitrogen, Ammonia Total (As N) (00610) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.028	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2022	To: 12/31/2022

Outfall: 003-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Nitrogen, Kjeldahl Total (As N) (00625) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Nitrite Plus Nitrate Total I Det. (As N) (00630) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.0891	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Phosphorus, Total (As P) (00665) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Flow, In Conduit or Thru Treatment Plant (50050) STORM WATER	Sample Measurement	*****	0.0024219	MGD	*****	*****	*****	*****	0	Annually	Calculated
	Permit Requirement	*****	REPORT Maximum Daily		*****	*****	*****			Annually	Calculated

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Permit No: AL0020001	
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From: 1/1/2022	To: 12/31/2022

Outfall: 003-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	Nu. Ex.	Sample Freq	Sample Type
E. Coli (51040) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	205.1	col/100mL	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
BOD, Carbonaceous 05 Day, 20C (80082) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	3.0	nig/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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From: 1/1/2022	To: 12/31/2022

Outfall: 004-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
pH (00400) STORM WATER	Sample Measurement	*****	*****	*****	7.39	*****	7.39	S.U.	0	Annually	Grab
	Permit Requirement	*****	*****		REPORT Minimum Daily	*****	REPORT Maximum Daily			Annually	Grab
Solids, Total Suspended (00530) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	4.0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Oil & Grease (00556) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	15.0 Maximum Daily			Annually	Grab
Nitrogen, Ammonia Total (As N) (00610) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.024	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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Outfall: 004-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Nitrogen, Kjeldahl Total (As N) (00623) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Nitrite Plus Nitrate Total I Det. (As N) (00630) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0.100	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Phosphorus, Total (As P) (00665) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
Flow, In Conduit or Thru Treatment Plant (50050) STORM WATER	Sample Measurement	*****	0.00815	MGD	*****	*****	*****	*****	0	Annually	Calculated
	Permit Requirement	*****	REPORT Maximum Daily		*****	*****	*****			Annually	Calculated

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County: Talladega

Permit No: AL0020001	
Monitoring Period	
From: 1/1/2022	To: 12/31/2022

Outfall: 004-S

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
E. Coli (51040) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	0	col/100mL	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab
BOD, Carbonaceous 05 Day, 20C (80082) STORM WATER	Sample Measurement	*****	*****	*****	*****	*****	2.0	mg/l	0	Annually	Grab
	Permit Requirement	*****	*****		*****	*****	REPORT Maximum Daily			Annually	Grab

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Steven Morris		Electronically Signed via AEPACS	(256) 510-0115	01/18/2023


Submission Identifier: DMR-AL0020001-20221231-12

Submission Signature Hash: APXPAji7ODwcWO8S7hxpFJu2q25rdDAY1WSMzL5vmi4=

Submitter Name: Steven Morris

Submitter Email: smorris@sylacauga.net

Submitted Date/Time: 1/18/2023 10:38:43 AM

EPA Identification Number 100000152023		NPDES Permit Number AL0020001		Facility Name J. Earl Ham WWTP		Form Approved 03/05/19 OMB No. 2040-0004		
Form 2A NPDES			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 J. Earl Ham WWTP						
		Mailing address (street or P.O. box) Post Office Box 207						
		City or town Sylacauga			State AL		ZIP code 35150	
		Contact name (first and last) David Green		Title Water Quality Supervisor		Phone number (256) 401-2536		Email address dgreen@sylacauga.net
		Location address (street, route number, or other specific identifier) <input type="checkbox"/> Same as mailing address 610 Old Sylacauga Highway						
		City or town Sylacauga			State AL		ZIP code 35150	
	Applicant Information	1.2	Is this application for a facility that has yet to commence discharge? <input type="checkbox"/> Yes → See instructions on data submission requirements for new dischargers. <input checked="" type="checkbox"/> No					
1.3		Is applicant different from entity listed under Item 1.1 above? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 1.4.						
		Applicant name						
		Applicant address (street or P.O. box)						
		City or town			State		ZIP code	
		Contact name (first and last)		Title		Phone number		Email address
1.4	Is the applicant the facility's owner, operator, or both? (Check only one response.) <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Both							
	1.5 To which entity should the NPDES permitting authority send correspondence? (Check only one response.) <input type="checkbox"/> Facility <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Facility and applicant (they are one and the same)							
Existing Environmental Permits	1.6	Indicate below any existing environmental permits. (Check all that apply and print or type the corresponding permit number for each.)						
		Existing Environmental Permits						
		<input checked="" type="checkbox"/> NPDES (discharges to surface water) AL0020001		<input type="checkbox"/> RCRA (hazardous waste)		<input type="checkbox"/> UIC (underground injection)		
		<input type="checkbox"/> PSD (air emissions)		<input type="checkbox"/> Nonattainment program (CAA)		<input type="checkbox"/> NESHAPs (CAA)		
	<input type="checkbox"/> Ocean dumping (MPRSA)		<input type="checkbox"/> Dredge or fill (CWA Section 404)		<input type="checkbox"/> Other (specify)			

RECEIVED

MAY 06 2024

IND/MUN BRANCH
WATER DIVISION

EPA Identification Number 100000152023		NPDES Permit Number AL0020001		Facility Name J. Earl Ham WWTP		Form Approved 03/05/19 OMB No. 2040-0004	
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	
		Sylacauga	15,355	<u>100</u> % separate sanitary sewer % combined storm and sanitary sewer <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain	
		Oak Grove	245	<u>100</u> % separate sanitary sewer % combined storm and sanitary sewer <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain	
				<u> </u> % separate sanitary sewer % combined storm and sanitary sewer <input type="checkbox"/> Unknown	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain	
				<u> </u> % separate sanitary sewer % combined storm and sanitary sewer <input type="checkbox"/> Unknown	<input type="checkbox"/> Own <input type="checkbox"/> Own <input type="checkbox"/> Own	<input type="checkbox"/> Maintain <input type="checkbox"/> Maintain <input type="checkbox"/> Maintain	
		Total Population Served	15,600				
				Separate Sanitary Sewer System	Combined Storm and Sanitary Sewer		
		Total percentage of each type of sewer line (in miles)		100 %			
		Indian Country	1.8	Is the treatment works located in Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
1.9	Does the facility discharge to a receiving water that flows through Indian Country? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Design and Actual Flow Rates	1.10	Provide design and actual flow rates in the designated spaces.				Design Flow Rate	
						4.8 mgd	
		Annual Average Flow Rates (Actual)					
		Two Years Ago		Last Year		This Year	
		2.77 mgd		2.82 mgd		3.46 mgd	
		Maximum Daily Flow Rates (Actual)					
		Two Years Ago		Last Year		This Year	
9.70 mgd		12.24 mgd		8.76 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					

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Outfalls and Other Discharge or Disposal Methods

Outfalls Other Than to Waters of the United States

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

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

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

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

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

Land Application Site and Discharge Data			
Location	Size	Average Daily Volume Applied	Continuous or Intermittent (check one)
	acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
	acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
	acres	gpd	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent

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

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

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

1.19 Provide information on the transporter below.

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

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

Design Flow	Outfalls to Waters of the United States						
	2.1	Does the treatment works have a design flow greater than or equal to 0.1 mgd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 3.					
Inflow and Infiltration	2.2	Provide the treatment works' current average daily volume of inflow and infiltration.			Average Daily Volume of Inflow and Infiltration 100000 gpd		
	Indicate the steps the facility is taking to minimize inflow and infiltration. The Utilities Board has a program in place to reduce inflow and infiltration by identifying and replacing defective mains.						
Topographic Map	2.3	Have you attached a topographic map to this application that contains all the required information? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Flow Diagram	2.4	Have you attached a process flow diagram or schematic to this application that contains all the required information? (See instructions for specific requirements.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Scheduled Improvements and Schedules of Implementation	2.5	Are improvements to the facility scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 3.					
	Briefly list and describe the scheduled improvements.						
	1.						
	2.						
	3.						
	4.						
	2.6	Provide scheduled or actual dates of completion for improvements.					
	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. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> None required or applicable						
Explanation:							

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

Description of Outfalls	3.1	Provide the following information for each outfall. (Attach additional sheets if you have more than three outfalls.)		
		Outfall Number <u>012</u>	Outfall Number <u>013</u>	Outfall Number <u>014</u>
	State	Alabama	Alabama	Alabama
	County	Talladega	Talladega	Talladega
	City or town	Sylacauga	Sylacauga	Sylacauga
	Distance from shore	0 ft.	0 ft.	0 ft.
	Depth below surface	0 ft.	0 ft.	0 ft.
	Average daily flow rate	2.83 mgd	2.83 mgd	2.83 mgd
	Latitude	33 ° 11 ' 49.8438	33 ° 11 ' 49.8438	33 ° 11 ' 49.8438
	Longitude	86 ° 16 ' 19.2 "	86 ° 16 ' 19.2 "	86 ° 16 ' 19.2 "
Seasonal or Periodic Discharge Data	3.2	Do any of the outfalls described under Item 3.1 have seasonal or periodic discharges? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.4.		
	3.3	If so, provide the following information for each applicable outfall.		
		Outfall Number _____	Outfall Number _____	Outfall Number _____
	Number of times per year discharge occurs			
	Average duration of each discharge (specify units)			
	Average flow of each discharge	mgd	mgd	mgd
Diffuser Type	3.4	Are any of the outfalls listed under Item 3.1 equipped with a diffuser? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 3.6.		
	3.5	Briefly describe the diffuser type at each applicable outfall.		
		Outfall Number _____	Outfall Number _____	Outfall Number _____
Waters of the U.S.	3.6	Does the treatment works discharge or plan to discharge wastewater to waters of the United States from one or more discharge points? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.		

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Receiving Water Description	3.7	Provide the receiving water and related information (if known) for each outfall.					
		Outfall Number <u>012</u>		Outfall Number <u>013</u>		Outfall Number <u>014</u>	
	Receiving water name	Shirtee Creek		Shirtee Creek		Shirtee Creek	
	Name of watershed, river, or stream system	Coosa Valley		Coosa Valley		Coosa Valley	
	U.S. Soil Conservation Service 14-digit watershed code						
	Name of state management/river basin	Coosa River		Coosa River		Coosa River	
	U.S. Geological Survey 8-digit hydrologic cataloging unit code						
	Critical low flow (acute)	cfs		cfs		cfs	
	Critical low flow (chronic)	cfs		cfs		cfs	
	Total hardness at critical low flow	160 mg/L of CaCO ₃		160 mg/L of CaCO ₃		160 mg/L of CaCO ₃	
Treatment Description	3.8	Provide the following information describing the treatment provided for discharges from each outfall.					
		Outfall Number <u>012</u>		Outfall Number <u>013</u>		Outfall Number <u>014</u>	
	Highest Level of Treatment (check all that apply per outfall)	<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Other (specify) <u>Filtration</u>		<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Other (specify) <u>Filtration</u>		<input type="checkbox"/> Primary <input type="checkbox"/> Equivalent to secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Other (specify) <u>Filtration</u>	
	Design Removal Rates by Outfall						
	BOD ₅ or CBOD ₅	98 %		98 %		98 %	
	TSS	99 %		99 %		99 %	
	Phosphorus	<input checked="" type="checkbox"/> Not applicable %		<input checked="" type="checkbox"/> Not applicable %		<input checked="" type="checkbox"/> Not applicable %	
	Nitrogen	<input type="checkbox"/> Not applicable 99 %		<input type="checkbox"/> Not applicable 99 %		<input type="checkbox"/> Not applicable 99 %	
	Other (specify)	<input type="checkbox"/> Not applicable		<input type="checkbox"/> Not applicable		<input type="checkbox"/> Not applicable	
	N/A	%		%		%	

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Treatment Description Continued	3.9	Describe the type of disinfection used for the effluent from each outfall in the table below. If not used, describe below. Chlorine				
		Outfall Number <u>012</u>		Outfall Number <u>013</u>		Outfall Number <u>014</u>
	Disinfection type	Chlorine		Chlorine		Chlorine
	Seasons used	All		All		All
	Dechlorination used?	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Effluent Testing Data	3.10	Have you completed monitoring for all Table A parameters and attached the results to the application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
	3.11	Have you conducted any WET tests during the 4.5 years prior to the date of the application on any of the facility's discharges or on any receiving water near the discharge points? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.13.					
	3.12	Indicate the number of acute and chronic WET tests conducted since the last permit reissuance of the facility's discharges by outfall number or of the receiving water near the discharge points.					
		Outfall Number <u>012</u>		Outfall Number <u>013</u>		Outfall Number <u>014</u>	
		Acute	Chronic	Acute	Chronic	Acute	Chronic
	Number of tests of discharge water		4		3		3
	Number of tests of receiving water						
	3.13	Does the treatment works have a design flow greater than or equal to 0.1 mgd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.16.					
	3.14	Does the POTW use chlorine for disinfection, use chlorine elsewhere in the treatment process, or otherwise have reasonable potential to discharge chlorine in its effluent? <input checked="" type="checkbox"/> Yes → Complete Table B, including chlorine. <input type="checkbox"/> No → Complete Table B, omitting chlorine.					
	3.15	Have you completed monitoring for all applicable Table B pollutants and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
3.16	Does one or more of the following conditions apply? <ul style="list-style-type: none"> 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). <input checked="" type="checkbox"/> Yes → Complete Tables C, D, and E as applicable. <input type="checkbox"/> No → SKIP to Section 4.						
3.17	Have you completed monitoring for all applicable Table C pollutants and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
3.18	Have you completed monitoring for all applicable Table D pollutants required by your NPDES permitting authority and attached the results to this application package? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No additional sampling required by NPDES permitting authority.						

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Effluent Testing Data Continued	3.19	Has the POTW conducted either (1) minimum of four quarterly WET tests for one year preceding this permit application or (2) at least four annual WET tests in the past 4.5 years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → Complete Table E and Table F and SKIP to Item 3.26.	IND/MUN BRANCH WATER DIVISION
	3.20	Have you previously submitted the results of the above tests to your NPDES permitting authority? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → Provide results in Table E and SKIP to Item 3.26.	
	3.21	Indicate the dates the data were submitted to your NPDES permitting authority and provide a summary of the results.	
		Date(s) Submitted <small>(MM/DD/YYYY)</small>	Summary of Results
		① 11/25/2019 ② 11/12/2020 ③ Fail ④ Pass ⑤ 12/23/2019 ⑥ 1/28/2021 ⑦ Fail ⑧ Pass ⑨ 12/18/2019 ⑩ 5/18/2021 ⑪ Pass ⑫ Pass ⑬ 1/18/2020 ⑭ 8/17/2021 ⑮ Pass ⑯ Pass ⑰ 8/10/2020 ⑱ 11/23/2021 ⑲ Pass ⑳ Pass	
	3.22	Regardless of how you provided your WET testing data to the NPDES permitting authority, did any of the tests result in toxicity? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.26.	
	3.23	Describe the cause(s) of the toxicity: Our facility took the initiative to do some additional diagnostic lab testing during the period of the accelerated testing and no cause of any potential toxicity could be identified.	
	3.24	Has the treatment works conducted a toxicity reduction evaluation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 3.26.	
3.25	Provide details of any toxicity reduction evaluations conducted. Conducted accelerated testing along with some additional diagnostic lab test during the testing periods.		
3.26	Have you completed Table E for all applicable outfalls and attached the results to the application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Not applicable because previously submitted information to the NPDES permitting authority.		

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

Industrial Discharges and Hazardous Wastes	4.1	Does the POTW receive discharges from SIUs or NSCIUs? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.7.	
	4.2	Indicate the number of SIUs and NSCIUs that discharge to the POTW.	
		Number of SIUs	Number of NSCIUs
		6	
	4.3	Does the POTW have an approved pretreatment program? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	4.4	Have you submitted either of the following to the NPDES permitting authority that contains information substantially identical to that required in Table F: (1) a pretreatment program annual report submitted within one year of the application or (2) a pretreatment program? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 4.6.	
4.5	Identify the title and date of the annual report or pretreatment program referenced in Item 4.4. SKIP to Item 4.7. Sewer Use Regulations of the Utilities Board of the City of Sylacauga 08/01/2011		
4.6	Have you completed and attached Table F to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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Industrial Discharges and Hazardous Wastes Continued	4.7	Does the POTW receive, or has it been notified that it will receive, by truck, rail, or dedicated pipe, any wastes that are regulated as RCRA hazardous wastes pursuant to 40 CFR 261?																		
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 4.9.																		
	4.8	If yes, provide the following information:																		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Hazardous Waste Number</th> <th style="width: 55%;">Waste Transport Method (check all that apply)</th> <th style="width: 15%;">Annual Amount of Waste Received</th> <th style="width: 15%;">Units</th> </tr> </thead> <tbody> <tr> <td></td> <td> <input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____ </td> <td></td> <td></td> </tr> <tr> <td></td> <td> <input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____ </td> <td></td> <td></td> </tr> <tr> <td></td> <td> <input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____ </td> <td></td> <td></td> </tr> </tbody> </table>	Hazardous Waste Number	Waste Transport Method (check all that apply)	Annual Amount of Waste Received	Units		<input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____				<input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____				<input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____					
	Hazardous Waste Number	Waste Transport Method (check all that apply)	Annual Amount of Waste Received	Units																
		<input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____																		
	<input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____																			
	<input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Dedicated pipe <input type="checkbox"/> Other (specify) _____																			
4.9	Does the POTW receive, or has it been notified that it will receive, wastewaters that originate from remedial activities, including those undertaken pursuant to CERCLA and Sections 3004(7) or 3008(h) of RCRA?																			
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 5.																			
4.10	Does the POTW receive (or expect to receive) less than 15 kilograms per month of non-acute hazardous wastes as specified in 40 CFR 261.30(d) and 261.33(e)?																			
	<input type="checkbox"/> Yes → SKIP to Section 5. <input type="checkbox"/> No																			
4.11	Have you reported the following information in an attachment to this application: identification and description of the site(s) or facility(ies) at which the wastewater originates; the identities of the wastewater's hazardous constituents; and the extent of treatment, if any, the wastewater receives or will receive before entering the POTW?																			
	<input type="checkbox"/> Yes <input type="checkbox"/> No																			

SECTION 5. COMBINED SEWER OVERFLOWS (40 CFR 122.21(j)(8))	
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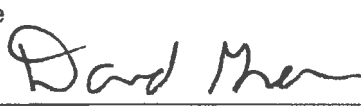
CSO Map and Diagram	5.1	Does the treatment works have a combined sewer system?	
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 6.	
	5.2	Have you attached a CSO system map to this application? (See instructions for map requirements.)	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
5.3	Have you attached a CSO system diagram to this application? (See instructions for diagram requirements.)		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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

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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)	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown
	Name of state management/river basin			
	U.S. Geological Survey 8-Digit Hydrologic Unit Code (if known)	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown
	Description of known water quality impacts on receiving stream by CSO (see instructions for examples)			

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

Checklist and Certification Statement	6.1	In Column 1 below, mark the sections of Form 2A that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.	
		Column 1	Column 2
	<input checked="" type="checkbox"/>	Section 1: Basic Application Information for All Applicants	<input type="checkbox"/> w/ variance request(s) <input checked="" type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 2: Additional Information	<input checked="" type="checkbox"/> w/ topographic map <input checked="" type="checkbox"/> w/ process flow diagram <input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 3: Information on Effluent Discharges	<input checked="" type="checkbox"/> w/ Table A <input type="checkbox"/> w/ Table D <input checked="" type="checkbox"/> w/ Table B <input checked="" type="checkbox"/> w/ Table E <input checked="" type="checkbox"/> w/ Table C <input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/>	Section 4: Industrial Discharges and Hazardous Wastes	<input type="checkbox"/> w/ SIU and NSCIU attachments <input checked="" type="checkbox"/> w/ Table F <input type="checkbox"/> w/ additional attachments
	<input type="checkbox"/>	Section 5: Combined Sewer Overflows	<input type="checkbox"/> w/ CSO map <input type="checkbox"/> w/ additional attachments <input type="checkbox"/> w/ CSO system diagram
	<input checked="" type="checkbox"/>	Section 6: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments
	6.2	Certification Statement <i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
		Name (print or type first and last name) David Green	Official title Water Quality Supervisor
	Signature 	Date signed 11/14/2023	

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TABLE A. EFFLUENT PARAMETERS FOR ALL POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Biochemical oxygen demand <input type="checkbox"/> BOD ₅ or <input checked="" type="checkbox"/> CBOD ₅ (report one)	21.0	mg/l	2.7	mg/l	717	SM5210B	1 mg/l <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fecal coliform	2420	col/100ml	25	col/100ml	1673	SM9222D	1 col/100ml <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Design flow rate	12.25	mgd	3.05	mgd	1673		
pH (minimum)	6.41	s.u.					
pH (maximum)	8.14	s.u.					
Temperature (winter)	15	C	16	C	24		
Temperature (summer)	28	C	25	C	24		
Total suspended solids (TSS)	116	mg/l	4	mg/l	717	SM2540D	1 mg/l <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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

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TABLE B. EFFLUENT PARAMETERS FOR ALL 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)	1.99	mg/l	0.44	mg/l	716	4500 NH3 B-C	0.1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorine (total residual, TRC) ²	0.05	mg/l	0.02	mg/l	179	4500 Cl G	<input type="checkbox"/> ML <input type="checkbox"/> MDL
Dissolved oxygen	11.00	mg/l	8.10	mg/l	1672	4500 O G	0.05 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nitrate/nitrite	18.10	mg/l	7.84	mg/l	56	353.2	0.65 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Kjeldahl nitrogen	1.60	mg/l	0.38	mg/l	56	351.2	0.50 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Oil and grease	BMDL	mg/l	BMDL	mg/l	3	1664A	1.0 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Phosphorus	2.70	mg/l	1.45	mg/l	56	365.4	0.10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Total dissolved solids	408	mg/l	287	mg/l	56	sm2540c	2 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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

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	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Metals, Cyanide, and Total Phenols							
Hardness (as CaCO ₃)	171	mg CaCO3/L	143	mg/l	3	2340C-2011	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Antimony, total recoverable	0.55	ug/l	0.18	ug/l	3	200.8	0.23 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Arsenic, total recoverable	0	ug/l	0	ug/l	3	200.8	0.64 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Beryllium, total recoverable	0.21	ug/l	0.07	ug/l	3	200.8	0.15 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Cadmium, total recoverable	0	ug/l	0	ug/l	3	200.8	0.24 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chromium, total recoverable	0	ug/l	0	ug/l	3	200.8	1.5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Copper, total recoverable	13.9	ug/l	10.7	ug/l	3	200.8	0.37 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Lead, total recoverable	0.30	ug/l	0.10	ug/l	3	200.8	0.28 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Mercury, total recoverable	2.87	ng/l	2.01	ng/l	3	1631E	0.19 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nickel, total recoverable	2.60	ug/l	1.7	ug/l	3	200.8	0.76 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Selenium, total recoverable	0.90	ug/l	0.30	ug/l	3	200.8	0.41 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Silver, total recoverable	0.32	ug/l	0.10	ug/l	3	200.8	0.25 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Thallium, total recoverable	0	ug/l	0	ug/l	3	200.8	0.60 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Zinc, total recoverable	18.8	ug/l	16	ug/l	3	200.8	0.90 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Cyanide	0	ug/l	0	ug/l	3	335.4	0.004 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Total phenolic compounds	0	mg/l	0	mg/l	3	420.1	0.025 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Volatile Organic Compounds							
Acrolein	0	ug/l	0	ug/l	3	624.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Acrylonitrile	0	ug/l	0	ug/l	3	624.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bromoform	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Carbon tetrachloride	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorobenzene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chlorodibromomethane	3.29	ug/l	1.09	ug/l	3	624.1	1 <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chloroethane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-chloroethylvinyl ether	0	ug/l	0	ug/l	3	624.1	2 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chloroform	33.20	ug/l	15.86	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dichlorobromomethane	8.87	ug/l	2.95	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1-dichloroethane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2-dichloroethane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
trans-1,2-dichloroethylene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1-dichloroethylene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2-dichloropropane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,3-dichloropropylene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Ethylbenzene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Methyl bromide	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Methyl chloride	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Methylene chloride	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1,2,2-tetrachloroethane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Tetrachloroethylene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Toluene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1,1-trichloroethane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,1,2-trichloroethane	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Trichloroethylene	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Vinyl chloride	0	ug/l	0	ug/l	3	624.1	1 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Acid-Extractable Compounds							
p-chloro-m-cresol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-chlorophenol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dichlorophenol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dimethylphenol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4,6-dinitro-o-cresol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dinitrophenol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-nitrophenol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4-nitrophenol	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Pentachlorophenol	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Phenol	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4,6-trichlorophenol	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Base-Neutral Compounds							
Acenaphthene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Acenaphthylene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Anthracene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzidine	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzo(a)anthracene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzo(a)pyrene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
3,4-benzofluoranthene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Benzo(k)fluoranthene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-chloroethoxy) methane	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-chloroethyl) ether	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-chloroisopropyl) ether	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Bis (2-ethylhexyl) phthalate	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4-bromophenyl phenyl ether	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Butyl benzyl phthalate	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2-chloronaphthalene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
4-chlorophenyl phenyl ether	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Chrysene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
di-n-butyl phthalate	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
di-n-octyl phthalate	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dibenzo(a,h)anthracene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2-dichlorobenzene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,3-dichlorobenzene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,4-dichlorobenzene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
3,3-dichlorobenzidine	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Diethyl phthalate	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Dimethyl phthalate	8	ug/l	2.6	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,4-dinitrotoluene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
2,6-dinitrotoluene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method ¹	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	0	ug/l	0	ug/l	3	625.1	10 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fluoranthene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Fluorene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachlorobenzene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachlorobutadiene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachlorocyclo-pentadiene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Hexachloroethane	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Indeno(1,2,3-cd)pyrene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Isophorone	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Naphthalene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Nitrobenzene	0	ug/l	0	ug/l	3	625.1	5 <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodi-n-propylamine	0	ug/l	0	ug/l	3	625.1	5 <input checked="" type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodimethylamine	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
N-nitrosodiphenylamine	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Phenanthrene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
Pyrene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL
1,2,4-trichlorobenzene	0	ug/l	0	ug/l	3	625.1	5 <input type="checkbox"/> ML <input checked="" type="checkbox"/> MDL

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

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TABLE D. ADDITIONAL POLLUTANTS AS REQUIRED BY NPDES PERMITTING AUTHORITY

[illegible]

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

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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY

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

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

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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY

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

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

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP	Outfall Number 013	Form Approved 03/05/19 OMB No. 2040-0004	
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TABLE E. EFFLUENT MONITORING FOR WHOLE EFFLUENT TOXICITY						
The table provides response space for one whole effluent toxicity sample. Copy the table to report additional test results.						
	Test Number _____	Test Number _____	Test Number _____	Test Number _____	Test Number _____	Test Number _____
Acute Test Results Continued						
Other (describe)	See attached toxicity reports	See attached toxicity reports	See attached toxicity reports	See attached toxicity reports	See attached toxicity reports	See attached toxicity reports
Chronic Test Results						
NOEC	%	%	%	%	%	%
IC ₂₅	%	%	%	%	%	%
Control percent survival	%	%	%	%	%	%
Other (describe)						
Quality Control/Quality Assurance						
Is reference toxicant data available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was reference toxicant test within acceptable bounds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What date was reference toxicant test run (MM/DD/YYYY)?						
Other (describe)						

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EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU 1	SIU 2	SIU 3
Name of SIU	Blue Bell Creameries	Nemak USA, INC	Heritage Plastics, INC
Mailing address (street or P.O. box)	423 North Norton Avenue	2170 Old Sylacauga Highway	851 Sylacauga Fayetteville Highway
City, state, and ZIP code	Sylacauga, AL 35150	Sylacauga, AL 35150	Sylacauga, AL 35151
Description of all industrial processes that affect or contribute to the discharge.	Industrial wastewater resulting from non-contact cooling water, process wastewater, and sanitation wastewater from the manufacturing of ice cream products	Process wastewater resulting from die casting operations	Wastewater resulting from the compounding of pelletized plastic and mineral materials
List the principal products and raw materials that affect or contribute to the SIU's discharge.	Milk, fruit and sanitation chemicals	Aluminum	Carbonate and plastic materials
Indicate the average daily volume of wastewater discharged by the SIU.	140,000 gpd	25,000 gpd	40,000 gpd
How much of the average daily volume is attributable to process flow?	130,000 gpd	24,500 gpd	30,000 gpd
How much of the average daily volume is attributable to non-process flow?	10,000 gpd	500 gpd	10,000 gpd
Is the SIU subject to local limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the SIU subject to categorical standards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU <u>1</u>	SIU <u>2</u>	SIU <u>3</u>
Under what categories and subcategories is the SIU subject?	IU356100159	IU356100291	IU356100309
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, describe.	N/A	N/A	N/A

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU <u>4</u>	SIU <u>5</u>	SIU <u>6</u>
Name of SIU	IKO Southeast, Inc.	B&H Transfer	Imerys Carbonite
Mailing address (street or P.O. box)	1708 Sylacauga Fayetteville Hwy	P.O. Box 151	P.O. Box 330
City, state, and ZIP code	Sylacauga, AL 35151	Sandersville, GA 31082	Sylacauga, AL 35150
Description of all industrial processes that affect or contribute to the discharge.	Process wastewater resulting from the manufacturing of asphalt roofing materials and boiler blowdown	Process wastewater resulting from truck tank washout of calcium carbonate and kaolin clay	Wastewater resulting from the mining of marble and processing operations
List the principal products and raw materials that affect or contribute to the SIU's discharge.	Asphalt	Calcium Carbonate and Kaolin Clay	Marble
Indicate the average daily volume of wastewater discharged by the SIU.	8,000 gpd	11,000 gpd	16,000 gpd
How much of the average daily volume is attributable to process flow?	gpd	gpd	gpd
How much of the average daily volume is attributable to non-process flow?	gpd	gpd	gpd
Is the SIU subject to local limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the SIU subject to categorical standards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EPA Identification Number 100000152023	NPDES Permit Number AL0020001	Facility Name J. Earl Ham WWTP
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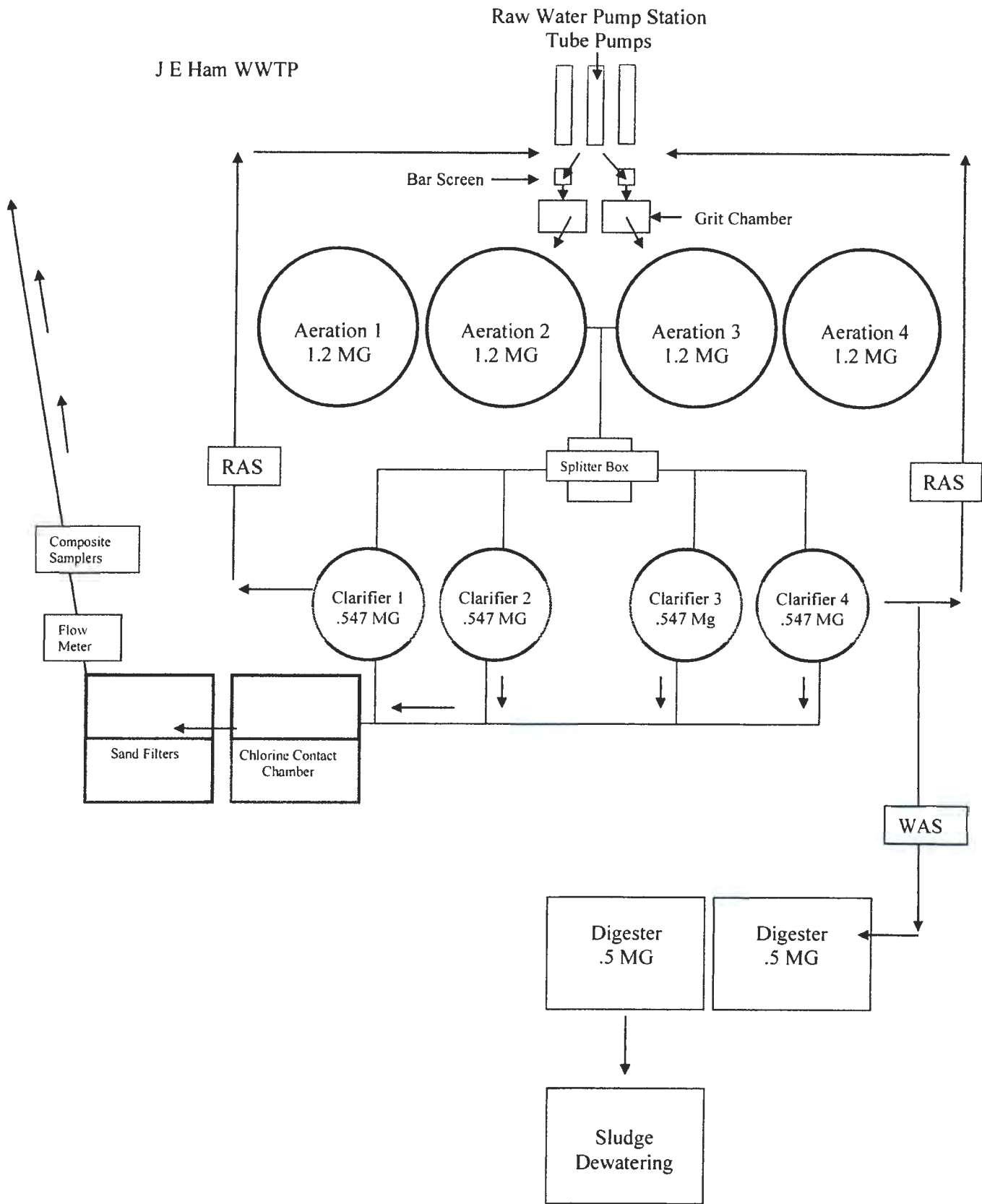
Form Approved 03/05/19
OMB No. 2040-0004

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU <u>4</u>	SIU <u>5</u>	SIU <u>6</u>
Under what categories and subcategories is the SIU subject?	IU356100306	IU356100307	IU356100240
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, describe.	N/A	N/A	N/A

J E Ham WWTP





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FEB 13 2025

IND/MUN BRANCH
WATER DIVISION





Environmental Resource Analysts, Inc.

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

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

Laboratory Testing Report

Sample #: 314012

Prepared For:

Sylacauga Utilities Board
PO Box 207
Sylacauga, AL 35150

Attention: Steven Morris

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.

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DEC 10 2024

IND/MUN CH
WATER DIV 11



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: Sylacauga Utilities Board
PO Box 207
Sylacauga, AL 35150

Project: 69-0223
Date Received: 2/1/2023



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Sample Number: 314012-01				Collection Date: 02/01/2023 9:00			
Sample Type: Grab				Location: Effluent Permit Renewal			

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
Cyanide	<0.0040	mg/L	0.00400	0.0100	EPA 335.4	02/02/23 16:48	BG	
Total Phenols	<0.0250	mg/L	0.0250	0.0500	EPA 420.1	02/08/23 08:55	DP	

Organics

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
624.1 WW VOC								
1,1,1-Trichloroethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O
1,1,2,2-Tetrachloroethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
1,1,2-Trichloroethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
1,1-Dichloroethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O
1,1-Dichloroethylene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
1,2-Dichlorobenzene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
1,2-Dichloroethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
1,2-Dichloropropane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
1,3-Dichlorobenzene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O *
1,4-Dichlorobenzene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
2-Chloroethyl Vinyl Ether	<2.0	ug/L	2	2	EPA 624.1	02/10/23 21:04	KC	
Acrolein	<10	ug/L	10	10	EPA 624.1	02/10/23 21:04	KC	O,H1
Acrylonitrile	<10	ug/L	10	10	EPA 624.1	02/10/23 21:04	KC	
Benzene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Bromodichloromethane	1.3	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Bromoform	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O
Bromomethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Carbon Tetrachloride	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O
Chlorobenzene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Chloroethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Chloroform	9.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Chloromethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Cis-1,3-Dichloropropene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Dibromochloromethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O
Ethylbenzene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	*
Methylene Chloride	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Tetrachloroethylene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Toluene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	O
Trans-1,2 Dichloroethylene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Trans-1,3-Dichloropropene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Organics

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
624.1 WW VOC								
Trichloroethylene	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Trichlorofluoromethane	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Vinyl Chloride	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Xylenes, m&p	<2.0	ug/L	2	2	EPA 624.1	02/10/23 21:04	KC	*
Xylenes, o	<1.0	ug/L	1	1	EPA 624.1	02/10/23 21:04	KC	
Xylenes, Total	<2.0	ug/L	2	2	EPA 624.1	02/10/23 21:04	KC	
1,2-Dichloroethane-d4	98.8	%				02/10/23 21:04	KC	*
Toluene-d8	100	%				02/10/23 21:04	KC	*
4-Bromofluorobenzene	96.9	%				02/10/23 21:04	KC	*

Surrogate	Recovery %	Target Range
1,2-Dichloroethane-d4	98.8	70-130
Toluene-d8	100	70-130
4-Bromofluorobenzene	96.9	70-130

625.1 WW SVOC								
1,2,4-Trichlorobenzene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
1,2-Diphenylhydrazine as Azob	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2,4,6-Trichlorophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2,4-Dichlorophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2,4-Dimethylphenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2,4-Dinitrophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2,4-Dinitrotoluene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2,6-Dinitrotoluene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2-Chloronaphthalene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2-Chlorophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
2-Nitrophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
3,3'-Dichlorobenzidine	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
4,6-Dinitro-2-Methylphenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O
4-Bromophenyl-phenyl ether	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
4-Chloro-3-Methylphenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
4-Chlorophenyl phenylether	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
4-Nitrophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Acenaphthene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Acenaphthylene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Anthracene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Benzidine	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O
Benzo(a)anthracene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Organics

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
625.1 WW SVOC								
Benzo(a)pyrene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Benzo(b)fluoranthene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Benzo(g,h,i)perylene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Benzo(k)fluoranthene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O
Bis(2-Chloroethoxy) Methane	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Bis(2-Chloroethyl) Ether	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Bis(2-chloroisopropyl) Ether	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	*
Bis(2-Ethylhexyl) Phthalate	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Butylbenzyl phthalate	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Chrysene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Dibenz(a,h)anthracene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Diethyl Phthalate	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Dimethyl Phthalate	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Di-n-butyl Phthalate	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Di-n-octyl Phthalate	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O
Fluoranthene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Fluorene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Hexachlorobenzene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Hexachlorobutadiene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Hexachlorocyclopentadiene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O1,O
Hexachloroethane	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Indeno(1,2,3-cd)pyrene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Isophorone	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Naphthalene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Nitrobenzene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
n-Nitrosodimethylamine	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O1
n-Nitrosodi-n-propylamine	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
n-Nitrosodiphenylamine	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Pentachlorophenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Phenanthrene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Phenol	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	
Pyrene	<10.0	ug/L	10	10	EPA 625.1	02/09/23 15:59	AO	O,O1
2-Fluorophenol	17.5	%				02/09/23 15:59	AO	*
Phenol d5	10.8	%				02/09/23 15:59	AO	*
Nitrobenzene d5	50.3	%				02/09/23 15:59	AO	*
2-Fluorobiphenyl	52.7	%				02/09/23 15:59	AO	*
2,4,6-Tribromophenol	42.1	%				02/09/23 15:59	AO	*



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Organics

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
625.1 WW SVOC								
p-Terphenyl-d14	125	%				02/09/23 15:59	AO	*
Surrogate			Recovery %		Target Range			
2-Fluorophenol			17.5					
Phenol d5			10.8		9-110			
Nitrobenzene d5			50.3		15-120			
2-Fluorobiphenyl			52.7		17-135			
2,4,6-Tribromophenol			42.1		17-112			
p-Terphenyl-d14			125		5-173			

Sample Number: 314012-02

Collection Date: 02/01/2023 5:40

Sample Type: Composite

Location: Effluent Permit Renewal

Test	Result	Units	MDL	PQL	Method	Date / Time	Analyst	Qualifier
Antimony	<0.23	ug/L	0.23	1.0	EPA 200.8	02/08/23 16:08	JA	
Arsenic	<0.64	ug/L	0.64	1.0	EPA 200.8	02/08/23 16:08	JA	
Beryllium	<0.15	ug/L	0.15	1.0	EPA 200.8	02/08/23 16:08	JA	
Cadmium	<0.24	ug/L	0.24	1.0	EPA 200.8	02/08/23 16:08	JA	
Chromium	<1.5	ug/L	1.5	5.0	EPA 200.8	02/08/23 16:08	JA	
Copper	8.5	ug/L	0.37	1.0	EPA 200.8	02/08/23 16:08	JA	
Hardness	130	mg/L CaCO3	19.2	25.0	EPA 130.1	02/03/23 14:01		*
Lead	<0.28	ug/L	0.28	1.0	EPA 200.8	02/08/23 16:08	JA	
Nickel	1.7	ug/L	0.76	1.0	EPA 200.8	02/08/23 16:08	JA	
Selenium	<0.41	ug/L	0.41	1.0	EPA 200.8	02/08/23 16:08	JA	
Silver	<0.25	ug/L	0.25	1.0	EPA 200.8	02/08/23 16:08	JA	
Thallium	<0.60	ug/L	0.60	1.0	EPA 200.8	02/08/23 16:08	JA	
Zinc	18.8	ug/L	0.90	1.00	EPA 200.8	02/08/23 16:08	JA	

Sample Number: 314012-03

Collection Date: 02/01/2023 8:45

Sample Type: Grab

Location: Field Blank



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

MDL: Method Detection Limit

PQL: Practical Quantitation Limit

The report was revised to correct the Acrolein result. There was a baseline error on the instrument which was inadvertently called as the peak. The peak was not present.

121024EJC

314012-01f Internal Standard requirements failed for EPA 625.1.

314012-01f Tailing factor requirements failed for EPA 625.1.

Qualifiers

- HI = Sample analysis performed past holding time.
- O = The Continuing Calibration Verification Standard recovery was not within acceptable limits.
- OI = The Laboratory Control Standard recovery was not within acceptable limits.
- * = ERA is not TNI accredited for this analyte.

This report was reviewed for completeness and approved.

Date Complete: 03/06/2023

Dyana Hughes, Reporting Manager

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

Erin Consuegra, Technical Manager

3



CHAIN OF CUSTODY



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Client: Sylacauga WWTP		G or C	Composite Sample(s)		
Project: 69-0223			Subsample Frequency	First Subsample Date/Time	Last Subsample Date/Time
Sample No.	314012-01	Grab			
Location	Effluent Permit Renewal				
Collector	Steven Mond				
Date/Time Sample	2-1-2023/9:45 AM				

Sample No.	314012-03	Grab			
Location	Field Blank				
Collector	Steven Mond				
Date/Time Sample	2-1-2023/8:45 AM				

Client: Sylacauga WWTP		G or C	Composite Sample(s)		
Project: 69-0223			Subsample Frequency	First Subsample Date/Time	Last Subsample Date/Time
Sample No.	314012-02	Comp	250mL	1-31-23	2-1-23
Location	Effluent Permit Renewal		HR	6:40	5:40
Collector	Steven Mond				
Date/Time Sample	2-1-2023/8:45 AM				

FEB-1-2023

For Client Use:

Relinquished To
Sealed Container: ☒

Relinquished By: Steven A. Mond Date/Time: 2-1-2023/9:10 AM Received By: #3 Date/Time: 2/1/23 1030
Relinquished By: _____ Date/Time: _____ Received By: _____ Date/Time: _____
Relinquished By: _____ Date/Time: _____ Received By: _____ Date/Time: _____

For Lab Use:

Sample	Preservation	Analysis	Preservation CK	Sample	Preservation	Analysis	Preservation CK
-01A	H2SO4	Total Phenols	pH≤2 Rcvd <input checked="" type="checkbox"/>	-01B	NaOH	Cyanide-WW	pH≤12 Rcvd <input checked="" type="checkbox"/>
-01C	Sodium Thiosulfate	624.1 WW VOC	Rcvd <input type="checkbox"/>	-01D	Sodium Thiosulfate	Duplicate - WW VOC	Rcvd <input type="checkbox"/>
-01E	Sodium Thiosulfate	Duplicate - WW VOC	Rcvd <input type="checkbox"/>	-01F	Sodium Sulfite	625.1 WW SVOC	Rcvd <input type="checkbox"/>
-01G	Sodium Sulfite	Duplicate - SVOC	Rcvd <input type="checkbox"/>	-01H	Sodium Sulfite	Duplicate - SVOC	Rcvd <input type="checkbox"/>
-01I		Subcontract - LL Hg	Rcvd <input type="checkbox"/>	-02A	None	Hardness WW	Rcvd <input type="checkbox"/>
-02B	HNO3	200.8-Ag, 200.8-As, 200.8-Be, 200.8-Cd, 200.8-Cr, 200.8-Cu, 200.8-Ni, 200.8-Pb, 200.8-Sb, 200.8-Se, 200.8-Tl, 200.8-Zn	pH≤2 Rcvd <input type="checkbox"/>	-03A		Subcontract - LL Hg	Rcvd <input type="checkbox"/>

Received at Lab By: VSDate/Time: 2/1/23 1530Date Kit Prepared: 1/26/23 GA

Page 8 of 22

Client Sylacauga WWSample # 314012

ERA Cooler Receipt Form

1. Condition of Cooler Upon Unpacking

A. Date & Time of Cooler Unpacking 2/1/23 1630 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 ☐ OtherC. Broken Bottles? ☒ No ☐ Yes If yes, which? _____D. Temperature °C 2.4 Thermometer ID: auburn
 Reason for incorrect ☐ Frozen ☐ Beginning of Cooling process ☐ Ice melted
 temp: (>6.0°C) ☐ 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 ☒ Yes, no preservatives needed
 have been checked and are in ☐ No, see preservative info
 the correct pH range? ☐ Not applicable
pH Strip Lot #: 2238198V/216021V

Additional Preservative information

 1 Preservative Type: _____
 2 Preservative Lot # _____
 3 Preservative Type: _____
 4 Preservative Lot # _____
D. Hexane Lot for O&G 220601/4 ☒ N/AE. Trip Blanks ☐ Absent ☐ Present ☒ N/A

4. Comments and Resolutions

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

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

5. Analyst Conformation

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

Primary Reviewer: KSSecondary Reviewer: RP



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

March 02, 2023

Erin Consuegra
Environmental Resource Analysts, Inc.
2975 Brown Court
Auburn, AL 36830

RE: Project: 69-0223
Pace Project No.: 35778548

Dear Erin Consuegra:

Enclosed are the analytical results for sample(s) received by the laboratory on February 10, 2023. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Green Bay

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Chelsea Gagne
chelsea.gagne@pacelabs.com
813-855-1844
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

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

CERTIFICATIONS

Project: 69-0223
Pace Project No.: 35778548

Pace Analytical Services Green Bay

1241 Bellevue Street, Green Bay, WI 54302

Florida/NELAP Certification #: E87948

Illinois Certification #: 200050

Kentucky UST Certification #: 82

Louisiana Certification #: 04168

Minnesota Certification #: 055-999-334

New York Certification #: 12064

North Dakota Certification #: R-150

South Carolina Certification #: 83006001

Texas Certification #: T104704529-21-8

Virginia VELAP Certification ID: 11873

Wisconsin Certification #: 405132750

Wisconsin DATCP Certification #: 105-444

USDA Soil Permit #: P330-21-00008

Federal Fish & Wildlife Permit #: 51774A

REPORT OF LABORATORY ANALYSIS

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SAMPLE SUMMARY

Project: 69-0223

Pace Project No.: 35778548

Lab ID	Sample ID	Matrix	Date Collected	Date Received
35778548001	314012-01	Water	02/01/23 10:00	02/10/23 11:20
35778548002	314012-03	Water	02/01/23 09:45	02/10/23 11:20

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Oldsmar, FL 34677
(813)881-9401

SAMPLE ANALYTE COUNT

Project: 69-0223
Pace Project No.: 35778548

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
35778548001	314012-01	EPA 1631E	MRP	1	PASI-G
35778548002	314012-03	EPA 1631E	MRP	1	PASI-G

PASI-G = Pace Analytical Services - Green Bay

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Oldsmar, FL 34677
(813)881-9401

ANALYTICAL RESULTS

Project: 69-0223
Pace Project No.: 35778548

Sample: 314012-01		Lab ID: 35778548001		Collected: 02/01/23 10:00		Received: 02/10/23 11:20		Matrix: Water	
Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level									
Analytical Method: EPA 1631E Preparation Method: EPA 1631E									
Pace Analytical Services - Green Bay									
Mercury	0.963	ng/L	0.50	0.20	1	02/27/23 15:32	03/01/23 15:13	7439-97-6	

REPORT OF LABORATORY ANALYSIS

Date: 03/02/2023 03:51 PM

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

ANALYTICAL RESULTS

Project: 69-0223
Pace Project No.: 35778548

Sample: 314012-03		Lab ID: 35778548002		Collected: 02/01/23 09:45		Received: 02/10/23 11:20		Matrix: Water	
Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level		Analytical Method: EPA 1631E Preparation Method: EPA 1631E Pace Analytical Services - Green Bay							
Mercury	ND	ng/L	0.50	0.20	1	02/27/23 15:32	03/01/23 15:07	7439-97-6	

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: 69-0223
Pace Project No.: 35778548

QC Batch: 438739 Analysis Method: EPA 1631E
QC Batch Method: EPA 1631E Analysis Description: 1631E Mercury
Laboratory: Pace Analytical Services - Green Bay
Associated Lab Samples: 35778548001, 35778548002

METHOD BLANK: 2520686 Matrix: Water
Associated Lab Samples: 35778548001, 35778548002

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	0.20	03/01/23 14:03	

METHOD BLANK: 2520687 Matrix: Water
Associated Lab Samples: 35778548001, 35778548002

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	0.20	03/01/23 15:26	

METHOD BLANK: 2520688 Matrix: Water
Associated Lab Samples: 35778548001, 35778548002

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	0.20	03/01/23 16:43	

METHOD BLANK: 2520689 Matrix: Water
Associated Lab Samples: 35778548001, 35778548002

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Mercury	ng/L	ND	0.53	0.21	03/01/23 14:09	

LABORATORY CONTROL SAMPLE: 2520690

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	4.81	96	79-121	

LABORATORY CONTROL SAMPLE: 2520691

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	5.01	100	79-121	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: 69-0223
Pace Project No.: 35778548

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:													2521990		2521991						
Parameter	Units	35778548001	MS	MSD	MS	MSD	MS	MSD	% Rec	% Rec	Max	Qual									
		Result	Spike	Spike									Result	Result	% Rec	% Rec	RPD	RPD			
Mercury	ng/L	0.963	2	2	2.75	2.86	90	95	75-125	4	24										

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:													2521992		2521993						
Parameter	Units	35780110001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual									
Mercury	ng/L	51.6	105	105	148	155	92	98	75-125	4	24										

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

Date: 03/02/2023 03:51 PM

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QUALIFIERS

Project: 69-0223
Pace Project No.: 35778548

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAP Institute.

REPORT OF LABORATORY ANALYSIS

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: 69-0223
Pace Project No.: 35778548

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
35778548001	314012-01	EPA 1631E	438739	EPA 1631E	439010
35778548002	314012-03	EPA 1631E	438739	EPA 1631E	439010

REPORT OF LABORATORY ANALYSIS



CHAIN OF CUSTODY



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

WO#: 35778548



35778548

Client: Sylacauga WWTP
Project: 69-0223

G or C	Composite Sample(s)		
	Subsample Frequency	First Subsample Date/Time	Last Subsample Date/Time

Sample No.	314012-01	Grab	
Location	Effluent Permit Renewal		
Collector			
Date/Time Sample	2/1/2023 9:00:00 AM		

G or C	Composite Sample(s)		
	Subsample Frequency	First Subsample Date/Time	Last Subsample Date/Time

Sample No.	314012-03	Grab	
Location	Field Blank		
Collector			
Date/Time Sample	2/1/2023 8:45:00 AM		

For Client Use:

Relinquished To
Sealed Container:

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

For Lab Use:

Sample Preservation	Analysis	Preservation CK	Sample Preservation	Analysis	Preservation CK
-01I	Subcontract - LL Hg	_____	-03A	Subcontract - LL Hg	_____

Received at Lab By: ups DS parcel

Date/Time: 2-10-23 1620

Date Prepared: _____

Relinquished by D. Dobbins
020823 1620 to UPS or Fed Ex



Sample Condition Upon Receipt Form (SCUR)

Project #
Project Manager:
Client:

WO#: 35778548

PM: CLG Due Date: 03/03/23
CLIENT: 37-ENVRES

Date and Initials of person:
Examining contents: EL 2/10/23
Label: _____
Deliver: _____
pH: _____

Thermometer Used: T202 Date: 2-10-23 Time: 1120 Initials: DS

State of Origin: FL

☐ For WV projects, all containers verified to $\pm 6^{\circ}\text{C}$

Cooler #1 Temp. $^{\circ}\text{C}$ 26.5 (Visual) +0.2 (Correction Factor) 26.7 (Actual)

☐ Samples on ice, cooling process has begun

Cooler #2 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun

Cooler #3 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun

Cooler #4 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun

Cooler #5 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun

Cooler #6 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun

Recheck for OOT $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual) Time: _____ Initials: _____

Courier: ☐ Fed Ex ☒ UPS ☐ USPS ☐ Client ☐ Commercial ☐ Pace ☐ Other _____

Shipping Method: ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☒ Ground ☐ International Priority
☐ Other _____

Billing: ☐ Recipient ☐ Sender ☐ Third Party ☐ Credit Card ☐ Unknown

Tracking # 12 IE23R403 5756 3776

Custody Seal on Cooler/Box Present: ☒ Yes ☐ No Seals Intact: ☒ Yes ☐ No Ice: Wet Blue Melted None

Packing Material: ☒ Bubble Wrap ☒ Bubble Bags ☐ None ☐ Other _____

Samples shorted to lab (if Yes, complete) Shorted Date: _____ Shorted Time: _____ Qty: _____

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature & Sampler Name COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
All Containers needing preservation are found to be in compliance with EPA recommendation:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Exceptions: Vials, Microbiology, O&G, PFAS		
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Preservation Information:

Preservative: _____
Lot #/Trace #: _____
Date: _____ Time: _____
Initials: _____

Comments/ Resolution (use back for additional comments):



ENVIRONMENTAL RESOURCE ANALYSTS, INC.

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

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

Sample #: 314012

All results are reported in Central Time.

Abbreviations

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

Additional Information

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

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

End of Report

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

DEC 07 2021

Mr. David Green, Water Quality Supervisor
Utilities Board of the City of Sylacauga
Post Office Box 207
Sylacauga, AL 35150

RE: Annual Toxicity Testing Request
NPDES Permit No. AL0020001
J. Earl Ham WWTP
Talladega County

Dear Mr. Green:

The Alabama Department of Environmental Management (the Department) is in receipt of your request for reduction of toxicity testing frequency from quarterly to annually.

Pursuant to Permit Condition IV.B.2.d of the permit, the J. Earl Ham WWTP has submitted results from four consecutive monitoring periods indicating the effluent from the above-referenced facility does not exhibit chronic toxicity.

Your request is hereby granted and the Permittee can return to annual testing in October as required by Permit Condition IV.B.2.d.

Should you have any questions concerning this matter, please contact Shanda Torbert by phone at (334) 271-7800 or by email at storbert@adem.alabama.gov.

Sincerely,

A handwritten signature in black ink that reads "Emily D. Anderson". The signature is written in a cursive, flowing style.

Emily D. Anderson, Chief
Municipal Section
Water Division

Pc: Shanda Torbert/ADEM



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
TOXICITY TEST REPORT SUMMARY

1. GENERAL:

NPDES PERMIT NO.: AL0020001 DSN: 012 06 COUNTY: TalladegaPermittee: Sylacauga Utilities BoardFacility Name: J. Earl Ham WWTP

Agent Submitting Report:

Lab Conducting Toxicity Test(s): ERA, 2975 Brown Ct, Auburn, AL 36830Months To Test: YearlyThis Report for Toxicity Test(s) Required for the Month of: OctScheduled Test(s): Yes X No Accelerated Test(s): Yes No XAccelerated Test Number of For Failed Scheduled Test Date:Test Type Required: -Hr Acute Screening: -Hr Acute Definitive:Short-term Chronic Screening: Short-term Chronic Definitive: XTest Organism: Ceriodaphnia dubiaTest Organism: Pimephales promelas

Sam	Date/Time Start	Date/Time Ended	Control	Date/Time Start	Date/Time Ended	Control
No.	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid
1	10/22/19 15:00	10/29/19 15:20	Yes	10/22/19 15:00	10/29/19 13:00	Yes

2.A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test	Eff.	Test Number											
		(1)			(2)			(3)			(4)		
Org.	Conc	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow
P.p.	97%	PASS	N/A	FAIL									
C.d.	97%	PASS	FAIL	N/A									

3. LABORATORY ANALYSES OF UNDILUTED SAMPLE(S):

SAMPLE	BOD5	TSS	NH3	pH	Alk	Hard	TRC	Cond
Id.	mg/l	mg/l	mg/l	su	mg/l	mg/l	mg/l	uS
1	N/A	N/A	<0.200	7.7	171	200	<0.06	709
2	N/A	N/A	<0.200	7.7	143	156	<0.06	708
3	N/A	N/A	<0.200	7.5	145	160	<0.06	764

Chemical Analyses Performed By (Lab): ERATotal 24-Hour Flow: (1) 1.271 MGD (2) 1.506 MGD (3) 1.593 MGD

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: David MearDATE: 11/22/19

FACILITY NAME: Sylacauga WWTP

NPDES #: AL0020001

DSN: 012 ~~023~~

DATE: 10/22/19

4. SAMPLE COLLECTION:

Split Samples: N/A X Yes ____ (Explain) _____Samples Collected as Specified in the NPDES Permit: Yes X No (Explain) _____Receiving Water: Shirtee CreekDesign Flow: 4.8 (MGD)

Sample Id.	Sample(s) Collected MM/DD/YY HHMM - MM/DD/YY HHMM	Arrival Temp. °C.	Used in Test(s) MM/DD/YY - MM/DD/YY
1	10/20/19 1015 - 10/21/19 0915	3.2	10/22/19 - 10/23/19
2	10/22/19 0800 - 10/23/19 0700	2.8	10/24/19 - 10/25/19
3	10/24/19 0820 - 10/25/19 0720	3.1	10/26/19 - 10/28/19

5. CONTROL/DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ °C.
MHRW	10/15/19	10/22/19	97	60	7.4	326	@ 25
MHRW	10/15/19	10/23/19	95	62	7.8	325	@ 25
MHRW	10/17/19	10/24/19	99	62	7.8	314	@ 25
MHRW	10/17/19	10/26/19	95	62	7.8	305	@ 25
MHRW	10/22/19	10/28/19	97	60	7.7	309	@ 25

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)					
P.p.	29-31 hr	Aquatic Bioassay Supply	97					
C.d.	0- 6 hr	ERA	97					

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org./Test Vessel	Replicates Per Conc.
P.p.	plastic beaker	500	250	10	4
C.d.	plastic beaker	25	20	1	10

Test Species	Temp. Range (°C.)	D.O. Range (mg/L)	pH Range (su)	Light Intensity Average (ft.-c.)
P.p.	24.0 - 25.9	5.5 - 10.7	7.3 - 7.9	75
C.d.	24.0 - 25.9	5.2 - 10.7	7.1 - 8.0	75

7. FEEDING:

Not Fed: ____ Fed Daily: X Fed Irregular: ____ (Explain in Comments Below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.130 mL Suspension Containing 1.85 mg/L TS Daily.Algae: Fed 0.130 mL Suspension Containing 3 x 10⁷ Algal Cells/mL Daily.

COMMENTS:

FACILITY NAME: Sylcauga WWTPNPDES #: AL0020001DSN: 012 06 043DATE: 10/22/19**8. REFERENCE TOXICANT TESTS:**TOXICANT: C.d.: NaCl; P.p.: KCl SOURCE: Fisher ScientificSolution Concentration Unit: mg/L g/L X % Other (specify) **Chronic:**

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (Control to Highest Conc.)						
P.p.	10/08/19-10/15/19	MHRW	0	2.0	4.0	6.0	8.0	10.0	
C.d.	10/08/19-10/15/19	MHRW	0	0.5	1.0	1.5	2.0	2.5	
Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit					NUMBER (N)	
P.p.	Survival	0.5	0.5 - 0.75					9	
P.p.	Growth	0.5	0.5 - 0.75					9	
C.d.	Survival	1.5	0.5 - 1.5					20	
C.d.	Reproduction	1.0	0.25- 1.0					20	

Data on File with ADEM Toxics Unit

9. TEST CONDITION VARIABILITY:**9.A. Deviations From Standard Test Conditions:**None**9.B. Test Solution Manipulations or Test Modifications:**None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies Of Chain-of-Custody Forms, Reference Toxicant Tests, And Raw Data (Bench Sheets) Pertaining To Physical, Chemical, And Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

11.C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):TEST ORGANISM: Ceriodaphnai dubiaWere Neonates Used to Begin the Test Within 8 hours of the same age?: YesDid 60% of the CONTROL Females Produce Their Third Brood? YES: X NO: **SURVIVAL**CHRONIC TOXICITY INDICATED: YES NO XNO SURVIVAL STATISTICAL ANALYSIS NECESSARY: XCONTROL(%) 24h 100 48h 100 End 80 EFFLUENT : 24h 100 48h 100 End 90Fishers Exact Test: A = , B = , a = , b =

012 06

FACILITY NAME: Sylacauga WWTP NPDES #: AL0020001 DSN: 013 DATE: 10/22/19

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES X NO

CONTROL: 22.9 EFFLUENT: 18.7

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: Yes No X

Test Statistic: 0.801 Critical Value: 0.868 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 2.96 Critical F: 6.54

/ Test Statistic: / Test Critical Value:

Sample Rank Sum: 81.5 #Reps.: 4 Critical Rank Sum: 82 (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES NO X

CONTROL(%) 24h 100 48h 100 7day 95 EFFLUENT: 24h 100 48h 100 7day 90

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: Yes X No

Test Statistic: 0.956 Critical Value: 0.749 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 1.75 Critical F: 47.5

/ Test Statistic: 0.976 / Test Critical Value: 1.943

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES X NO

CONTROL: 0.764 mg EFFLUENT: 0.668 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY: X

Normally Distributed: Yes X No

Test Statistic: 0.879 Critical Value: 0.749 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 4.415 Critical F: 47.5

/ Test Statistic: 2.185 / Test Critical Value: 1.943

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY

1. GENERAL:

NPDES PERMIT NO.: AL0020001 DSN: 012 013 COUNTY: Talladega
 Permittee: Sylacauga Utilities Board
 Facility Name: J. Earl Ham WWTP
 Agent Submitting Report:
 Lab Conducting Toxicity Test(s): ERA, 2975 Brown Ct, Auburn, AL 36830
 Months To Test: Yearly
 This Report for Toxicity Test(s) Required for the Month of: Nov
 Scheduled Test(s): Yes No X Accelerated Test(s): Yes X No
 Accelerated Test Number 2 of 2 For Failed Scheduled Test Date: 10/22/19
 Test Type Required: -Hr Acute Screening: -Hr Acute Definitive:
 Short-term Chronic Screening: Short-term Chronic Definitive: X

Test Organism: Ceriodaphnia dubiaTest Organism: Pimephales promelas

Sam	Date/Time Start	Date/Time Ended	Control	Date/Time Start	Date/Time Ended	Control
No.	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid
1	11/19/19 10:30	11/26/19 12:00	Yes	11/19/19 10:30	11/26/19 12:00	Yes

2.A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test	Eff.	Test Number											
		(1)			(2)			(3)			(4)		
Org.	Conc	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow
P.p.	97%	PASS	N/A	PASS									
C.d.	97%	PASS	PASS	N/A									

3. LABORATORY ANALYSES OF UNDILUTED SAMPLE(S):

SAMPLE	BOD5	TSS	NH3	pH	Alk	Hard	TRC		Cond
Id.	mg/l	mg/l	mg/l	su	mg/l	mg/l	mg/l		uS
1	N/A	N/A	<0.200	7.9	139	156	<0.06		556
2	N/A	N/A	<0.200	8.2	135	160	<0.06		595
3	N/A	N/A	<0.200	7.5	151	164	<0.06		615

Chemical Analyses Performed By (Lab): ERATotal 24-Hour Flow: (1) 1.828 MGD (2) 1.773 MGD (3) 1.657 MGD

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: 12/16/19

012

FACILITY NAME: Sylcauga WWTPNPDES #: AL0020001DSN: 012 06 013DATE: 11/19/19**8. REFERENCE TOXICANT TESTS:**TOXICANT: C.d.: NaCl; P.p.: KCl SOURCE: Fisher ScientificSolution Concentration Unit: mg/L _____ g/L X % _____ Other(specify) _____**Chronic:**

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (Control to Highest Conc.)						
P.p.	11/05/19-11/12/19	MHRW	0	0.25	0.50	0.75	1.0	2.0	
C.d.	11/12/19-11/19/19	MHRW	0	0.5	1.0	1.5	2.0	2.5	
Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit					NUMBER (N)	
P.p.	Survival	0.5	0.5 - 0.75					12	
P.p.	Growth	0.25	0.25- 0.75					12	
C.d.	Survival	1.5	0.5 - 1.5					20	
C.d.	Reproduction	1.0	0.25- 1.0					20	

Data on File with ADEM Toxics Unit

9. TEST CONDITION VARIABILITY:**9.A. Deviations From Standard Test Conditions:**None**9.B. Test Solution Manipulations or Test Modifications:**None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies Of Chain-of-Custody Forms, Reference Toxicant Tests, And Raw Data (Bench Sheets) Pertaining To Physical, Chemical, And Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

11.C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):TEST ORGANISM: Ceriodaphnai dubiaWere Neonates Used to Begin the Test Within 8 hours of the same age?: YesDid 60% of the CONTROL Females Produce Their Third Brood? YES: X NO: _____**SURVIVAL**CHRONIC TOXICITY INDICATED: YES _____ NO XNO SURVIVAL STATISTICAL ANALYSIS NECESSARY: XCONTROL(%) 24h 100 48h 100 End 100 EFFLUENT : 24h 100 48h 100 End 90Fishers Exact Test: A = 10 , B = 10 , a = 10 , b = 9

FACILITY NAME: Sylacauga WWTP

NPDES #: AL0020001

012 01
DSN: 013 DATE: 11/19/19

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 20.6 EFFLUENT: 25.3

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

t Test Statistic: t Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL(%) 24h 100 48h 100 7day 98 EFFLUENT: 24h 100 48h 100 7day 90

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: Yes ☒ No ☐

Test Statistic: 0.848 Critical Value: 0.749 (Parametric)

Equal Variance: ☒ Unequal Variance: ☐

F Statistic: 4.67 Critical F: 47.5

t Test Statistic: 1.152 t Test Critical Value: 1.943

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 0.639 mg EFFLUENT: 0.652 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

t Test Statistic: t Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY

1. GENERAL:

NPDES PERMIT NO.: AL0020001 DSN: 012 06 COUNTY: Talladega
 Permittee: Sylacauga Utilities Board
 Facility Name: J. Earl Ham WWTP
 Agent Submitting Report:
 Lab Conducting Toxicity Test(s): ERA, 2975 Brown Ct, Auburn, AL 36830
 Months To Test: Yearly
 This Report for Toxicity Test(s) Required for the Month of: Nov
 Scheduled Test(s): Yes No X Accelerated Test(s): Yes X No
 Accelerated Test Number 1 of 2 For Failed Scheduled Test Date: 10/22/19
 Test Type Required: -Hr Acute Screening: -Hr Acute Definitive:
 Short-term Chronic Screening: Short-term Chronic Definitive: X

Test Organism: Ceriodaphnia dubiaTest Organism: Pimephales promelas

Sam	Date/Time Start	Date/Time Ended	Control	Date/Time Start	Date/Time Ended	Control
No.	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid
1	11/12/19 15:00	11/19/19 13:00	Yes	11/12/19 14:00	11/19/19 15:00	Yes

2.A. SUMMARY OF RESULTS FOR SCREENING TESTS:

		Test Number											
Test	Eff.	(1)			(2)			(3)			(4)		
Org.	Conc	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow
P.p.	97%	PASS	N/A	FAIL									
C.d.	97%	PASS	PASS	N/A									

3. LABORATORY ANALYSES OF UNDILUTED SAMPLE(S):

SAMPLE	BOD5	TSS	NH3	pH	Alk	Hard	TRC	Cond
Id.	mg/l	mg/l	mg/l	su	mg/l	mg/l	mg/l	uS
1	N/A	N/A	<0.200	7.4	141	152	<0.06	603
2	N/A	N/A	<0.200	7.5	133	166	<0.06	568
3	N/A	N/A	<0.200	7.5	145	164	<0.06	678

Chemical Analyses Performed By (Lab): ERA
 Total 24-Hour Flow: (1) 1.582 MGD (2) 8.265 MGD (3) 2.095 MGD

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: Dad MuDATE: 12/16/19

FACILITY NAME: Sylacauga WWTPNPDES #: AL0020001DSN: 012012 *db*DATE: 11/12/19**4. SAMPLE COLLECTION:**Split Samples: N/A X Yes (Explain) Samples Collected as Specified in the NPDES Permit: Yes X No (Explain) Receiving Water: Shirtee CreekDesign Flow: 4.8 (MGD)

Sample Id.	Sample(s) Collected MM/DD/YY HHMM - MM/DD/YY HHMM	Arrival Temp. °C.	Used in Test(s) MM/DD/YY - MM/DD/YY
1	11/10/19 0700 - 11/11/19 0600	2.8	11/12/19 - 11/13/19
2	11/12/19 0700 - 11/13/19 0600	4.0	11/14/19 - 11/15/19
3	11/14/19 0700 - 11/15/19 0600	5.7	11/16/19 - 11/18/19

5. CONTROL/DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ °C.
MHRW	11/07/19	11/12/19	83	60	7.8	358	@ 25
MHRW	11/07/19	11/13/19	83	62	7.8	329	@ 25
MHRW	11/11/19	11/14/19	87	62	7.8	332	@ 25
MHRW	11/11/19	11/15/19	89	60	7.8	326	@ 25
MHRW	11/14/19	11/17/19	99	62	7.8	309	@ 25
MHRW	11/14/19	11/18/19	85	58	7.7	329	@ 25

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)				
P.p.	28-30 hr	Aquatic Bioassay Supply	97				
C.d.	0- 8 hr	ERA	97				

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org./Test Vessel	Replicates Per Conc.
P.p.	plastic beaker	500	250	10	4
C.d.	plastic beaker	25	20	1	10

Test Species	Temp. Range (°C.)	D.O. Range (mg/L)	pH Range (su)	Light Intensity Average (ft.-c.)
P.p.	24.0 - 25.9	6.7 - 10.9	7.1 - 8.1	75
C.d.	24.0 - 25.9	7.8 - 10.9	7.1 - 8.2	75

7. FEEDING:Not Fed: Fed Daily: X Fed Irregular: (Explain in Comments Below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.130 mL Suspension Containing 1.85 mg/L TS Daily.Algae: Fed 0.130 mL Suspension Containing 3 x 10⁷ Algal Cells/mL Daily.

COMMENTS:

FACILITY NAME: Sylcauga WWTPNPDES #: AL0020001DSN: 013DATE: 11/12/19**8. REFERENCE TOXICANT TESTS:**TOXICANT: C.d.: NaCl; P.p.: KCl SOURCE: Fisher ScientificSolution Concentration Unit: mg/L _____ g/L X % _____ Other(specify)**Chronic:**

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (Control to Highest Conc.)						
P.p.	11/05/19-11/12/19	MHRW	0	0.25	0.50	0.75	1.0	2.0	
C.d.	11/12/19-11/19/19	MHRW	0	0.5	1.0	1.5	2.0	2.5	
Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit					NUMBER (N)	
P.p.	Survival	0.5	0.5 - 0.75					12	
P.p.	Growth	0.25	0.25- 0.75					12	
C.d.	Survival	1.5	0.5 - 1.5					20	
C.d.	Reproduction	1.0	0.25- 1.0					20	

Data on File with ADEM Toxics Unit

9. TEST CONDITION VARIABILITY:**9.A. Deviations From Standard Test Conditions:**None**9.B. Test Solution Manipulations or Test Modifications:**None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies Of Chain-of-Custody Forms, Reference Toxicant Tests, And Raw Data (Bench Sheets) Pertaining To Physical, Chemical, And Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

11.C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):TEST ORGANISM: Ceriodaphnai dubiaWere Neonates Used to Begin the Test Within 8 hours of the same age?: YesDid 60% of the CONTROL Females Produce Their Third Brood? YES: X NO:**SURVIVAL**CHRONIC TOXICITY INDICATED: YES _____ NO XNO SURVIVAL STATISTICAL ANALYSIS NECESSARY: XCONTROL(%) 24h 100 48h 100 End 100 EFFLUENT : 24h 100 48h 100 End 100

Fishers Exact Test: A = _____, B = _____, a = _____, b = _____

FACILITY NAME: Sylacauga WWTP NPDES #: AL0020001 DSN: 012 06-073 DATE: 11/12/19

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 24.5 EFFLUENT: 31.1

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

/ Test Statistic: / Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL(%) 24h 100 48h 100 7day 98 EFFLUENT: 24h 100 48h 100 7day 85

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: Yes ☒ No ☐

Test Statistic: 0.935 Critical Value: 0.749 (Parametric)

Equal Variance: ☒ Unequal Variance: ☐

F Statistic: 4.98 Critical F: 47.5

/ Test Statistic: 1.821 / Test Critical Value: 1.943

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES ☒ NO ☐

CONTROL: 0.699 mg EFFLUENT: 0.563 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☒ No ☐

Test Statistic: 0.929 Critical Value: 0.749 (Parametric)

Equal Variance: ☒ Unequal Variance: ☐

F Statistic: 1.76 Critical F: 47.5

/ Test Statistic: 2.895 / Test Critical Value: 1.943

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY

1. GENERAL:

NPDES PERMIT NO.: AL0020001 DSN: 012 COUNTY: Talladega
 Permittee: Sylacauga Utilities Board
 Facility Name: J. Earl Ham WWTP
 Agent Submitting Report:
 Lab Conducting Toxicity Test(s): ERA, 2975 Brown Ct, Auburn, AL 36830
 Months To Test: Yearly
 This Report for Toxicity Test(s) Required for the Month of: December
 Scheduled Test(s): Yes ☐ No ☒ Accelerated Test(s): Yes ☒ No ☐
 Accelerated Test Number 3 of 3 For Failed Scheduled Test Date: 10/22/19
 Test Type Required: ☐ -Hr Acute Screening: ☐ -Hr Acute Definitive: ☐
 Short-term Chronic Screening: ☐ Short-term Chronic Definitive: ☒

Test Organism: Ceriodaphnia dubia				Test Organism: Pimephales promelas			
Sam	Date/Time Start	Date/Time Ended	Control	Date/Time Start	Date/Time Ended	Control	
No.	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid	
1	12/03/19 14:30	12/10/19 12:30	Yes	12/03/19 11:10	12/10/19 13:00	Yes	

2.A. SUMMARY OF RESULTS FOR SCREENING TESTS:

		Test Number											
Test	Eff.	(1)			(2)			(3)			(4)		
Org.	Conc	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow
P.p.	97%	PASS	N/A	PASS									
C.d.	97%	PASS	PASS	N/A									

3. LABORATORY ANALYSES OF UNDILUTED SAMPLE(S):

SAMPLE	BOD5	TSS	NH3	pH	Alk	Hard	TRC		Cond
Id.	mg/l	mg/l	mg/l	su	mg/l	mg/l	mg/l		uS
1	N/A	N/A	<0.200	7.4	139	151	<0.06		488
2	N/A	N/A	<0.200	7.6	131	152	<0.06		466
3	N/A	N/A	<0.200	7.5	131	166	<0.06		162

Chemical Analyses Performed By (Lab): ERATotal 24-Hour Flow: (1) 1.904 MGD (2) 1.771 MGD (3) 1.714 MGD

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: [Signature] DATE: 1-17-2020

4. SAMPLE COLLECTION:

Samples Collected as Specified in the NPDES Permit: Yes X No (Explain)

Design Flow: 4.8 (MGD)

Sample Id.	Sample(s) Collected MM/DD/YY HHMM - MM/DD/YY HHMM	Arrival Temp.°C.	Used in Test(s) MM/DD/YY - MM/DD/YY
1	12/01/19 0725 - 12/02/19 0625	0.8	12/03/19 - 12/04/19
2	12/03/19 0755 - 12/04/19 0655	4.1	12/05/19 - 12/06/19
3	12/05/19 0740 - 12/06/19 0640	3.1	12/07/19 - 12/09/19

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ °C.
MHRW	11/21/19	12/03/19	89	62	7.8	307	@ 25
MHRW	11/26/19	12/04/19	91	60	7.7	320	@ 25
MHRW	11/26/19	12/05/19	81	58	7.7	320	@ 25
MHRW	11/26/19	12/06/19	81	60	7.8	313	@ 25
MHRW	11/26/19	12/07/19	83	62	7.8	310	@ 25
MHRW	12/03/19	12/08/19	81	57	7.8	318	@ 25
MHRW	12/03/19	12/09/19	83	59	7.8	306	@ 25

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)				
P.p.	28-30 hr	Aquatic Bioassay Supply	97				
C.d.	0- 8 hr	ERA	97				

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org./Test Vessel	Replicates Per Conc.
P.p.	plastic beaker	500	250	10	4
C.d.	plastic beaker	25	20	1	10

Test Species	Temp. Range (°C.)	D.O. Range (mg/L)	pH Range (su)	Light Intensity Average (ft.-c.)
P.p.	24.0 - 26.0	7.3 - 9.3	7.4 - 8.3	75
C.d.	24.0 - 26.0	6.4 - 10.5	7.2 - 8.0	75

Algae: Fed 0.130 mL Suspension Containing 3×10^7 Algal Cells/mL Daily.

page 2 of 4

FACILITY NAME: Sylcauga WWT NPDES #: AL0020001 DSN: 012 DATE: 12/03/19

8. REFERENCE TOXICANT TESTS:

TOXICANT: C.d.: NaCl; P.p.: KCl SOURCE: Fisher Scientific
Solution Concentration Unit: mg/L ____ g/L X % ____ Other (specify) ____

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (Control to Highest Conc.)					
P.p.	12/10/19-12/17/19	MHRW	0	0.25	0.50	0.75	1.0	2.0
C.d.	12/17/19-12/24/19	MHRW	0	0.5	1.0	1.5	2.0	2.5
Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit					NUMBER (N)
P.p.	Survival	0.5	0.5 - 0.75					12
P.p.	Growth	0.50	0.25 - 0.75					12
C.d.	Survival	1.5	0.5 - 1.5					20
C.d.	Reproduction	0.5	0.25 - 1.0					20

Data on File with ADEM Toxics Unit

9. TEST CONDITION VARIABILITY:

9.A. Deviations From Standard Test Conditions:

None

9.B. Test Solution Manipulations or Test Modifications:

None

10. REQUIRED REPORT ATTACHMENTS:

Attach Copies Of Chain-of-Custody Forms, Reference Toxicant Tests, And Raw Data (Bench Sheets) Pertaining To Physical, Chemical, And Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

11.C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):

TEST ORGANISM: Ceriodaphnai dubia

Were Neonates Used to Begin the Test Within 8 hours of the same age?: Yes

Did 60% of the CONTROL Females Produce Their Third Brood? YES: X NO:

SURVIVAL

CHRONIC TOXICITY INDICATED: YES ____ NO X

NO SURVIVAL STATISTICAL ANALYSIS NECESSARY: X

CONTROL(%) 24h 100 48h 100 End 100 EFFLUENT : 24h 100 48h 100 End 100

Fishers Exact Test: A = 10 , B = 10 , a = 10 , b = 9

FACILITY NAME: Sylacauga WWTP NPDES #: AL0020001 DSN: 012 DATE: 12/01/19

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 22.3 EFFLUENT: 22.5

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

/ Test Statistic: / Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL(%) 24h 100 48h 100 7day 98 EFFLUENT: 24h 100 48h 100 7day 100

NO MORTALITY STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

/ Test Statistic: / Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 0.538 mg EFFLUENT: 0.719 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

/ Test Statistic: / Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:



**UTILITIES BOARD
City of Sylacauga**

301 N. Elm Ave.
P. O. Box 207
Sylacauga, AL 35150
(256) 249-8501

**UTILITIES BOARD
OPERATIONS CENTER**
1414 Edwards St.
Sylacauga, AL 35150
(256) 249-0372

Tuesday, December 17, 2019

Alabama Department of Environmental Management
Att: Shondra Torbert
P.O. Box 301463
1400 Coliseum Blvd Montgomery, AL 36130-1463

RE: Utilities Board of the City of Sylacauga 2019 Accelerated Toxicity Testing

Dear Ms. Torbert,

Our facility very marginally failed its annual toxicity test for Cerio and FHM growth. We initiated accelerated testing in accordance with our permit requirements. The first test failed only for FHM growth, but again was only marginally. The second accelerated test passed all toxicity parameters. We took the initiative to do some additional diagnostic lab test during the period of the accelerated testing and no cause of any potential toxicity could be identified. We also conducted an additional follow-up test and the third test passed all toxicity parameters. I've included the first two additional test and the voluntary third is forthcoming. Our facility has passed two consecutive tests and thus the Sylacauga Utilities Board believes that it has met its obligations to prove that no toxicity concerns are apparent and the matter is concluded.

Sincerely,

A handwritten signature in black ink, appearing to read "David Green".

David Green
Utilities Board of the City of Sylacauga
Office – (256)401-2536
Cell-(256)267-0002
dgreen@sylacauga.net

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY**

1. GENERAL:

NPDES Permit Number: AL0020001

DSN: 013

COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report: Steve Morris / Kelleve Remson

Lab Conducting Toxicity Test(s): Guardian Systems, Inc.

Month Toxicity Test(s) Required: October Scheduled Test(s):

Accelerated Test(s):

Test Type Required: _____ 48-Hr Acute Screening:

_____ 24-Hr Acute Screening

X Short-term Chronic Screening

Other (specify) _____

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sample #	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid
1	10/06/2020 13:00	10/13/2020 13:20	Yes	10/06/20 13:30	10/13/20 13:50	Yes
2						
3						
4						

2A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test Org.	Effluent Conc.	Test Number 1			Test Number 2			Test Number 3			Test Number 4		
		Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow
P.p.	62.0%	Pass	N/A	Pass									
C.d.	62.0%	Pass	Pass	N/A									

2.B SUMMARY OF RESULTS FOR DEFINITIVE TEST:

Test Org.	Test Solution Concentration (%)					LC50	NOEC	Not Determined

3. LABORATORY ANALYSIS OF UNDILUTED SAMPLES:

Sample ID	BOD ₅ mg/L	TSS mg/L	NH ₃ mg/L	pH s.u.	TRC mg/L	Alkalinity mg/L	Hardness mg/L	Conductivity µS
2010-064-01	N/A	N/A	0.2	7.26	<0.1	108	179	680
2010-111-01	N/A	N/A	0.3	7.30	<0.1	118	174	780
2010-153-01	N/A	N/A	0.2	7.3	<0.1	117	173	730

Municipal Facilities Only

Sample ID	Arsenic µg/L	Cadmium µg/L	Chromium µg/L	Copper µg/L	Lead µg/L	Hexavalent Chromium µg/L
Sample ID	Mercury µg/L	Nickel µg/L	Silver µg/L	Zinc µg/L	Total Cyanide µg/L	Other(s) µg/L

Chemical Analyses Performed By (LAB): GUARDIAN SYSTEMS, Inc.

Instantaneous Flow: (1) _____ GPM (2) _____ GPM (3) _____ GPM

Total 24-Hour Flow: (1) 1.224 MGD (2) 1.541 MGD (3) 1.537 MGD

Comments:

I Certify under the 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 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: Steven A Morris

DATE: 11-9-2020

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001DSN: 013DATE: 11/05/20**4. SAMPLE COLLECTION:**

Split Samples: N/A: YES: (Explain) Split with another laboratory.

Samples Collected as Specified in the NPDES Permit: YES: X NO: (Explain)Receiving Water: Shirtee CreekDesign Flow: (MGD) 4.8

Sample ID	Sample(s) Collected MM/DD/YY - MM/DD/YY	Arrival Temp. °C	Used in Test(s) MM/DD/YY - MM/DD/YY
2010-064-01	10/04/20 - 10/05/20	4.0	10/06/20 - 10/07/20
2010-111-01	10/06/20 - 10/07/20	4.0	10/08/20 - 10/09/20
2010-153-01	10/08/20 - 10/09/20	4.0	10/10/20 - 10/12/20

5. CONTROL / DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ C
MHSF	09/30/20	10/01/20	87	63	7.66	290	25.0
MHSF	10/07/20	10/08/20	116	88	7.54	410	25.0
MHSF	10/20/20	10/21/20	74	58	7.80	280	25.0
MHSF	10/23/20	10/24/20	77	61	7.64	280	25.0

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)					
P.p.	<24 Hours	Aquatic Biosystems	Control	62.0%				
C.d.	<24 Hours	Stock	Control	62.0%				

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org. / Test Vessel	Replicates Per Conc.
P.p.	Plastic Beaker	500	250	10	4
C.d.	Plastic Beaker	25	20	1	10

Test Species	Temp. Range C	D.O. Range (mg/L)	pH Range (SU)	Light In. Av. (ft.-c)
P.p.	24.0 - 24.6	6.0 - 8.7	7.20 - 8.18	75
C.d.	24.1 - 25.1	8.0 - 9.0	7.53 - 8.95	75

7. FEEDING:Not Fed: Fed Daily: X Fed Irregular: (Explain in comments below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.12 mL Suspension Containing 1.9 g/L TS Daily.Algae: Fed 0.12 mL Suspension Containing 3.5 × 10⁷ Algal Cells/mL Daily.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 013

DATE: 11/05/20

11. C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):

TEST ORGANISM: Ceriodaphnia dubia

Were Neonates Used to Begin the Test Within 8 hours of the same age?: Yes

Did 60% of the CONTROL Females Produce Their Third Brood? YES: X NO:

SURVIVAL

CHRONIC TOXICITY INDICATED: YES: NO: X

NO SURVIVAL STATISTICAL ANALYSIS NECESSARY: X

CONTROL (0%): 24h: 100% 48h: 100% END: 100% EFFLUENT(62%): 24h: 100% 48h: 100% End: 100%

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 16.9 EFFLUENT (62%): 17.5

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: N/A

Normally Distributed: YES: NO: X

Test Statistic: 0.007 Critical Value: 0.868 (Parametric)

Equal Variance: Unequal Variance:

F Statistic: 2.00 Critical F: 6.54

t Test Statistic: -0.65 t Test Critical Value: 1.74

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 24h: 100% 48h: 100% End: 100% EFFLUENT (62%): 24h: 100% 48h: 100% End: 100%

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.000 Critical Value: 0.749 (Parametric)

Equal Variance: Unequal Variance: X

F Statistic: 0.000 Critical F: 47.47

t Test Statistic: 0.0000 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL(0%): 0.392 mg EFFLUENT(62%): 0.443 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.0573 Critical Value: 0.749 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 7.0195 Critical F: 47.47

t Test Statistic: -1.2789 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY

1. GENERAL:

NPDES PERMIT NO.: AL0020001 DSN: 013 COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report:

Lab Conducting Toxicity Test(s): ERA, 2975 Brown Ct, Auburn, AL 36830

Months To Test: Yearly

This Report for Toxicity Test(s) Required for the Month of: July

Scheduled Test(s): Yes X No Accelerated Test(s): Yes No X

Accelerated Test Number of For Failed Scheduled Test Date:

Test Type Required: -Hr Acute Screening: -Hr Acute Definitive:

Short-term Chronic Screening: X Short-term Chronic Definitive:

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sam	Date/Time Start	Date/Time Ended	Control	Date/Time Start	Date/Time Ended	Control
No.	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid	MM/DD/YY HH:MM	MM/DD/YY HH:MM	Valid
1	07/14/20 11:30	07/21/20 08:45	Yes	07/14/20 13:00	07/21/20 11:00	Yes

2.A. SUMMARY OF RESULTS FOR SCREENING TESTS:

		Test Number											
Test	Eff.	(1)			(2)			(3)			(4)		
Org.	Conc	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow	Surv	Repr	Grow
P.p.	62%	PASS	N/A	PASS									
C.d.	62%	PASS	PASS	N/A									

3. LABORATORY ANALYSES OF UNDILUTED SAMPLES(S):

SAMPLE	BOD5	TSS	NH3	pH	Alk	Hard	TRC	Cond
Id.	mg/l	mg/l	mg/l	su	mg/l	mg/l	mg/l	uS
1	N/A	N/A	<0.200	7.5	104	163	<0.03	458
2	N/A	N/A	<0.200	7.4	112	184	<0.03	575
3	N/A	N/A	<0.200	7.6	110	188	<0.03	552

Chemical Analyses Performed By (Lab): ERA

Total 24-Hour Flow: (1) 2.531 MGD (2) 2.016 MGD (3) 1.878 MGD

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: Red 12

DATE: 8/10/2020

FACILITY NAME: Sylacauga WWTP

NPDES #: AL0020001

DSN: ⁰¹³012

DATE: 7/14/20

4. SAMPLE COLLECTION:

Split Samples: N/A X Yes ____ (Explain) _____Samples Collected as Specified in the NPDES Permit: Yes X No (Explain)Receiving Water: Shirtee CreekDesign Flow: 4.8 (MGD)

Sample Id.	Sample(s) Collected MM/DD/YY HHMM - MM/DD/YY HHMM	Arrival Temp. °C.	Used in Test(s) MM/DD/YY - MM/DD/YY
1	07/12/20 0730 - 07/13/20 0730	2.6	07/14/20 - 07/15/20
2	07/14/20 0730 - 07/15/20 0730	2.4	07/16/20 - 07/17/20
3	07/16/20 0730 - 07/17/20 0730	2.4	07/18/20 - 07/20/20

5. CONTROL/DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ °C.
MHRW	07/09/20	07/14/20	84	55	7.7	311	@ 25
MHRW	07/15/20	07/16/20	84	53	7.8	313	@ 25

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)				
P.p.	29-31 hr	Aquatic Bioassay Supply	62				
C.d.	0- 7 hr	ERA	62				

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org./Test Vessel	Replicates Per Conc.
P.p.	plastic beaker	500	250	10	4
C.d.	plastic beaker	25	20	1	10

Test Species	Temp. Range (°C.)	D.O. Range (mg/L)	pH Range (su)	Light Intensity Average (ft.-c.)
P.p.	24.2 - 25.8	6.6 - 9.7	7.2 - 7.7	75
C.d.	24.1 - 25.9	7.4 - 9.7	7.3 - 8.0	75

7. FEEDING:

Not Fed: ____ Fed Daily: X Fed Irregular: ____ (Explain in Comments Below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.130 mL Suspension Containing 1.85 mg/L TS Daily.Algae: Fed 0.130 mL Suspension Containing 3 x 10⁷ Algal Cells/mL Daily.

COMMENTS:

FACILITY NAME: Sylcauga WWTP NPDES #: AL0020001 DSN: 013 012 DATE: 7/14/20

8. REFERENCE TOXICANT TESTS:

TOXICANT: C.d.: NaCl; P.p.: KCl SOURCE: Fisher Scientific
Solution Concentration Unit: mg/L _____ g/L X % _____ Other (specify) _____

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (Control to Highest Conc.)						
P.p.	07/07/20-07/14/20	MHRW	0	0.25	0.50	0.75	1.00	2.00	
C.d.	07/07/20-07/14/20	MHRW	0	0.5	1.0	1.5	2.0	2.5	
Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit						NUMBER (N)
P.p.	Survival	0.50	0.5 - 0.75						19
P.p.	Growth	0.50	0.5 - 0.75						19
C.d.	Survival	1.5	0.5 - 1.5						20
C.d.	Reproduction	1.0	0.25 - 1.0						20

Data on File with ADEM Toxics Unit

9. TEST CONDITION VARIABILITY:

9.A. Deviations From Standard Test Conditions:

None

9.B. Test Solution Manipulations or Test Modifications:

None

10. REQUIRED REPORT ATTACHMENTS:

Attach Copies Of Chain-of-Custody Forms, Reference Toxicant Tests, And Raw Data (Bench Sheets) Pertaining To Physical, Chemical, And Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

11.C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):

TEST ORGANISM: Ceriodaphnai dubia

Were Neonates Used to Begin the Test Within 8 hours of the same age?: Yes

Did 60% of the CONTROL Females Produce Their Third Brood? YES: X NO: _____

SURVIVAL

CHRONIC TOXICITY INDICATED: YES _____ NO X

NO SURVIVAL STATISTICAL ANALYSIS NECESSARY: X

CONTROL(%) 24h 100 48h 100 End 100 EFFLUENT : 24h 100 48h 100 End 100

Fishers Exact Test: A = _____, B = _____, a = _____, b = _____

FACILITY NAME: Sylacauga WWTP NPDES #: AL0020001 DSN: 012 ⁰¹³ DATE: 7/14/20

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 22.2 EFFLUENT: 25.4

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

t Test Statistic: t Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL(%) 24h 100 48h 100 7day 95 EFFLUENT: 24h 100 48h 100 7day 100

NO MORTALITY STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

t Test Statistic: t Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES ☐ NO ☒

CONTROL: 0.345 mg EFFLUENT: 0.374 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY: ☒

Normally Distributed: Yes ☐ No ☐

Test Statistic: Critical Value: (Parametric)

Equal Variance: ☐ Unequal Variance: ☐

F Statistic: Critical F:

t Test Statistic: t Test Critical Value:

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY**

1. GENERAL:

NPDES Permit Number: AL0020001

DSN: 014

COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report: Steve Morris / Kelleve Remson

Lab Conducting Toxicity Test(s): Guardian Systems, Inc.

Month Toxicity Test(s) Required: January Scheduled Test(s):

Accelerated Test(s):

Test Type Required: 48-Hr Acute Screening:

24-Hr Acute Screening

X Short-term Chronic Screening

Other (specify) _____

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sample #	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid
1	01/05/2021 13:00	01/12/2021 13:00	YES	01/05/21 14:00	01/12/21 13:50	YES
2						
3						
4						

2A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test Org.	Effluent Conc.	Test Number 1			Test Number 2			Test Number 3			Test Number 4		
		Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow
P.p.	45.0%	Pass	N/A	Pass									
C.d.	45.0%	Pass	Pass	N/A									

2.B SUMMARY OF RESULTS FOR DEFINITIVE TEST:

Test Org.	Test Solution Concentration (%)	LC50	NOEC	Not Determined

3. LABORATORY ANALYSIS OF UNDILUTED SAMPLES:

Sample ID	BOD ₅ mg/L	TSS mg/L	NH ₃ mg/L	pH s.u.	TRC mg/L	Alkalinity mg/L	Hardness mg/L	Conductivity μS
2101-023-01	N/A	N/A	0.1	7.16	<0.1	136	165	420
2101-088-01	N/A	N/A	<0.1	7.43	<0.1	141	160	480
2101-117-01	N/A	N/A	<0.1	7.41	<0.1	155	179	530

Municipal Facilities Only

Sample ID	Arsenic μg/L	Cadmium μg/L	Chromium μg/L	Copper μg/L	Lead μg/L	Hexavalent Chromium μg/L
Sample ID	Mercury μg/L	Nickel μg/L	Silver μg/L	Zinc μg/L	Total Cyanide μg/L	Other(s) μg/L

Chemical Analyses Performed By (LAB): GUARDIAN SYSTEMS, Inc.

Instantaneous Flow: (1) GPM (2) GPM (3) GPM

Total 24-Hour Flow: (1) 1.747 MGD (2) 1.812 MGD (3) 2.089 MGD

Comments:

I Certify under the 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 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: 1-28-2021

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001DSN: 014DATE: 01/22/21**4. SAMPLE COLLECTION:**

Split Samples: N/A: YES: (Explain) Split with another laboratory.

Samples Collected as Specified in the NPDES Permit: YES: X NO: (Explain)Receiving Water: Shirtee CreekDesign Flow: (MGD) 4.8

Sample ID	Sample(s) Collected MM/DD/YY - MM/DD/YY	Arrival Temp. °C	Used in Test(s) MM/DD/YY - MM/DD/YY
2101-023-01	01/03/21 - 01/04/21	4.0	01/05/21 - 01/06/21
2101-088-01	01/05/21 - 01/06/21	4.0	01/07/21 - 01/08/21
2101-117-01	01/07/21 - 01/08/21	4.0	01/09/21 - 01/11/21

5. CONTROL / DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ C
MHSF	12/31/20	01/01/21	84	66	7.49	290	25.0
MHSF	01/06/21	01/07/21	78	57	7.59	290	25.0
MHSF	01/11/21	01/12/21	66	60	7.68	280	25.0
MHSF							

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)					
P.p.	<24 Hours	Aquatic Biosystems	Control	45.0%				
C.d.	<24 Hours	Stock	Control	45.0%				

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org. / Test Vessel	Replicates Per Conc.
P.p.	Plastic Beaker	500	250	10	4
C.d.	Plastic Beaker	25	20	1	10

Test Species	Temp. Range C	D.O. Range (mg/L)	pH Range (SU)	Light In. Av. (ft.-c)
P.p.	24.0 - 24.9	5.9 - 8.5	7.61 - 8.18	75
C.d.	24.1 - 24.9	8.0 - 9.3	7.60 - 8.61	75

7. FEEDING:Not Fed: Fed Daily: X Fed Irregular: (Explain in comments below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.12 mL Suspension Containing 1.9 g/L TS Daily.Algae: Fed 0.12 mL Suspension Containing 3.5 × 10⁷ Algal Cells/mL Daily.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001DSN: 014DATE: 01/22/21**8. REFERENCE TOXICANT TESTS:**TOXICANT: NaCl (Sodium Chloride)SOURCE: Fisher ScientificCAS#: 7647-14-5

Solution Concentration Unit: mg/L

g/L X

%

Other(specify)

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	01/05/21 - 01/12/21	MHSF	Cont.	1.0	2.0	3.0	4.0	5.0	6.0
C.d.	01/05/21 - 01/12/21	MHSF	Cont.	0.25	0.50	1.00	1.50	2.00	

Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit	Number (n)
P.p.	Survival	2.0	0.941 - 3.23	24
P.p.	Growth	2.0	0.456 - 4.88	24
C.d.	Survival	1.5	0.715 - 1.70	24
C.d.	Reproduction	0.0	-0.503 - 0.669	24

Test Org.	LC50 Survival	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	3.64	3.38	3.88	3.08	4.40	24
C.d.	1.31	0.98	1.81	1.13	1.69	24

Acute:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	01/06/21 - 01/08/21	MHSF	Cont.	5	6	7	8	9	10
C.d.	01/21/21 - 01/14/21	MHSF	Cont.	1.25	1.50	1.75	2.00	2.25	

Test Org.	LC50 Results	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	7.89	7.53	8.27	7.23	8.33	24
C.d.	1.94	1.84	2.03	1.71	2.04	24

9. TEST CONDITION VARIABILITY:9.A. Deviations From Standard test Conditions: None9.B. Test Solution Manipulations or Test Modifications: None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies of Chain-Of-Custody Forms, Reference Toxicant Tests, and Raw Data (Bench Sheets) Pertaining To Physical, Chemical, and Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 01/22/21

11. C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):

TEST ORGANISM: Ceriodaphnia dubia

Were Neonates Used to Begin the Test Within 8 hours of the same age?: Yes

Did 60% of the CONTROL Females Produce Their Third Brood? YES: X NO:

SURVIVAL

CHRONIC TOXICITY INDICATED: YES: NO: X

NO SURVIVAL STATISTICAL ANALYSIS NECESSARY: X

CONTROL (0%): 24h: 100% 48h: 100% END: 100% EFFLUENT(45%): 24h: 100% 48h: 100% End: 100%

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 17.5 EFFLUENT (45%): 17.2

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: N/A

Normally Distributed: YES: NO: X

Test Statistic: 0.476 Critical Value: 0.868 (Parametric)

Equal Variance: Unequal Variance:

F Statistic: 5.91 Critical F: 6.54

t Test Statistic: -0.34 t Test Critical Value: 1.74

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 24h: 100% 48h: 100% End: 100% EFFLUENT (45%): 24h: 100% 48h: 100% End: 100%

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.000 Critical Value: 0.749 (Parametric)

Equal Variance: Unequal Variance: X

F Statistic: 0.000 Critical F: 47.47

t Test Statistic: 0.0000 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL(0%): 0.504 mg EFFLUENT(45%): 0.560 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.3333 Critical Value: 0.749 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 9.9907 Critical F: 47.47

t Test Statistic: -1.7434 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY**

1. GENERAL:

NPDES Permit Number: AL0020001

DSN: 014

COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report: Steve Morris / Kelleve Remson

Lab Conducting Toxicity Test(s): Guardian Systems, Inc.

Month Toxicity Test(s) Required: April Scheduled Test(s):

Accelerated Test(s):

Test Type Required: _____ 48-Hr Acute Screening: _____

24-Hr Acute Screening

X Short-term Chronic Screening

Other (specify) _____

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sample #	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid
1	04/13/21 15:15	04/20/21 14:00	YES	04/13/21 14:45	04/20/21 13:30	YES
2						
3						
4						

2A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test Org.	Effluent Conc.	Test Number 1			Test Number 2			Test Number 3			Test Number 4		
		Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow
P.p.	45.0%	Pass	N/A	Pass									
C.d.	45.0%	Pass	Pass	N/A									

2.B SUMMARY OF RESULTS FOR DEFINITIVE TEST:

Test Org.	Test Solution Concentration (%)					LC50	NOEC	Not Determined

3. LABORATORY ANALYSIS OF UNDILUTED SAMPLES:

Sample ID	BOD ₅ mg/L	TSS mg/L	NH ₃ mg/L	pH s.u.	TRC mg/L	Alkalinity mg/L	Hardness mg/L	Conductivity µS
2104-169-01	N/A	N/A	<0.1	7.13	<0.1	121	129	300
2104-219-01	N/A	N/A	0.2	7.20	<0.1	128	144	340
2104-258-01	N/A	N/A	0.4	7.05	<0.1	131	145	390

Municipal Facilities Only

Sample ID	Arsenic µg/L	Cadmium µg/L	Chromium µg/L	Copper µg/L	Lead µg/L	Hexavalent Chromium µg/L
Sample ID	Mercury µg/L	Nickel µg/L	Silver µg/L	Zinc µg/L	Total Cyanide µg/L	Other(s) µg/L

Chemical Analyses Performed By (LAB): GUARDIAN SYSTEMS, Inc.

Instantaneous Flow: (1) _____ GPM (2) _____ GPM (3) _____ GPM

Total 24-Hour Flow: (1) 4.828 MGD (2) 5.773 MGD (3) 4.104 MGD

Comments:

I Certify under the 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 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: 5/11/2021

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 04/29/21

4. SAMPLE COLLECTION:

Split Samples: N/A: YES: (Explain) Split with another laboratory.

Samples Collected as Specified in the NPDES Permit: YES: ☒ NO: (Explain)Receiving Water: Shirtee CreekDesign Flow: (MGD) 4.8

Sample ID	Sample(s) Collected MM/DD/YY - MM/DD/YY	Arrival Temp. °C	Used in Test(s) MM/DD/YY - MM/DD/YY
2104-169-01	04/11/21 - 04/12/21	4.0	04/13/21 - 04/14/21
2104-219-01	04/13/21 - 04/14/21	4.0	04/15/21 - 04/16/21
2104-258-01	04/15/21 - 04/16/21	4.0	04/17/21 - 04/19/21

5. CONTROL / DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ C
MHSF	03/26/21	03/27/21	69	151	7.63	280	25.0
MHSF	04/06/21	04/07/21	83	55	7.77	290	25.0
MHSF	04/09/21	04/10/21	87	70	7.62	290	25.0
MHSF	04/14/21	04/15/21	83	68	7.53	280	25.0
MHSF	04/16/21	04/17/21	82	72	7.84	290	25.0

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)				
P.p.	<24 Hours	Aquatic Biosystems, Inc	Control	45.0%			
C.d.	<24 Hours	Stock	Control	45.0%			

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org. / Test Vessel	Replicates Per Conc.
P.p.	Plastic Beaker	500	250	10	4
C.d.	Plastic Beaker	25	20	1	10

Test Species	Temp. Range C	D.O. Range (mg/L)	pH Range (SU)	Light In. Av. (ft.-c)
P.p.	24.0 - 24.5	5.8 - 8.4	7.45 - 8.09	75
C.d.	24.1 - 25.0	7.9 - 8.4	7.74 - 8.77	75

7. FEEDING:Not Fed: Fed Daily: ☒ Fed Irregular: (Explain in comments below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.12 mL Suspension Containing 1.9 g/L TS Daily.Algae: Fed 0.12 mL Suspension Containing 3.5 × 10⁷ Algal Cells/mL Daily.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 04/29/21

8. REFERENCE TOXICANT TESTS:TOXICANT: NaCl (Sodium Chloride)SOURCE: Fisher ScientificCAS#: 7647-14-5

Solution Concentration Unit: mg/L

g/L X

%

Other(specify)

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	04/06/21 - 04/13/21	MHSF	Cont.	1.0	2.0	3.0	4.0	5.0	6.0
C.d.	04/06/21 - 04/13/21	MHSF	Cont.	0.25	0.50	1.00	1.50	2.00	

Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit	Number (n)
P.p.	Survival	2.0	0.965 - 3.12	24
P.p.	Growth	4.0	0.691 - 5.06	24
C.d.	Survival	1.5	0.731 - 1.73	24
C.d.	Reproduction	0.5	-0.510 - 0.677	24

Test Org.	LC50 Survival	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	3.75	3.36	4.07	3.12	4.32	24
C.d.	1.30	1.05	1.62	1.12	1.68	24

Acute:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	04/21/21 - 04/23/21	MHSF	Cont.	5	6	7	8	9	10
C.d.	04/21/21 - 04/23/21	MHSF	Cont.	1.25	1.50	1.75	2.00	2.25	

Test Org.	LC50 Results	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	6.67	6.39	6.99	6.95	8.48	24
C.d.	1.86	1.78	1.95	1.72	2.02	24

9. TEST CONDITION VARIABILITY:9.A. Deviations From Standard test Conditions: None9.B. Test Solution Manipulations or Test Modifications: None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies of Chain-Of-Custody Forms, Reference Toxicant Tests, and Raw Data (Bench Sheets) Pertaining To Physical, Chemical, and Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 04/29/21

11. C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):

TEST ORGANISM: *Ceriodaphnia dubia*

Were Neonates Used to Begin the Test Within 8 hours of the same age?: Yes

Did 60% of the CONTROL Females Produce Their Third Brood? YES: X NO:

SURVIVAL

CHRONIC TOXICITY INDICATED: YES: NO: X

NO SURVIVAL STATISTICAL ANALYSIS NECESSARY: X

CONTROL (0%): 24h: 100% 48h: 100% END: 100% EFFLUENT(45%): 24h: 100% 48h: 100% End: 100%

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 21.2 EFFLUENT (45%): 21.6

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: N/A

Normally Distributed: YES: NO: X

Test Statistic: 0.113 Critical Value: 0.868 (Parametric)

Equal Variance: Unequal Variance:

F Statistic: 1.74 Critical F: 6.54

t Test Statistic: -0.27 t Test Critical Value: 1.74

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: *Pimephales promelas*

MORTALITY

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 24h: 100% 48h: 100% End: 100% EFFLUENT (45%): 24h: 100% 48h: 100% End: 92.5%

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.4923 Critical Value: 0.749 (Parametric)

Equal Variance: Unequal Variance: X

F Statistic: 0.000 Critical F: 47.47

t Test Statistic: 0.0900 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL(0%): 0.475 mg EFFLUENT(45%): 0.502 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.000 Critical Value: 0.749 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 1.2896 Critical F: 47.47

t Test Statistic: -0.9943 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY**

1. GENERAL:

NPDES Permit Number: AL0020001

DSN: 014

COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report: Steve Morris / Kelleve Remson

Lab Conducting Toxicity Test(s): Guardian Systems, Inc.

Month Toxicity Test(s) Required: July Scheduled Test(s): Accelerated Test(s):

Test Type Required: _____ 48-Hr Acute Screening: _____ 24-Hr Acute Screening

X Short-term Chronic Screening _____ Other (specify) _____

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sample #	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid
1	07/13/21 13:00	07/20/21 13:00	YES	07/13/21 14:00	07/20/21 14:00	YES
2						
3						
4						

2A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test Org.	Effluent Conc.	Test Number 1			Test Number 2			Test Number 3			Test Number 4		
		Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow
P.p.	45.0%	Pass	N/A	Pass									
C.d.	45.0%	Pass	Pass	N/A									

2.B SUMMARY OF RESULTS FOR DEFINITIVE TEST:

Test Org.	Test Solution Concentration (%)	LC50	NOEC	Not Determined

3. LABORATORY ANALYSIS OF UNDILUTED SAMPLES:

Sample ID	BOD ₅ mg/L	TSS mg/L	NH ₃ mg/L	pH s.u.	TRC mg/L	Alkalinity mg/L	Hardness mg/L	Conductivity µS
2107-170-01	N/A	N/A	<0.1	7.29	<0.1	18	175	430
2107-252-01	N/A	N/A	<0.1	7.34	<0.1	124	162	420
2107-281-01	N/A	N/A	<0.1	7.72	<0.1	125	161	420

Municipal Facilities Only

Sample ID	Arsenic µg/L	Cadmium µg/L	Chromium µg/L	Copper µg/L	Lead µg/L	Hexavalent Chromium µg/L
Sample ID	Mercury µg/L	Nickel µg/L	Silver µg/L	Zinc µg/L	Total Cyanide µg/L	Other(s) µg/L

Chemical Analyses Performed By (LAB): GUARDIAN SYSTEMS, Inc.

Instantaneous Flow: (1) _____ GPM (2) _____ GPM (3) _____ GPM

Total 24-Hour Flow: (1) 2.640 MGD (2) 4.628 MGD (3) 3.232 MGD

Comments:

I Certify under the 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 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: 8/23/2021

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 08/09/21

4. SAMPLE COLLECTION:

Split Samples: N/A: YES: (Explain) Split with another laboratory.

Samples Collected as Specified in the NPDES Permit: YES: ☒ NO: (Explain)Receiving Water: Shirtee CreekDesign Flow: (MGD) 4.8

Sample ID	Sample(s) Collected MM/DD/YY - MM/DD/YY	Arrival Temp. °C	Used in Test(s) MM/DD/YY - MM/DD/YY
2107-170-01	07/11/21 - 07/12/21	4.0	07/13/21 - 07/14/21
2107-252-01	07/13/21 - 07/14/21	4.0	07/15/21 - 07/16/21
2107-281-01	07/15/21 - 07/16/21	4.0	07/17/21 - 07/19/21

5. CONTROL / DILUTION WATER:

Type	Prepared MM/DD/YY	Begin Use MM/DD/YY	Initial Water Chemistries				
			Hard.	Alk.	pH	Cond.	@ C
MHSF	06/30/21	07/01/21	79	38	7.68	290	25.0
MHSF	07/14/21	07/15/21	86	60	7.42	300	25.0
MHSF	07/22/21	07/23/21	71	56	7.46	290	25.0
MHSF	07/23/21	07/24/21	55	54	7.54	280	25.0
MHSF							

6. TOXICITY TEST INFORMATION:

Test Species	Organism Age	Organism Source	Test Solution Concentrations (%)				
P.p.	<24 Hours	Aquatic Biosystems, Inc	Control	45.0%			
C.d.	<24 Hours	Stock	Control	45.0%			

Test Species	Test Vessel Type	Vessel Vol. (mL)	Solution Vol. (mL)	Org. / Test Vessel	Replicates Per Conc.
P.p.	Plastic Beaker	500	250	10	4
C.d.	Plastic Beaker	25	20	1	10

Test Species	Temp. Range C	D.O. Range (mg/L)	pH Range (SU)	Light In. Av. (ft.-c)
P.p.	24.1 - 25.0	5.9 - 8.2	6.97 - 8.02	75
C.d.	24.1 - 25.7	8.0 - 8.7	7.35 - 9.19	75

7. FEEDING:Not Fed: Fed Daily: ☒ Fed Irregular: (Explain in comments below)Brine Shrimp: Fed 0.15 g Suspension of Newly Hatched Larvae 2 Times Daily.YCT: Fed 0.12 mL Suspension Containing 1.9 g/L TS Daily.Algae: Fed 0.12 mL Suspension Containing 3.5 × 10⁷ Algal Cells/mL Daily.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 08/09/21

8. REFERENCE TOXICANT TESTS:TOXICANT: NaCl (Sodium Chloride)SOURCE: Fisher ScientificCAS#: 7647-14-5

Solution Concentration Unit: mg/L

g/L X

%

Other(specify)

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	07/13/21 - 07/20/21	MHSF	Cont.	1.0	2.0	3.0	4.0	5.0	6.0
C.d.	07/13/21 - 07/20/21	MHSF	Cont.	0.25	0.50	1.00	1.50	2.00	

Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit	Number (n)
P.p.	Survival	2.0	0.845 - 3.155	24
P.p.	Growth	3.0	0.842 - 4.992	24
C.d.	Survival	1.0	0.715 - 1.701	24
C.d.	Reproduction	0.5	-0.444 - 0.778	24

Test Org.	LC50 Survival	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	3.66	2.93	4.38	2.87	4.43	24
C.d.	1.40	1.22	1.68	1.12	1.67	24

Acute:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	07/13/21 - 07/15/21	MHSF	Cont.	5	6	7	8	9	10
C.d.	07/13/21 - 07/15/21	MHSF	Cont.	1.25	1.50	1.75	2.00	2.25	

Test Org.	LC50 Results	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	8.03	7.72	8.36	6.89	8.52	24
C.d.	1.92	1.83	2	1.72	2.03	24

9. TEST CONDITION VARIABILITY:9.A. Deviations From Standard test Conditions: None9.B. Test Solution Manipulations or Test Modifications: None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies of Chain-Of-Custody Forms, Reference Toxicant Tests, and Raw Data (Bench Sheets) Pertaining To Physical, Chemical, and Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

COMMENTS:

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001

DSN: 014

DATE: 08/09/21

11. C CHRONIC SCREENING TOXICITY TESTS RESULTS (Freshwater):

TEST ORGANISM: Ceriodaphnia dubia

Were Neonates Used to Begin the Test Within 8 hours of the same age?: Yes

Did 60% of the CONTROL Females Produce Their Third Brood? YES: X NO:

SURVIVAL

CHRONIC TOXICITY INDICATED: YES: NO: X

NO SURVIVAL STATISTICAL ANALYSIS NECESSARY: X

CONTROL (0%): 24h: 100% 48h: 100% END: 100% EFFLUENT(45%): 24h: 100% 48h: 100% End: 100%

REPRODUCTION (Average Neonates/Female)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 17.6 EFFLUENT (45%): 21.5

NO REPRODUCTION STATISTICAL ANALYSIS NECESSARY: N/A

Normally Distributed: YES: NO: X

Test Statistic: 0.039 Critical Value: 0.868 (Parametric)

Equal Variance: Unequal Variance:

F Statistic: 1.16 Critical F: 6.54

t Test Statistic: -3.74 t Test Critical Value: 1.74

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

TEST ORGANISM: Pimephales promelas

MORTALITY

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL (0%): 24h: 100% 48h: 100% End: 100% EFFLUENT (45%): 24h: 100% 48h: 100% End: 100%

NO MORTALITY STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.000 Critical Value: 0.749 (Parametric)

Equal Variance: Unequal Variance: X

F Statistic: 0.000 Critical F: 47.47

t Test Statistic: 0.0000 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

GROWTH - Mean Dry Weight (mg)

CHRONIC TOXICITY INDICATED: YES: NO: X

CONTROL(0%): 0.440 mg EFFLUENT(45%): 0.482 mg

NO GROWTH STATISTICAL ANALYSIS NECESSARY:

Normally Distributed: YES: NO: X

Test Statistic: 0.000 Critical Value: 0.749 (Parametric)

Equal Variance: X Unequal Variance:

F Statistic: 1.1303 Critical F: 47.47

t Test Statistic: -0.6023 t Test Critical Value: 1.944

Sample Rank Sum: #Reps.: Critical Rank Sum: (Non-Parametric)

COMMENTS:

Toxicity Test Report - Scheduled Test

version 1.6

(Submission #: HPN-X1FW-9XKE6, version 1)

Digitally signed by:
AEPACS
Date: 2022.11.10 16:35:15 -06:00
Reason: Submission Data
Location: State of Alabama

Details

Submission ID HPN-X1FW-9XKE6

Form Input

Permit Information

Permit Number
AL0020001

Permittee

Permittee Name
Utilities Board of the City of Sylacauga

Facility/Site Information

Facility/Site Name
J Earl Ham WWTP

Facility/Site Physical Location Address
610 Old Sylacauga Highway
Sylacauga, AL 35150

Facility/Site County
Talladega

Processing Information

Do you have a valid toxicity test report to submit?
Yes

Before you begin, please confirm that your toxicity test report contains ALL of the following sections/information as required by the permit:

Raw Test Data
Method Reference Tests (Quality Assurance)
Chain of Custody
Raw Chemistry Data
ADEM Form 465

Basic Test Information

Schedule Name
Toxicity Test Report - Scheduled Test

Outfall/DSN Number(s) Sampled
013

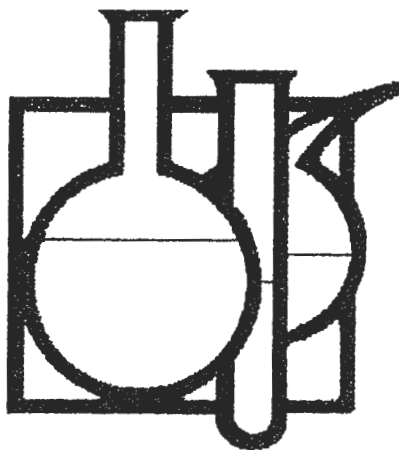
Agreements and Signature(s)

SUBMISSION AGREEMENTS

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

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.

Signed By Steven Morris on 11/10/2022 at 4:23 PM



Guardian Systems, Inc.

1108 Ashville Road
Leeds, AL 35094

[Phone] 1.205.699.6647 [Fax] 1.205.699.3882 [Web] www.gsilab.com

Sylacauga
J.Earl Ham WWTP

Prepared By: Christine Santoro
Completed: 27 October 2022

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY**

1. GENERAL:

NPDES Permit Number: AL0020001

DSN: 013

COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report: Steve Morris

Lab Conducting Toxicity Test(s): Guardian Systems, Inc.

Month Toxicity Test(s) Required: October Scheduled Test(s):

Accelerated Test(s):

Test Type Required: 48-Hr Acute Screening:

24-Hr Acute Screening

X Short-term Chronic Screening

Other (specify) _____

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sample #	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid
1	10/04/22 14:00	10/11/22 13:00	YES	10/04/22 13:40	10/11/22 12:30	YES
2						
3						
4						

2A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test Org.	Effluent Conc.	Test Number 1			Test Number 2			Test Number 3			Test Number 4		
		Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow
P.p.	62.0%	Pass	N/A	Pass									
C.d.	62.0%	Pass	Pass	N/A									

2.B SUMMARY OF RESULTS FOR DEFINITIVE TEST:

Test Org.	Test Solution Concentration (%)	LC50	NOEC	Not Determined

3. LABORATORY ANALYSIS OF UNDILUTED SAMPLES:

Sample ID	BOD ₅ mg/L	TSS mg/L	NH ₃ mg/L	pH s.u.	TRC mg/L	Alkalinity mg/L	Hardness mg/L	Conductivity µS
2210-045-01	N/A	N/A	0.2	7.09	<0.1	88	158	560
2210-132-01	N/A	N/A	0.2	6.92	<0.1	93	161	550
2210-165-01	N/A	N/A	0.2	6.99	<0.1	204	192	560

Municipal Facilities Only

Sample ID	Arsenic µg/L	Cadmium µg/L	Chromium µg/L	Copper µg/L	Lead µg/L	Hexavalent Chromium µg/L
Sample ID	Mercury µg/L	Nickel µg/L	Silver µg/L	Zinc µg/L	Total Cyanide µg/L	Other(s) µg/L

Chemical Analyses Performed By (LAB): GUARDIAN SYSTEMS, Inc.

Instantaneous Flow: (1) GPM (2) GPM (3) GPM

Total 24-Hour Flow: (1) 1.504 MGD (2) 1.567 MGD (3) 1.531 MGD

Comments:

I Certify under the 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 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: 11-3-2022

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001DSN: 013DATE: 10/27/22**8. REFERENCE TOXICANT TESTS:**TOXICANT: NaCl (Sodium Chloride)SOURCE: Fisher ScientificCAS#: 7647-14-5

Solution Concentration Unit: mg/L

g/L X

%

Other(specify)

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	10/06/22 - 10/13/22	MHSF	Cont.	1.0	2.0	3.0	4.0	5.0	6.0
C.d.	10/06/22 - 10/13/22	MHSF	Cont.	0.25	0.50	1.00	1.50	2.00	

Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit	Number (n)
P.p.	Survival	2.0	0.845 - 3.155	24
P.p.	Growth	5.0	0.079 - 4.837	24
C.d.	Survival	1.50	0.637 - 1.780	24
C.d.	Reproduction	0.25	-0.427 - 0.593	24

Test Org.	LC50 Survival	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	4.40	4.10	4.73	2.825	4.568	24
C.d.	1.54	1.30	1.80	1.255	1.704	24

Acute:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	10/05/22 - 10/07/22	MHSF	Cont.	5	6	7	8	9	10
C.d.	10/05/22 - 10/07/22	MHSF	Cont.	1.25	1.50	1.75	2.00	2.25	

Test Org.	LC50 Results	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	7.91	7.50	8.35	6.803	8.356	24
C.d.	1.83	1.73	1.93	1.741	2.022	24

9. TEST CONDITION VARIABILITY:9.A. Deviations From Standard test Conditions: None9.B. Test Solution Manipulations or Test Modifications: None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies of Chain-Of-Custody Forms, Reference Toxicant Tests, and Raw Data (Bench Sheets) Pertaining To Physical, Chemical, and Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

COMMENTS:

Pimephales promelas

LARVALS GROWTH TEST

Customer: SylacaugaStart Date: October 4, 2022Location: J. Earl Ham WWTPEnd Date: October 11, 2022

	Replicate	Initial # Larvae	No. of Larvae	DRY WGT
Control	A	10	10	0.5100
	B	10	10	0.5210
	C	10	10	0.4840
	D	10	10	0.6190

	Replicate	Initial # Larvae	No. of Larvae	DRY WGT
Effluent	A	10	10	0.6370
	B	10	10	0.4420
	C	10	10	0.4930
	D	10	10	0.3570

After entering data go to Tools, Macro, macros, select "updatestat", Run

Pimephales promelas

LARVALS GROWTH TEST

Sylacauga
J. Earl Ham WWTP

Test Date: 10/04/22
10/11/22

SHAPIRO-WILKS TEST

	MEAN DRY WGT mg	MEAN OBSERV.	CENTERED OBSERV.	(Xi - X) ²		
CONTROL	0.5100	0.5335	-0.0235	-0.0235	0.0000	0.0006
	0.5210	0.5335	-0.0125	-0.0125	0.0000	0.0002
	0.4840	0.5335	-0.0495	-0.0495	0.0000	0.0025
	0.6190	0.5335	0.0855	0.0855	0.0000	0.0073
mean	0.5335	center mean	0.0000	4		
std. dev.	0.0512	std. dev.	0.0512	$\sum (Xi - X)^2 =$		
var.	0.0026	var.	0.0026	$i=1$		
EFFLUENT	0.6370	0.4823	0.1548	0.1548	0.0000	0.0239
	0.4420	0.4823	-0.0403	-0.0403	0.0000	0.0016
	0.4930	0.4823	0.0108	0.0108	0.0000	0.0001
	0.3570	0.4823	-0.1253	-0.1253	0.0000	0.0157
mean	0.4823	center mean	0.0000	4		
std dev.	0.1017	std. dev.	0.1017	$\sum (Xi - X)^2 =$		
var.	0.0103	var.	0.0103	$i=1$		
THEREFORE D=						0.0519

	ORDERED OBSERVATION	ai	Xn-	Xi
N=1	-0.0403	0.6052	-0.1253	-0.0403
N=2	0.0855	0.3164	-0.0495	0.0855
N=3	0.0108	0.1743	-0.0235	0.0108
N=4	0.1548	0.0561	-0.0125	0.1548
N=5	-0.0125	4		
N=6	-0.0235	$\sum (Xn-i+ - Xi)^2 =$		
N=7	-0.0495	$i=1$		
N=8	-0.1253			

THE CRITICAL VALUE AT 0.01 LEVEL IS 0.749
0.2312 < 0.749 THEREFORE, THE
CONCLUSION OF THE TEST IS THAT
THE DATA ARE NOT NORMALLY DISTRIBUTED

0.012
W= 0.0519

W= 0.2312

Pimephales promelas

LARVAL GROWTH TEST

Sylacauga
J. Earl Ham WWTP

Test Date: 10/04/22
10/11/22

ONE TAILED T-TEST

Y1 :MEAN OF THE CONTROL
Y2 :MEAN OF THE EFFLUENT
V1 :VARIANCE OF THE CONTROL
V2 :VARIANCE OF THE EFFLUENT
N1 :NUMBER OF REPLICATES IN CONTROL
N2 :NUMBER OF REPLICATES IN EFFLUENT

$$T = \frac{Y1 - Y2}{SP \cdot \sqrt{((1/N1) + (1/N2))}}$$

$$SP : \sqrt{((N1-1) \cdot V1 + (N2-1) \cdot V2) / (N1 + N2 - 2)}$$

Y1= 0.5335
Y2= 0.4823
V1= 0.00262
V2= 0.01034
N1= 4
N2= 4

SP= 0.0805

T= 0.9004

FOR 6 DEGREES OF FREEDOM AT K=1
THE CRITICAL T VALUE IS 1.944

0.9004 < 1.944 THEREFORE THE TEST
FINDS THAT GROWTH IN THE EFFLUENT
IS NOT SIGNIFICANTLY LOWER THAN IN THE CONTROL

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

DEC 07 2021

Mr. David Green, Water Quality Supervisor
Utilities Board of the City of Sylacauga
Post Office Box 207
Sylacauga, AL 35150

RE: Annual Toxicity Testing Request
NPDES Permit No. AL0020001
J. Earl Ham WWTP
Talladega County

Dear Mr. Green:

The Alabama Department of Environmental Management (the Department) is in receipt of your request for reduction of toxicity testing frequency from quarterly to annually.

Pursuant to Permit Condition IV.B.2.d of the permit, the J. Earl Ham WWTP has submitted results from four consecutive monitoring periods indicating the effluent from the above-referenced facility does not exhibit chronic toxicity.

Your request is hereby granted and the Permittee can return to annual testing in October as required by Permit Condition IV.B.2.d.

Should you have any questions concerning this matter, please contact Shanda Torbert by phone at (334) 271-7800 or by email at storb@adem.alabama.gov.

Sincerely,

A handwritten signature in cursive script that reads "Emily D. Anderson".

Emily D. Anderson, Chief
Municipal Section
Water Division

Pc: Shanda Torbert/ADEM

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)

2022 - TOXICITY REPORT

10F1

Toxicity Test Report - Scheduled Test

version 1.6

Digitally signed by:
AEPACS
Date: 2022.11.10 16:35:15 -06:00
Reason: Submission Data
Location: State of Alabama

(Submission #: HPN-X1FW-9XKE6, version 1)

Details

Submission ID HPN-X1FW-9XKE6

Form Input

Permit Information

Permit Number
AL0020001

Permittee

Permittee Name
Utilities Board of the City of Sylacauga

Facility/Site Information

Facility/Site Name
J Earl Ham WWTP

Facility/Site Physical Location Address
610 Old Sylacauga Highway
Sylacauga, AL 35150

Facility/Site County
Talladega

Processing Information

Do you have a valid toxicity test report to submit?
Yes

Before you begin, please confirm that your toxicity test report contains ALL of the following sections/information as required by the permit:

Raw Test Data
Method Reference Tests (Quality Assurance)
Chain of Custody
Raw Chemistry Data
ADEM Form 465

Basic Test Information

Schedule Name
Toxicity Test Report - Scheduled Test

Outfall/DSN Number(s) Sampled
013

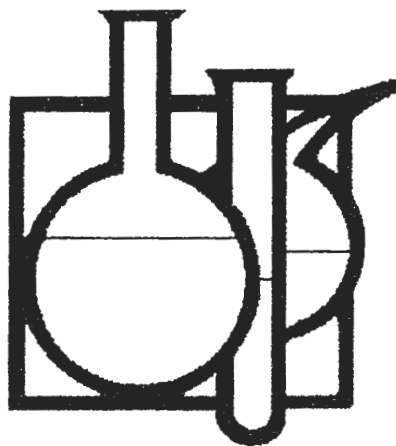
Agreements and Signature(s)

SUBMISSION AGREEMENTS

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

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.

Signed
By Steven Morris on 11/10/2022 at 4:23 PM



Guardian Systems, Inc.

1108 Ashville Road
Leeds, AL 35094

[Phone] 1.205.699.6647 [Fax] 1.205.699.3882 [Web] www.gsilab.com

Sylacauga
J.Earl Ham WWTP

Prepared By: Christine Santoro
Completed: 27 October 2022

OUTFALL 013 - 2022

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
TOXICITY TEST REPORT SUMMARY**

1. GENERAL:

NPDES Permit Number: AL0020001

DSN 013

COUNTY: Talladega

Permittee: Sylacauga Utilities Board

Facility Name: J. Earl Ham WWTP

Agent Submitting Report: Steve Morris

Lab Conducting Toxicity Test(s): Guardian Systems, Inc.

Month Toxicity Test(s) Required: October Scheduled Test(s):

Accelerated Test(s):

Test Type Required: 48-Hr Acute Screening:

24-Hr Acute Screening

X Short-term Chronic Screening

Other (specify) _____

Test Organism: Ceriodaphnia dubia

Test Organism: Pimephales promelas

Sample #	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid	Date/Time Start MM/DD/YY HH:MM	Date/Time Ended MM/DD/YY HH:MM	Control Valid
1	10/04/22 14:00	10/11/22 13:00	YES	10/04/22 13:40	10/11/22 12:30	YES
2						
3						
4						

2A. SUMMARY OF RESULTS FOR SCREENING TESTS:

Test Org	Effluent Conc.	Test Number 1			Test Number 2			Test Number 3			Test Number 4		
		Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow	Surv.	Repr.	Grow
P.p.	62.0%	Pass	N/A	Pass									
C.d.	62.0%	Pass	Pass	N/A									

2.B SUMMARY OF RESULTS FOR DEFINITIVE TEST:

Test Org.	Test Solution Concentration (%)					LC50	NOEC	Not Determined

3. LABORATORY ANALYSIS OF UNDILUTED SAMPLES:

Sample ID	BOD ₅ mg/L	TSS mg/L	NH ₃ mg/L	pH s.u.	TTC mg/L	Alkalinity mg/L	Hardness mg/L	Conductivity µS
2210-045-01	N/A	N/A	0.2	7.09	<0.1	88	158	560
2210-132-01	N/A	N/A	0.2	6.92	<0.1	93	161	550
2210-165-01	N/A	N/A	0.2	6.99	<0.1	204	192	560

Municipal Facilities Only

Sample ID	Arsenic µg/L	Cadmium µg/L	Chromium µg/L	Copper µg/L	Lead µg/L	Hexavalent Chromium µg/L
Sample ID	Mercury µg/L	Nickel µg/L	Silver µg/L	Zinc µg/L	Total Cyanide µg/L	Other(s) µg/L

Chemical Analyses Performed By (LAB): GUARDIAN SYSTEMS, Inc.

Instantaneous Flow: (1) GPM (2) GPM (3) GPM

Total 24-Hour Flow: (1) 1.504 MGD (2) 1.567 MGD (3) 1.531 MGD

Comments:

I Certify under the 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 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

Steven A. Morris

DATE 11-3-2022

Facility Name: J. Earl Ham WWTP

NPDES #: AL0020001DSN: 013DATE: 10/27/22**8. REFERENCE TOXICANT TESTS:**TOXICANT: NaCl (Sodium Chloride)SOURCE: Fisher ScientificCAS#: 7647-14-5

Solution Concentration Unit: mg/L

g/L X

%

Other(specify)

Chronic:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	10/06/22 - 10/13/22	MHSF	Cont.	1.0	2.0	3.0	4.0	5.0	6.0
C.d.	10/06/22 - 10/13/22	MHSF	Cont.	0.25	0.50	1.00	1.50	2.00	

Test Org.	Endpoint	NOEC (g/L)	CUSUM Chart Control Limit	Number (n)
P.p.	Survival	2.0	0.845 - 3.155	24
P.p.	Growth	5.0	0.079 - 4.837	24
C.d.	Survival	1.50	0.637 - 1.780	24
C.d.	Reproduction	0.25	-0.427 - 0.593	24

Test Org.	LC50 Survival	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	4.40	4.10	4.73	2.825	4.568	24
C.d.	1.54	1.30	1.80	1.255	1.704	24

Acute:

Test Org.	Test Date MM/DD - MM/DD	Control Water	Reference Test Solution Concentrations (From Control to Highest Concentration)						
P.p.	10/05/22 - 10/07/22	MHSF	Cont.	5	6	7	8	9	10
C.d.	10/05/22 - 10/07/22	MHSF	Cont.	1.25	1.50	1.75	2.00	2.25	

Test Org.	LC50 Results	Lower 95%	Upper 95%	CUSUM LCL	CUSUM UCL	Number (n)
P.p.	7.91	7.50	8.35	6.803	8.356	24
C.d.	1.83	1.73	1.93	1.741	2.022	24

9. TEST CONDITION VARIABILITY:9.A. Deviations From Standard test Conditions: None9.B. Test Solution Manipulations or Test Modifications: None**10. REQUIRED REPORT ATTACHMENTS:**

Attach Copies of Chain-Of-Custody Forms, Reference Toxicant Tests, and Raw Data (Bench Sheets) Pertaining To Physical, Chemical, and Biological Measurements For All Tests. Include Suspended, Interrupted, or Discontinued Toxicity Tests Data.

COMMENTS:

Pimephales promelas

LARVALS GROWTH TEST

Customer: SylacaugaStart Date: October 4, 2022Location: J. Earl Ham WWTPEnd Date: October 11, 2022

	Replicate	Initial # Larvae	No. of Larvae	DRY WGT
Control	A	10	10	0.5100
	B	10	10	0.5210
	C	10	10	0.4840
	D	10	10	0.6190

	Replicate	Initial # Larvae	No. of Larvae	DRY WGT
Effluent	A	10	10	0.6370
	B	10	10	0.4420
	C	10	10	0.4930
	D	10	10	0.3570

After entering data go to Tools, Macro, macros. select "updatestat", Run

Pimephales promelas

LARVALS GROWTH TEST

Sylacauga
J. Earl Ham WWTP

Test Date 10/04/22
10/11/22

SHAPIRO-WILKS TEST

	MEAN DRY WGT mg	MEAN OBSERV.	CENTERED OBSERV.	(Xi - X) ²		
CONTROL	0.5100	0.5335	-0.0235	-0.0235	0.0000	0.0006
	0.5210	0.5335	-0.0125	-0.0125	0.0000	0.0002
	0.4840	0.5335	-0.0495	-0.0495	0.0000	0.0025
	0.6190	0.5335	0.0855	0.0855	0.0000	0.0073
mean	0.5335	center mean	0.0000	4		
std. dev.	0.0512	std. dev.	0.0512	$\sum (Xi - X)^2 =$		
var.	0.0026	var.	0.0026	$\sum_{i=1}^4$		
				0.0106		
EFFLUENT	0.6370	0.4823	0.1548	0.1548	0.0000	0.0239
	0.4420	0.4823	-0.0403	-0.0403	0.0000	0.0016
	0.4930	0.4823	0.0108	0.0108	0.0000	0.0001
	0.3570	0.4823	-0.1253	-0.1253	0.0000	0.0157
mean	0.4823	center mean	0.0000	4		
std. dev.	0.1017	std. dev.	0.1017	$\sum (Xi - X)^2 =$		
var.	0.0103	var.	0.0103	$\sum_{i=1}^4$		
				0.0413		
THEREFORE D=					0.0519	

	ORDERED OBSERVATION	ai	Xn	Xi
N=1	-0.0403	0.6052	-0.1253	-0.0403
N=2	0.0855	0.3164	-0.0495	0.0855
N=3	0.0108	0.1743	-0.0235	0.0108
N=4	0.1548	0.0561	-0.0125	0.1548
N=5	-0.0125	4		
N=6	-0.0235	$\sum_{i=1}^4 (Xn-i+ - Xi)^2 =$		
N=7	-0.0495	0.0120		
N=8	-0.1253			

THE CRITICAL VALUE AT 0.01 LEVEL IS 0.749
0.2312 < 0.749 THEREFORE, THE
CONCLUSION OF THE TEST IS THAT
THE DATA ARE NOT NORMALLY DISTRIBUTED

0.012
W= 0.0519

W= 0.2312

Pimephales promelas

LARVAL GROWTH TEST

Sylacauga
J. Earl Ham WWTP

Test Date: 10/04/22
10/11/22

ONE TAILED T-TEST

Y1 : MEAN OF THE CONTROL
Y2 : MEAN OF THE EFFLUENT
V1 : VARIANCE OF THE CONTROL
V2 : VARIANCE OF THE EFFLUENT
N1 : NUMBER OF REPLICATES IN CONTROL
N2 : NUMBER OF REPLICATES IN EFFLUENT

$$T = \frac{Y1 - Y2}{SP \cdot \sqrt{((1/N1) + (1/N2))}}$$

$$SP : \sqrt{(((N1-1) \cdot V1 + (N2-1) \cdot V2) / (N1+N2-2))}$$

Y1= 0.5335
Y2= 0.4823
V1= 0.00262
V2= 0.01034
N1= 4
N2= 4

SP= 0.0805

T= 0.9004

FOR 6 DEGREES OF FREEDOM AT K=1
THE CRITICAL T VALUE IS 1.944

0.9004 < 1.944 THEREFORE THE TEST
FINDS THAT GROWTH IN THE EFFLUENT
IS NOT SIGNIFICANTLY LOWER THAN IN THE CONTROL

Water Permits Division



Application Form 2F

Stormwater Discharges Associated with Industrial Activity

NPDES Permitting Program

Note: Complete this form *and* Form 1 if you are a new or existing facility whose discharge is composed entirely of stormwater associated with industrial activity, excluding discharges from construction activity under 40 CFR 122.26(b)(14)(x) or (b)(15). If your discharge is composed of stormwater *and* non-stormwater, you must complete Forms 1 and 2F, *and* you must complete Form 2C, 2D, or 2E, as appropriate. See the "Instructions" inside for further details.

Paperwork Reduction Act Notice

The U.S. Environmental Protection Agency estimates the average burden to collect and complete Form 2F to be 28.1 hours. The estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and reviewing the collection of information. Send comments about the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Chief, Information Policy Branch (PM-223), U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, DC 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th Street, NW, Washington, DC 20503, marked "Attention: Desk Officer for EPA."

FORM 2F—INSTRUCTIONS

General Instructions**Who Must Complete Form 2F?**

You must complete Form 2F if you answered "Yes" to Item 1.2.5 on Form 1—that is, you are a new or existing facility and your discharge is composed entirely of stormwater associated with industrial activity (excluding discharges from construction activity under 40 CFR 122.26(b)(14)(x) or (b)(15)) or composed of stormwater and non-stormwater and are seeking coverage under an *individual* National Pollutant Discharge Elimination System (NPDES) permit. Note that applicants in the latter category must also complete Forms 2C, 2D, or 2E, as applicable. See inset below.

Notes

- Form 2F must be completed by any operator of a facility that discharges stormwater associated with industrial activity or the operator of any stormwater discharger that EPA is evaluating for designation as a significant contributor of pollutants to waters of the United States, or as contributing to a violation of a water quality standard.
- For discharges composed entirely of stormwater, the operator must complete Form 2F in conjunction with Form 1.
- For discharges of stormwater combined with process wastewater, the operator must complete and submit Form 2F, Form 1, and Form 2C. Process wastewater is water that comes into direct contact with or results from the production or use of any raw material, intermediate product, finished product, byproduct, waste product, or wastewater.
- For discharges of stormwater combined with nonprocess wastewater, the operator must complete Form 2F, Form 1, and Form 2E. Nonprocess wastewater includes noncontact cooling water and sanitary wastes that are not regulated by effluent guidelines, except discharges by educational, medical, or commercial chemical laboratories.
- For new discharges of stormwater associated with industrial activity that will be combined with other new non-stormwater discharges, the operator must submit Form 2F, Form 1, and Form 2D.

Where to File Your Completed Form

Submit your completed application package (Forms 1 and 2F plus any other applicable forms) to your NPDES permitting authority. Consult Exhibit 1–1 of Form 1's "General Instructions" to identify your NPDES permitting authority.

Public Availability of Submitted Information

The U.S. Environmental Protection Agency (EPA) will make information from NPDES permit application forms available to the public for inspection and copying upon request. You may not claim any information on Form 2F (or related attachments) as confidential.

You may make a claim of confidentiality for any information that you submit to EPA that goes beyond the information required by Form 2F. Note that NPDES permitting authorities will deny claims for treating any effluent data (estimated or actual) as confidential. If you do not assert a claim of confidentiality at the time you submit your information to the NPDES permitting authority, EPA may make the information available to the public without further notice to you. EPA will handle claims of confidentiality in accordance with the Agency's business confidentiality regulations in Part 2 of Title 40 of the *Code of Federal Regulations* (CFR).

Completion of Forms

Print or type in the specified areas only. If you do not have enough space on the form to answer a question, you may continue on additional sheets, as necessary, using a format consistent with the form.

Provide your EPA Identification Number from the Facility Registry Service, NPDES permit number, and facility name at the top of each page of Form 2F and any attachments. If your facility is new (i.e., not yet constructed), write or type "New Facility" in the space provided for the EPA Identification Number and NPDES permit number. If you do not know your EPA Identification Number, contact your NPDES permitting authority. See Exhibit 1–1 of Form 1's "General Instructions" for contact information. Additionally, for Tables A through D, provide the applicable outfall number at the top of each page.

Do not leave any response areas blank unless the form directs you to skip them. If the form directs you to respond to an item that does not apply to your facility or activity, enter "NA" for "not applicable" to show that you considered the item and determined a response was not necessary for your facility.

The NPDES permitting authority will consider your application complete when it and any supplementary material are received and completed according to the authority's satisfaction. The NPDES permitting authority will judge the completeness of any application independently of the status of any other permit application or permit for the same facility or activity.

Definitions

The legal definitions of all key terms used in these instructions and Form 2F are in the "Glossary" at the end of the "General Instructions" in Form 1.

Line-by-Line Instructions**Section 1. Outfall Location**

Item 1.1. Identify each of the facility's outfalls by number. For each outfall, specify the latitude and longitude to the nearest 15 seconds and name of the receiving water. Latitude and longitude coordinates may be obtained in a variety of ways, including use of hand held devices (e.g., a GPS enabled smartphone), internet mapping tools (e.g.,

<https://mynasadata.larc.nasa.gov/latitudelongitude-finder/>), geographic information systems (e.g., ArcView), or paper maps from trusted sources (e.g., U.S. Geological Survey or USGS). The location of each outfall (i.e., where the coordinates are collected) shall be the location where collected and concentrated stormwater flows are discharged from the facility such that the first receiving water body into which the discharge flows, either directly or through a separate storm sewer system, is a water of the United States. If you need further guidance in responding to Item 1.1, refer to <http://www.epa.gov/geospatial/latitudelongitude-data-standard>.

Note: In EPA's stormwater permits, "outfalls" are referred to as "discharge points."

Note that space has been provided on the form for six outfalls. If you have more than this number, type your information on a separate sheet of paper in a format similar to that of the form. Make sure you note the EPA Identification Number, NPDES permit number, and facility name at the top of the page and indicate the specific item of the form to which you are responding—Item 1.1 in this case. In other sections of the form, you will be asked to provide information by outfall number (Sections 2, 4, 5, and 7).

Section 2. Improvements

Item 2.1. Indicate if you are 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. The requirements include, but are not limited to, permit conditions, administrative enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions. If yes, continue to Item 2.2. If no, skip to Section 3.

Item 2.2. Briefly identify and describe each applicable project (e.g., consent decree, enforcement order, or permit condition). For each condition, specify the affected outfall number(s), the source(s) of the discharge, the required final compliance date, and the projected final compliance date.

Item 2.3. OPTIONAL ITEM. Indicate if you have attached any sheets describing any additional water pollution control programs (or other environmental projects that could affect your discharges) that you may now have underway or planned. If you attach additional sheets, indicate in the attachment whether each program is actually underway or is planned, and indicate your actual or planned schedule for construction. Be sure to note your EPA Identification Number, NPDES permit number, and facility name at the top of any attached pages.

Section 3. Site Drainage Map

Item 3.1 Attach a site drainage map showing the topography of the facility. If a topographic map is unavailable, you may provide an outline of drainage areas served by the outfall(s) covered in the application. The site map must include the following information:

- Each of its drainage and discharge structures.
- The drainage area of each stormwater outfall.
- Paved areas and buildings within the drainage area of each stormwater outfall; each past or present area used for outdoor storage or disposal of significant materials; each existing structural control measure to reduce pollutants in stormwater runoff; materials loading and access areas; and areas where pesticides, herbicides, soil conditioners, and fertilizers are applied.
- Each hazardous waste treatment, storage, or disposal facility (including each area not required to have a Resource Conservation and Recovery Act permit and is used for accumulating hazardous waste for less than 90 days under 40 CFR 262.34).
- Each well where fluids from the facility are injected underground.
- Springs and other surface water bodies that receive stormwater discharges from the facility.

When you have completed and attached your site map to Form 2F, answer "Yes" to Item 3.1.

Section 4. Pollutant Sources

Item 4.1. List all outfalls discharging stormwater. Provide an estimate of the impervious surface area drained by the outfall. Specify units of measure. (Impervious surfaces are surfaces where stormwater runs off at rates significantly higher than background rates—e.g., predevelopment levels. They include paved areas, building roofs, parking lots, and roadways.)

Provide an estimate of the total surface area (impervious and pervious areas) drained by each outfall (within a mile radius of the facility). You may use the site map developed under Item 3.1 to estimate the total area drained by each outfall. For areas under 5 acres, consult your NPDES permitting authority to determine whether the area should be reported to the nearest tenth of an acre or nearest quarter of an acre.

Item 4.2. Provide a narrative description of the following:

- Significant materials that in three years prior to the submittal of this application have been treated, stored, or disposed of in a manner to allow exposure to stormwater.
- Method of treatment, storage, or disposal of such materials.
- Materials management practices employed, in the three years prior to the submittal of this application, to minimize contact by these materials with stormwater runoff.
- Materials loading and access areas.
- The location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

You should identify your significant materials by chemical name,

FORM 2F—INSTRUCTIONS CONTINUED

form (e.g., powder, liquid, etc.), and type of container or treatment unit. Indicate any materials treated, stored, or disposed of together. The term "significant materials" includes, but is not limited to: raw materials; fuels; materials such as solvents, detergents, and plastic pellets; finished materials such as metallic products; raw materials used in food processing or production; hazardous substances designated under Section 101(14) of the Comprehensive Environmental Response, Compensation, and Liability Act; any chemical the facility is required to report pursuant to Section 313 of Title III of the Superfund Amendments and Reauthorization Act; and fertilizers, pesticides; and waste products such as ashes, slag, and sludge that have the potential to be released with stormwater discharges.

Item 4.3. For each outfall, list the location and type of existing structural and non-structural control measure(s) to reduce pollutants in stormwater runoff. Structural controls include structures that enclose materials handling or storage areas; structures that cover materials; and berms, dikes, or diversion ditches around manufacturing, production, storage, or treatment units and retention ponds. Spill prevention plans, employee training, visual inspections, preventive maintenance, and housekeeping measures are examples of non-structural controls.

Describe the treatment, including the schedule and type of maintenance activities performed, and the ultimate disposal of any solid or fluid wastes other than by discharge. For each structural control identified, indicate the type of treatment the stormwater receives using the codes in Exhibit 2F-1, at the end of the instructions. For each non-structural control identified, indicate "Not Applicable" in the "Codes from Exhibit 2F-1" column.

Section 5. Non-Stormwater Discharges

Item 5.1. Provide a certification that all outfalls that should contain stormwater discharges associated with industrial activity have been tested or evaluated for the presence of non-stormwater discharges. Tests for such non-stormwater discharges can include smoke tests, fluorometric dye tests, analysis of accurate schematics, and others.

Item 5.2. Include a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test used to support the certification in Item 5.1. All non-stormwater discharges must be identified in a Form 2C, 2D, or 2E. See "Who Must Complete Form 2F?" above for more information.

Section 6. Significant Leaks or Spills

Item 6.1. Describe any significant leaks or spills of toxic or hazardous pollutants at the facility within the three years prior to the submittal of this application. Include the approximate date and location of the spill or leak and the type and amount of material released.

Section 7. Discharge Information

Item 7.1. Answer whether you are a new source or new discharge. Contact your NPDES permitting authority to determine if you are a new source or new discharge.

Tables A, B, C, and D

Items 7.2 to 7.17. These items require you to collect and report data in Tables A through D, at the end of Form 2F, for the parameters and pollutants listed in Exhibits 2F-2, 2F-3, and 2F-4 (at the end of the instructions). The instructions for completing Tables A through D are table-specific, as are the criteria for determining who should complete them.

Important note: Read the "General Instructions for Reporting, Sampling, and Analysis" below before completing Items 7.2 to 7.17.

Item 7.2 and Table A. All applicants must complete Table A. If the discharge is an existing discharge and your discharge is composed exclusively of stormwater (i.e., no process or nonprocess wastewater) then you only need to provide monitoring data for oil and grease, total phosphorus, total Kjeldahl nitrogen, and total nitrogen. Indicate "NA" for "not applicable" in the columns for all other parameters. Answer "Yes" to Item 7.2 once you have completed this task.

Item 7.3 and Table B. Indicate whether the facility is subject to an effluent limitations guideline (ELG) (see 40 CFR Subchapter N to determine which pollutants are limited in ELGs) or if the facility is subject to effluent limitations in an NPDES permit for its process wastewater or stormwater (if the facility is operating under an existing NPDES permit). If yes, continue to Item 7.4. If no, skip to Item 7.5.

Note: Stormwater discharges from certain industrial sources or activities have specific ELGs for which they must comply. These *stormwater-specific* ELGs include:

Regulated Discharge	40 CFR Section
Discharges resulting from spraydown or intentional wetting of logs at wet deck storage areas	Part 429, Subpart I
Runoff from phosphate fertilizer manufacturing facilities that comes into contact with any raw materials, finished product, byproducts or waste products (SIC 2874)	Part 418, Subpart A
Runoff from asphalt emulsion facilities	Part 443, Subpart A
Runoff from material storage piles at cement manufacturing facilities	Part 411, Subpart C
Mine dewatering discharges at crushed stone, construction sand and gravel, or industrial sand mining facilities	Part 436, Subparts B, C, and D
Runoff from hazardous waste and non-hazardous waste landfills	Part 445, Subparts A and B
Runoff from coal storage piles at steam electric generating facilities	Part 423
Runoff containing urea from airfield pavement deicing at existing and new primary airports with 1,000 or more annual non-propeller aircraft departures	Part 449

Item 7.4. In Table B, list all pollutants that are limited in an ELG to which the facility is subject and all pollutants listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit) and provide quantitative data for each pollutant (provide actual data for existing dischargers and estimated data for new sources and new dischargers). If a pollutant in Exhibits 2F-2 or 2F-3 is indirectly limited by an ELG through an indicator (e.g., use of total suspended solids as an indicator to control the discharge of iron and aluminum), you must provide data for the pollutant in Table B. Complete one table for each outfall. Answer "Yes" to Item 7.4 once you have completed this task.

FORM 2F—INSTRUCTIONS CONTINUED

Item 7.5 and Table C. Table C requires you to address the pollutants in Exhibits 2F–2, 2F–3, and 2F–4 for each outfall. Pollutants in each of these exhibits are addressed differently.

Indicate whether you know or have reason to believe any pollutants in Exhibit 2F–2 are present in the discharge. If yes, continue to Item 7.6. If no, skip to Item 7.7.

Item 7.6. For each outfall, list all pollutants in Exhibit 2F–2 that you know or have reason to believe are present in the discharge in Table C (except pollutants previously listed in Table B that are limited directly or indirectly by an ELG) and either report quantitative data or briefly describe the reasons the pollutant is expected to be discharged. Answer “Yes” to Item 7.6 once you have completed this task.

Item 7.7. This item asks if you qualify as a “small business.” If so, you are exempt from the reporting requirements for the organic toxic pollutants listed in Exhibit 2F–3.

You can qualify as a small business in two ways: (1) If your facility is a coal mine and if your probable total annual production is less than 100,000 tons per year, you may submit past production data or estimated future production (such as a schedule of estimated total production under 30 CFR 795.14(c)) instead of conducting analyses for the organic toxic pollutants; (2) If your facility is not a coal mine and if your gross total annual sales for the most recent three years average less than \$100,000 per year (in second quarter 1980 dollars), you may submit sales data for those years instead of conducting analyses for the organic toxic pollutants. The production or sales data must be for the facility that is the source of the discharge. The data should not be limited to production or sales for the process or processes that contribute to the discharge, unless those are the only processes at your facility. For sales data, in situations involving intra-corporate transfer of goods and services, the transfer price per unit should approximate market prices for those goods and services as closely as possible. Sales figures for years after 1980 should be indexed to the second quarter of 1980 by using the gross national product price deflator (second quarter of 1980 = 100). This index is available online from the U.S. Department of Commerce, Bureau of Economic Analysis at <http://www.bea.gov/national/pdf/SNTables.pdf>.

If you qualify as a small business according to the criteria above, answer “Yes” to Item 7.7 and skip to Item 7.18. Otherwise, answer “No” and continue to Item 7.8.

Item 7.8. Indicate whether you know or have reason to believe any pollutants in Exhibit 2F–3 are present in the discharge. If yes, continue to Item 7.9. If no, skip to Item 7.10.

Item 7.9. For each outfall, list all pollutants in Exhibit 2F–3 that you know or have reason to believe are present in the discharge in Table C (except pollutants previously listed in Table B). Answer “Yes” to Item 7.9 once you have completed this task.

Item 7.10. Indicate whether you expect any of the pollutants from Exhibit 2F–3 to be discharged in concentrations of 10 parts per billion (ppb) or greater. If yes, continue to Item 7.11. If no, skip to Item 7.12.

Item 7.11. Provide 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 (provide actual data for existing dischargers and estimated data for new sources and new dischargers). Answer “Yes” to Item 7.11 once you have completed this task.

Item 7.12. Indicate whether you expect acrolein, acrylonitrile, 2,4-dinitrophenol, or 2-methyl-4,6-dinitrophenol to be discharged in concentrations of 100 ppb or greater. If yes, continue to Item 7.13. If no, skip to Item 7.14.

Item 7.13. Provide 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 (provide actual data for existing dischargers and estimated data for new sources and new dischargers). Answer “Yes” to Item 7.13 once you have completed this task.

Item 7.14. For any pollutants you expect to be present in the discharge at concentrations less than 10 ppb (or less than 100 ppb for the above four pollutants), either submit quantitative data or briefly describe the reasons the pollutant is expected to be discharged in Table C. Answer “Yes” to Item 7.14 once you have completed this task.

Item 7.15. Indicate whether you know or have reason to believe any pollutants in Exhibit 2F–4 are present in the discharge. If yes, continue to Item 7.16. If no, skip to Item 7.17.

Item 7.16. For each outfall, list any pollutant in Exhibit 2F–4 that you know or believe to be present in the discharge in Table C and explain why you believe it to be present. No analysis is required, but if you have analytical data, you must report it. Answer “Yes” to Item 7.16 once you have completed this task.

Note: Under 40 CFR 117.12(a)(2), certain discharges of hazardous substances (listed in Exhibit 2F–5) may be exempted from the requirements of CWA Section 311, which establishes reporting requirements, civil penalties, and liability for cleanup costs for spills of oil and hazardous substances. A discharge of a particular substance can be exempted if the origin, source, and amount of the discharged substances are identified in the NPDES permit application or in the permit, if the permit contains a requirement for treatment of the discharge, and if the treatment is in place. If you would like to apply for an exemption from the requirements of CWA Section 311, attach additional sheets of paper to your application, setting forth the following information:

1. The substance and the amount of each substance that might be discharged.
2. The origin and source of the discharge of the substance.
3. The treatment to be provided for the discharge by:
 - a. An onsite treatment system separate from any treatment system treating your normal discharge;
 - b. A treatment system designed to treat your normal discharge and that is additionally capable of treating the amount of the substance identified under paragraph 1 above; or
 - c. Any combination of the above.

See 40 CFR 117.12(a)(2) and (c) or contact your NPDES permitting authority for further information on exclusions from CWA Section 311.

Item 7.17 and Table D. Provide data for the storm event(s) that resulted in the maximum daily discharges for the flow weighted composite sample in Table D. If sampling is conducted during more than one storm event, you only need to report the information

FORM 2F—INSTRUCTIONS CONTINUED

requested on Table D for the storm event(s) that resulted in any maximum pollutant concentration reported on Tables A through C.

Provide flow measurements or estimates of the flow rate, as well as the total amount of discharge for the storm event(s) sampled, the method of flow measurement, or estimation. Provide the data and duration of the storm event(s) sampled, rainfall measurements, or estimates of the storm event that generated the sampled runoff and the duration between the storm event sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm event. Answer "Yes" to Item 7.17 once you have completed this task.

Used or Manufactured Toxics

Item 7.18. Review Exhibits 2F-2 through 2F-4 and determine if you currently use or manufacture any of the pollutants listed as intermediate or final products or byproducts. If so, answer "Yes." You should also answer "Yes" if you know or have reason to believe that 2,3,7,8-tetrachloro-dibenzo-p-dioxin (TCDD) is discharged or if you use or manufacture 2,4,5-trichlorophenoxy acetic acid (2,4,5-T); 2-(2,4,5-trichlorophenoxy) propanoic acid (Silvex, 2,4,5-TP); 2-(2,4,5-trichlorophenoxy) ethyl, 2,2-dichloropropionate (Erbon); 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate (Ronnel); 2,4,5-trichlorophenol (TCP); or hexachlorophene (HCP). If your answer to Item 7.18 is "No," skip to Section 8.

Item 7.19. List all of the toxic pollutants identified under Item 7.18, including TCDD. Note that the NPDES permitting authority may waive or modify the requirement if you demonstrate that it would be unduly burdensome to identify each toxic pollutant and the NPDES permitting authority has adequate information to issue your permit. You may not claim any information submitted in response to Item 7.18 as confidential; however, you do not have to distinguish between use or production of the pollutants or list the amounts.

Section 8. Biological Toxicity Testing Data

Item 8.1. Answer whether you know of or have reason to believe that biological toxicity testing has been conducted of your wastewater treatment, including engineering reports or pilot plant studies. If no, skip to Section 9. Otherwise, continue.

Item 8.2. List any tests of which you are aware and their purposes.

Section 9. Contract Analysis Information

Item 9.1. Indicate if any of the analyses performed in Section 7 were performed by a contract laboratory or consulting firm. If no, skip to Section 10. If yes, continue to Item 9.2.

Item 9.2. Provide the name, address, phone number, and pollutants analyzed by the laboratory or consulting firm(s) in the spaces provided.

Section 10. Checklist and Certification Statement

Item 10.1. Review the checklist provided on the application. In Column 1, mark the sections of Form 2F that you have completed and are submitting with your application. For each section in Column 2, indicate whether you are submitting attachments.

Item 10.2. The Clean Water Act (CWA) provides for severe penalties for submitting false information on this application form. Section 309(c)(2) of the CWA provides that, "Any person who knowingly makes any false material statement, representation, or certification in any application, ...shall upon conviction be punished by a fine of not more than \$10,000 or by imprisonment for not more than six months or both."

FEDERAL REGULATIONS AT 40 CFR 122.22 REQUIRE THIS APPLICATION TO BE SIGNED AS FOLLOWS:

- A. For a corporation, by a responsible corporate officer. For the purpose of this section, a responsible corporate officer means: (1) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (2) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
- B. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively.
- C. For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official. For purposes of this section, a principal executive officer of a federal agency includes: (1) The chief executive officer of the agency, or (2) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of EPA).

END

**Submit your completed Form 1, Form 2F, and
all associated attachments
(and any other required NPDES application forms)
to your NPDES permitting authority.**

General Instructions for Reporting, Sampling, and Analysis

Important note: Read these instructions before completing Tables A through C and Section 7 of Form 2F.

General Items

Complete the applicable tables for each outfall at your facility. Be sure to note the EPA Identification Number, NPDES permit number, facility name, and applicable outfall number at the top of each table page and any associated attachments.

You may report some or all of the required data by attaching separate sheets of paper instead of completing Tables A through C for each of your outfalls so long as the sheets contain all of the required information and are similar in format to Tables A through C. For example, you may be able to print a report in a compatible format from the data system used in your gas chromatography/mass spectrometry (GC/MS) analysis completed under Table B.

If you are an existing discharger, you are required to report *actual* quantitative data. See "Use of Historic Data" below for use of historic data. If you are a new source or discharge, you may supply *estimated* data along with the source of each estimate. If you have quantitative data available, however, you must provide it. Base estimates on available, in-house or contractor engineering reports, or any other studies performed on the proposed facility. Use the following codes to report your source information in the "Source of Information" column:

Data Source	Code
Engineering reports	1
Actual data from pilot plants	1
Estimates from other engineering reports	2
Data from other similar plants	3
Best professional estimates	4
Others	5 and specify on the table

No later than 24 months after your facility commences to discharge, you must complete and submit sampling and analysis data for the pollutants and parameters in Tables A through C. However, you need not report results for tests you have already performed and reported under the discharge monitoring requirements of your NPDES permit.

Table A requires you to report at least one analysis for each pollutant listed. Tables B and C require you to report analytical data in two ways. For some pollutants addressed in Tables B and C, if you know or have reason to know that the pollutant is present in your discharge, you may be required to list the pollutant and test (sample and analyze) and report the levels of the pollutants in your discharge. For all other pollutants addressed in Tables B and C, you must list the pollutant if you know or have reason to know that the pollutant is present in the discharge, and either report quantitative data for the pollutant or briefly describe the reasons the pollutant is expected to be discharged. (See Items 7.2 through 7.17 of the instructions for completing Tables A through C.) Base your determination that a pollutant is/will be present in your discharge on your knowledge of the facility's raw materials, material management practices, maintenance chemicals, history of spills and releases, intermediate and final products and

byproducts, and any previous analyses known to you of your effluent or similar effluent.

Sampling

The collection of the samples for the reported analyses should be supervised by a person experienced in performing sampling of industrial wastewater or stormwater discharges. You may contact your NPDES permitting authority for detailed guidance on sampling techniques and for answers to specific questions. See Exhibit 1-1 of Form 1 for contact information. Any specific requirements in the analytical methods—for example, sample containers, sample preservation, holding times, and the collection of duplicate samples—must be followed.

The time when you sample should be representative of your normal operation, to the extent feasible, with all processes that contribute wastewater in normal operation, and with your treatment system operating properly with no system upsets. Collect samples from the center of the flow channel, where turbulence is at a maximum, at a site specified in your present NPDES permit, or at any site adequate for the collection of a representative sample.

Grab samples must be taken in the first 30 minutes of discharge (or as soon thereafter as practicable) for pH, temperature, cyanide, total phenols, residual chlorine, oil and grease, fecal coliform (including *E. coli*) and enterococci (previously known as fecal streptococcus at 40 CFR 122.26(d)(2)(iii)(A)(3)), and volatile organic compounds. You are not required to analyze a flow-weighted composite for these parameters.

For all other pollutants, both a grab sample collected during the first 30 minutes (or as soon thereafter as practicable) of the discharge and a flow-weighted composite sample must be analyzed. However, a minimum of one grab sample may be taken for effluents from holding ponds or other impoundments with a retention period of greater than 24 hours.

All samples must be collected from the discharge resulting from a storm event that is greater than 0.1 inches and at least 72 hours from the previously measurable (greater than 0.1 inch rainfall) storm event. Where feasible, the variance in the duration of the event and the total rainfall of the event should not exceed 50 percent from the average or median rainfall event in that area.

A grab sample must be taken during the first 30 minutes of the discharge (or as soon thereafter as practicable), and a flow-weighted composite must be taken for the entire event or for the first three hours of the event.

Grab and composite samples are defined as follows:

Grab sample: An individual sample of at least 100 milliliters collected during the first 30 minutes (or as soon thereafter as practicable) of the discharge. This sample is to be analyzed separately from the composite sample.

Flow-weighted composite sample: A flow-weighted composite sample may be taken with a continuous sampler that proportions the amount of sample collected with the flow rate or as a combination of a minimum of three sample aliquots taken in each hour of discharge

General Instructions for Reporting, Sampling, and Analysis Continued

for the entire event or for the first three hours of the event, with each aliquot being at least 100 milliliters and collected with a minimum period of 15 minutes between aliquot collections. The composite must be flow proportional; the time interval between either each aliquot or the volume of each aliquot must be proportional to either the stream (effluent) flow at the time of sampling or the total stream (effluent) flow since the collection of the previous aliquot. Aliquots may be collected manually or automatically. Where GC/MS volatile organic analysis is required, aliquots must be combined in the laboratory immediately before analysis. Only one analysis for the composite sample is required.

Use of Historical Data

Existing data may be used, if available, in lieu of sampling conducted solely for the purposes of this application, provided it is representative of the present discharge and was collected within 3 years of the application due date. If you sample for a listed pollutant on a monthly or more frequent basis, summarize the data collected within one year of the application for the pollutant(s) at issue.

Among the factors that would cause the data to be unrepresentative are significant changes in production level; changes in raw materials, processes, or final products; and changes in stormwater treatment. The NPDES permitting authority may request additional information, including current quantitative data, if they determine it to be necessary to assess your discharges. The NPDES permitting authority may allow or establish appropriate site-specific sampling procedures or requirements including sampling locations, the season in which the sampling takes place, the minimum duration between the previous measurable storm event and the storm event sampled, the minimum or maximum level of precipitation required for an appropriate storm event, the form of precipitation sampled (snow melt or rainfall), protocols for collecting samples under 40 CFR 136, and additional time for submitting data on a case-by-case basis.

Reporting

Report sampling results for all pollutants in Tables A through C as concentration *and* mass, with the exception of flow, temperature, pH, color, and fecal coliform organisms.

Flow, temperature, pH, color, and fecal coliform organisms must be reported as million gallons per day (mgd), degrees Celsius (°C), standard units, color units, and most probable number per 100 milliliters (MPN/100 mL), respectively. Use the following abbreviations in the columns requiring "units" in Tables A through C.

Concentration	Mass
ppm = parts per million	lbs = pounds
mg/L = milligrams per liter	ton = tons (English tons)
ppb = parts per billion	mg = milligrams
µg/L = micrograms per liter	g = grams
MPN = most probable number per 100 milliliters	kg = kilograms
	T = tonnes (metric tons)

All reporting of values for metals must be in terms of "total recoverable metal" unless:

- An applicable, promulgated ELG specifies the limitation for the metal in dissolved, valent, or total form;
- All approved analytical methods for the metal inherently measure only its dissolved form (e.g., hexavalent chromium); or
- The NPDES permitting authority has determined that in establishing case-by-case limitations it is necessary to express the limitations of the metal in dissolved, valent, or total form to carry out the provisions of the CWA.

If you measure only one grab sample and one flow-weighted composite sample for a given outfall, complete only the "Maximum Daily Discharge" columns in the tables and enter "1" in the "Number of Storm Events Sampled" column. The NPDES permitting authority may require you to conduct additional analyses to further characterize your discharges.

If you measure more than one value for a grab sample or a flow-weighted composite sample for a given outfall and those values are representative of your discharge, you must report them. You must describe your method of testing and analysis.

The "Average Daily Discharge" column on Tables A to C is *not* compulsory but should be filled out if data are available. To complete the "Average Daily Discharge" column, determine the average of all values within the last year and report the concentration and mass. Report the total number of storm events sampled under the "Number of Storm Events Sampled" column.

Substantially Identical Outfalls

If you have two or more substantially identical outfalls, you may request permission from your NPDES permitting authority to sample and analyze only one outfall and submit the results of the analysis for all substantially identical outfalls. If your request is granted, submit the following information on a separate sheet attached to the application form: the identity of the outfall you did test and an explanation of how it is substantially identical to the outfall(s) that you did not test.

Analysis

Except as specified below, all required quantitative data shall be collected in accordance with sufficiently sensitive analytical methods approved under 40 CFR 136 or required under 40 CFR chapter I, subchapter N or O. A method is "sufficiently sensitive" when:

- The method minimum level (ML) is at or below the level of the applicable water quality criterion for the measured pollutant or pollutant parameter.
- The method ML is above the water quality criterion, but the amount of the pollutant or pollutant parameter in the facility's discharge is high enough that the method detects and quantifies the level of the pollutant or pollutant parameter in the discharge.

General Instructions for Reporting, Sampling, and Analysis Continued	
<ul style="list-style-type: none"> The method has the lowest ML of the analytical methods approved under 40 CFR 136 or required under 40 CFR chapter I, subchapter N or O, for the measured pollutant or pollutant parameter. <p>Consistent with 40 CFR 136, you may provide matrix- or sample-specific MLs rather than the published levels. Further, where you can demonstrate that, despite a good faith effort to use a method that would otherwise meet the definition of "sufficiently sensitive," the analytical results are not consistent with the quality assurance (QA)/quality control (QC) specifications for that method, then the NPDES permitting authority may determine that the method is not performing adequately and the NPDES permitting authority should</p>	<p>select a different method from the remaining EPA-approved methods that is sufficiently sensitive consistent with 40 CFR 122.21(e)(3)(i). Where no other EPA-approved methods exist, you must select a method consistent with 40 CFR 122.21(e)(3)(ii).</p> <p>When there is no analytical method that has been approved under 40 CFR 136; required under 40 CFR chapter I, subchapter N or O, and is not otherwise required by the NPDES permitting authority, you may use any suitable method but shall provide a description of the method. When selecting a suitable method, other factors such as a method's precision, accuracy, or resolution, may be considered when assessing the performance of the method.</p>

Exhibit 2F-1. Codes for Treatment Units and Disposal of Wastes Not Discharged

1. PHYSICAL TREATMENT PROCESSES

1-A.....Ammonia stripping	1-M.....Grit removal
1-B.....Dialysis	1-N.....Microstraining
1-C.....Diatomaceous earth filtration	1-O.....Mixing
1-D.....Distillation	1-P.....Moving bed filters
1-E.....Electrodialysis	1-Q.....Multimedia filtration
1-F.....Evaporation	1-R.....Rapid sand filtration
1-G.....Flocculation	1-S.....Reverse osmosis (<i>hyperfiltration</i>)
1-H.....Flotation	1-T.....Screening
1-I.....Foam fractionation	1-U.....Sedimentation (<i>settling</i>)
1-J.....Freezing	1-V.....Slow sand filtration
1-K.....Gas-phase separation	1-W.....Solvent extraction
1-L.....Grinding (<i>comminutors</i>)	1-X.....Sorption

2. CHEMICAL TREATMENT PROCESSES

2-A.....Carbon adsorption	2-G.....Disinfection (<i>ozone</i>)
2-B.....Chemical oxidation	2-H.....Disinfection (<i>other</i>)
2-C.....Chemical precipitation	2-I.....Electrochemical treatment
2-D.....Coagulation	2-J.....Ion exchange
2-E.....Dechlorination	2-K.....Neutralization
2-F.....Disinfection (<i>chlorine</i>)	2-L.....Reduction

3. BIOLOGICAL TREATMENT PROCESSES

3-A.....Activated sludge	3-E.....Pre-aeration
3-B.....Aerated lagoons	3-F.....Spray irrigation/land application
3-C.....Anaerobic treatment	3-G.....Stabilization ponds
3-D.....Nitrification-denitrification	3-H.....Trickling filtration

4. WASTEWATER DISPOSAL PROCESSES

4-A.....Discharge to surface Water	4-C.....Reuse/recycle of treated effluent
4-B.....Ocean discharge through outfall	4-D.....Underground injection

5. SLUDGE TREATMENT AND DISPOSAL PROCESSES

5-A.....Aerobic digestion	5-M.....Heat drying
5-B.....Anaerobic digestion	5-N.....Heat treatment
5-C.....Belt filtration	5-O.....Incineration
5-D.....Centrifugation	5-P.....Land application
5-E.....Chemical conditioning	5-Q.....Landfill
5-F.....Chlorine treatment	5-R.....Pressure filtration
5-G.....Composting	5-S.....Pyrolysis
5-H.....Drying beds	5-T.....Sludge lagoons
5-I.....Elutriation	5-U.....Vacuum filtration
5-J.....Flotation thickening	5-V.....Vibration
5-K.....Freezing	5-W.....Wet oxidation
5-L.....Gravity thickening	

Exhibit 2F-2. Conventional and Nonconventional Pollutants (40 CFR 122.21, Appendix D, Table IV)

Bromide
Chlorine, total residual
Color
Fecal coliform
Fluoride
Nitrate-nitrite
Nitrogen, total organic (as N)
Oil and grease
Phosphorus (as P), total
Radioactivity (as alpha, total; beta, total; radium, total; and radium 226, total)
Sulfate (as SO₄)
Sulfide (as S)
Sulfite (as SO₃)
Surfactants
Aluminum, total
Barium, total
Boron, total
Cobalt, total
Iron, total
Magnesium, total
Molybdenum, total
Manganese, total
Tin, total
Titanium, total

Exhibit 2F-3. Toxic Pollutants (40 CFR 122.21, Appendix D, Tables II and III)

Toxic Pollutants and Total Phenol

Antimony, total	Copper, total	Silver, total
Arsenic, total	Lead, total	Thallium, total
Beryllium, total	Mercury, total	Zinc, total
Cadmium, total	Nickel, total	Cyanide, total
Chromium, total	Selenium, total	Phenols, total

GC/MS Fraction—Volatile Compounds

Acrolein	Dichlorobromomethane	1,1,2,2-tetrachloroethane
Acrylonitrile	1,1-dichloroethane	Tetrachloroethylene
Benzene	1,2-dichloroethane	Toluene
Bromoform	1,1-dichloroethylene	1,2-trans-dichloroethylene
Carbon tetrachloride	1,2-dichloropropane	1,1,1-trichloroethane
Chlorobenzene	1,3-dichloropropylene	1,1,2-trichloroethane
Chlorodibromomethane	Ethylbenzene	Trichloroethylene
Chloroethane	Methyl bromide	Vinyl chloride
2-Chloroethylvinyl ether	Methyl chloride	
Chloroform	Methylene chloride	

GC/MS Fraction—Acid Compounds

2-chlorophenol	2,4-dinitrophenol	Pentachlorophenol
2,4-dichlorophenol	2-nitrophenol	Phenol
2,4-dimethylphenol	4-nitrophenol	2,4,6-trichlorophenol
4,6-dinitro-o-cresol	P-chloro-m-cresol	

GC/MS Fraction—Base/Neutral Compounds

Acenaphthene	4-chlorophenyl phenyl ether	Hexachlorobenzene
Acenaphthylene	Chrysene	Hexachlorobutadiene
Anthracene	Dibenzo (a,h) anthracene	Hexachlorocyclopentadiene
Benzidine	1,2-dichlorobenzene	Hexachloroethane
Benzo (a) anthracene	1,3-dichlorobenzene	Indeno (1,2,3-cd) pyrene
Benzo (a) pyrene	1,4-dichlorobenzene	Isophorone
3,4-benzofluoranthene	3,3-dichlorobenzidine	Naphthalene
Benzo (ghi) perylene	Diethyl phthalate	Nitrobenzene
Benzo (k) fluoranthene	Dimethyl phthalate	N-nitrosodimethylamine
Bis (2-chloroethoxy) methane	Di-n-butyl phthalate	N-nitrosodi-n-propylamine
Bis (2-chloroethyl) ether	2,4-dinitrotoluene	N-nitrosodiphenylamine
Bis (2-chloroisopropyl) ether	2,6-dinitrotoluene	Phenanthrene
Bis (2-ethylhexyl) phthalate	Di-n-octyl phthalate	Pyrene
4-bromophenyl phenyl ether	1,2-diphenylhydrazine (as azobenzene)	1,2,4-trichlorobenzene
Butyl benzyl phthalate	Fluoranthene	
2-chloronaphthalene	Fluorene	

GC/MS Fraction—Pesticides

Aldrin	Dieldrin	PCB-1254
α-BHC	α-endosulfan	PCB-1221
β-BHC	β-endosulfan	PCB-1232
γ-BHC	Endosulfan sulfate	PCB-1248
δ-BHC	Endrin	PCB-1260
Chlordane	Endrin aldehyde	PCB-1016
4,4'-DDT	Heptachlor	Toxaphene
4,4'-DDE	Heptachlor epoxide	
4,4'-DDD	PCB-1242	

Exhibit 2F-4. Certain Hazardous Substances and Asbestos (40 CFR 122.21, Appendix D, Table V)

Toxic Pollutant		
Asbestos	Hazardous Substances	
Acetaldehyde	Dinitrobenzene	Naphthenic acid
Allyl alcohol	Diquat	Nitrotoluene
Allyl chloride	Disulfoton	Parathion
Amyl acetate	Diuron	Phenolsulfonate
Aniline	Epichlorohydrin	Phosgene
Benzonitrile	Ethion	Propargite
Benzyl chloride	Ethylene diamine	Propylene oxide
Butyl acetate	Ethylene dibromide	Pyrethrins
Butylamine	Formaldehyde	Quinoline
Captan	Furfural	Resorcinol
Carbaryl	Guthion	Strontium
Carbofuran	Isoprene	Strychnine
Carbon disulfide	Isopropanolamine	Styrene
Chlorpyrifos	Kelthane	2,4,5-T (2,4,5-trichlorophenoxyacetic acid)
Coumaphos	Kepone	TDE (tetrachlorodiphenyl ethane)
Cresol	Malathion	2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]
Crotonaldehyde	Mercaptodimethur	Trichlorofon
Cyclohexane	Methoxychlor	Triethanolamine
2,4-D (2,4-dichlorophenoxyacetic acid)	Methyl mercaptan	Triethylamine
Diazinon	Methyl methacrylate	Trimethylamine
Dicamba	Methyl parathion	Uranium
Dichlobenil	Mevinphos	Vanadium
Dichlone	Mexacarbate	Vinyl acetate
2,2-dichloropropionic acid	Monoethyl amine	Xylene
Dichlorvos	Monomethyl amine	Xylenol
Diethyl amine	Naled	Zirconium
Dimethyl amine		

Exhibit 2F–5. Hazardous Substances

1. Acetaldehyde	73. Captan	144. Ferrous sulfate
2. Acetic acid	74. Carbaryl	145. Formaldehyde
3. Acetic anhydride	75. Carbofuran	146. Formic acid
4. Acetone cyanohydrin	76. Carbon disulfide	147. Fumaric acid
5. Acetyl bromide	77. Carbon tetrachloride	148. Furfural
6. Acetyl chloride	78. Chlordane	149. Guthion
7. Acrolein	79. Chlorine	150. Heptachlor
8. Acrylonitrile	80. Chlorobenzene	151. Hexachlorocyclopentadiene
9. Adipic acid	81. Chloroform	152. Hydrochloric acid
10. Aldrin	82. Chloropyrifos	153. Hydrofluoric acid
11. Allyl alcohol	83. Chlorosulfonic acid	154. Hydrogen cyanide
12. Allyl chloride	84. Chromic acetate	155. Hydrogen sulfide
13. Aluminum sulfate	85. Chromic acid	156. Isoprene
14. Ammonia	86. Chromic sulfate	157. Isopropanolamine dodecylbenzenesulfonate
15. Ammonium acetate	87. Chromous chloride	158. Kelthane
16. Ammonium benzoate	88. Cobaltous bromide	159. Kepone
17. Ammonium bicarbonate	89. Cobaltous formate	160. Lead acetate
18. Ammonium bichromate	90. Cobaltous sulfamate	161. Lead arsenate
19. Ammonium bifluoride	91. Coumaphos	162. Lead chloride
20. Ammonium bisulfite	92. Cresol	163. Lead fluoborate
21. Ammonium carbamate	93. Crotonaldehyde	164. Lead fluoite
22. Ammonium carbonate	94. Cupric acetate	165. Lead iodide
23. Ammonium chloride	95. Cupric acetoarsenite	166. Lead nitrate
24. Ammonium chromate	96. Cupric chloride	167. Lead stearate
25. Ammonium citrate	97. Cupric nitrate	168. Lead sulfate
26. Ammonium fluoroborate	98. Cupric oxalate	169. Lead sulfide
27. Ammonium fluoride	99. Cupric sulfate	170. Lead thiocyanate
28. Ammonium hydroxide	100. Cupric sulfate ammoniated	171. Lindane
29. Ammonium oxalate	101. Cupric tartrate	172. Lithium chromate
30. Ammonium silicofluoride	102. Cyanogen chloride	173. Malathion
31. Ammonium sulfamate	103. Cyclohexane	174. Maleic acid
32. Ammonium sulfide	104. 2,4-D acid (2,4-dichlorophenoxyacetic acid)	175. Maleic anhydride
33. Ammonium sulfite	105. 2,4-D esters (2,4-dichlorophenoxyacetic acid esters)	176. Mercaptodimethur
34. Ammonium tartrate	106. DDT	177. Mercuric cyanide
35. Ammonium thiocyanate	107. Diazinon	178. Mercuric nitrate
36. Ammonium thiosulfate	108. Dicamba	179. Mercuric sulfate
37. Amyl acetate	109. Dichlobenil	180. Mercuric thiocyanate
38. Aniline	110. Dichlone	181. Mercurous nitrate
39. Antimony pentachloride	111. Dichlorobenzene	182. Methoxychlor
40. Antimony potassium tartrate	112. Dichloropropane	183. Methyl mercaptan
41. Antimony tribromide	113. Dichloropropene	184. Methyl methacrylate
42. Antimony trichloride	114. Dichloropropene-dichloropropene mix	185. Methyl parathion
43. Antimony trifluoride	115. 2,2-dichloropropionic acid	186. Mevinphos
44. Antimony trioxide	116. Dichlorvos	187. Mexacarbate
45. Arsenic disulfide	117. Dieldrin	188. Monoethylamine
46. Arsenic pentoxide	118. Diethylamine	189. Monomethylamine
47. Arsenic trichloride	119. Dimethylamine	190. Naled
48. Arsenic trioxide	120. Dinitrobenzene	191. Naphthalene
49. Arsenic trisulfide	121. Dinitrophenol	192. Naphthenic acid
50. Barium cyanide	122. Dinitrotoluene	193. Nickel ammonium sulfate
51. Benzene	123. Diquat	194. Nickel chloride
52. Benzoic acid	124. Disulfoton	195. Nickel hydroxide
53. Benzoxazole	125. Diuron	196. Nickel nitrate
54. Benzoyl chloride	126. Dodecylbenzenesulfonic acid	197. Nickel sulfate
55. Benzyl chloride	127. Endosulfan	198. Nitric acid
56. Beryllium chloride	128. Endrin	199. Nitrobenzene
57. Beryllium fluoride	129. Epichlorohydrin	200. Nitrogen dioxide
58. Beryllium nitrate	130. Ethion	201. Nitrophenol
59. Butylacetate	131. Ethylbenzene	202. Nitrotoluene
60. n-butylphthalate	132. Ethylenediamine	203. Paraformaldehyde
61. Butylamine	133. Ethylene dibromide	204. Parathion
62. Butyric acid	134. Ethylene dichloride	205. Pentachlorophenol
63. Cadmium acetate	135. Ethylene diaminetetracetic acid (EDTA)	206. Phenol
64. Cadmium bromide	136. Ferric ammonium citrate	207. Phosgene
65. Cadmium chloride	137. Ferric ammonium oxalate	208. Phosphoric acid
66. Calcium arsenate	138. Ferric chloride	209. Phosphorus
67. Calcium arsenite	139. Ferric fluoride	210. Phosphorus oxychloride
68. Calcium carbide	140. Ferric nitrate	211. Phosphorus pentasulfide
69. Calcium chromate	141. Ferric sulfate	212. Phosphorus trichloride
70. Calcium cyanide	142. Ferrous ammonium sulfate	213. Polychlorinated biphenyls (PCB)
71. Calcium dodecylbenzenesulfonate	143. Ferrous chloride	214. Potassium arsenate
72. Calcium hypochlorite		215. Potassium arsenite

Exhibit 2F-5. Hazardous Substances

216. Potassium bichromate	245. Sodium phosphate (dibasic)	271. Uranyl acetate
217. Potassium chromate	246. Sodium phosphate (tribasic)	272. Uranyl nitrate
218. Potassium cyanide	247. Sodium selenite	273. Vanadium pentoxide
219. Potassium hydroxide	248. Strontium chromate	274. Vanadyl sulfate
220. Potassium permanganate	249. Strychnine	275. Vinyl acetate
221. Propargite	250. Styrene	276. Vinylidene chloride
222. Propionic acid	251. Sulfuric acid	277. Xylene
223. Propionic anhydride	252. Sulfur monochloride	278. Xylenol
224. Propylene oxide	253. 2,4,5-T acid (2,4,5-trichlorophenoxyacetic acid)	279. Zinc acetate
225. Pyrethrins	254. 2,4,5-T amines (2,4,5-trichlorophenoxy acetic acid amines)	280. Zinc ammonium chloride
226. Quinoline	255. 2,4,5-T esters (2,4,5-trichlorophenoxy acetic acid esters)	281. Zinc borate
227. Resorcinol	256. 2,4,5-T salts (2,4,5-trichlorophenoxy acetic acid salts)	282. Zinc bromide
228. Selenium oxide	257. 2,4,5-TP acid (2,4,5-trichlorophenoxy propanoic acid)	283. Zinc carbonate
229. Silver nitrate	258. 2,4,5-TP acid esters (2,4,5-trichlorophenoxy propanoic acid esters)	284. Zinc chloride
230. Sodium	259. TDE (tetrachlorodiphenyl ethane)	285. Zinc cyanide
231. Sodium arsenate	260. Tetraethyl lead	286. Zinc fluoride
232. Sodium arsenite	261. Tetraethyl pyrophosphate	287. Zinc formate
233. Sodium bichromate	262. Thallium sulfate	288. Zinc hydrosulfite
234. Sodium bifluoride	263. Toluene	289. Zinc nitrate
235. Sodium bisulfite	264. Toxaphene	290. Zinc phenolsulfonate
236. Sodium chromate	265. Trichlorofon	291. Zinc phosphide
237. Sodium cyanide	266. Trichloroethylene	292. Zinc silicofluoride
238. Sodium dodecylbenzenesulfonate	267. Trichlorophenol	293. Zinc sulfate
239. Sodium fluoride	268. Triethanolamine dodecylbenzenesulfonate	294. Zirconium nitrate
240. Sodium hydrosulfide	269. Triethylamine	295. Zirconium potassium fluoride
241. Sodium hydroxide	270. Trimethylamine	296. Zirconium sulfate
242. Sodium hypochlorite		297. Zirconium tetrachloride
243. Sodium methylate		
244. Sodium nitrite		