Edward F. Poolos
Director

Jeffery W. Kitchens
Deputy Director

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

Kay Ivey
Governor

APRIL 23,2026

Gerry McManus
CFO/Controller
Baldwin County Sewer Service, LLC
14747 Underwood Road
Summerdale, AL 36580

RE: Draft Permit
NPDES Permit No. AL0042234
Spanish Fort Sewer WWTP
Baldwin County, Alabama

Dear Mr. McManus:

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.

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)

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

If you have questions regarding this permit or monitoring requirements, please contact Stephanie Ammons at sammons@adem.alabama.gov or (334) 274-4151.

Sincerely,

Stephanie Ammons

Stephanie Ammons
Municipal Section
Water Division

Enclosure

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

ADEM
Alabama Department of Environmental Management

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT

PERMITTEE: BALDWIN COUNTY SEWER SERVICE, LLC
14747 UNDERWOOD ROAD
SUMMERDALE, AL 36580

FACILITY LOCATION: SPANISH FORT SEWER WWTP (OUTFALL 0011 – 0.25 MGD)
12840 HIGHWAY 90 (OUTFALL 0023 – 3.0 MGD)
LOXLEY, ALABAMA (OUTFALL 0024 – 4.0 MGD)
BALDWIN COUNTY

PERMIT NUMBER: AL0042234

RECEIVING WATERS: BAY BRANCH, FISH RIVER (STORM WATER 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 0011: 0.25 MGD Treated Domestic Wastewater

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	*****	mg/l	2X Weekly	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	8.5 Maximum Daily	S.U.	2X Weekly	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	62.5 Monthly Average	93.8 Weekly Average	lbs/day	*****	30.0 Monthly Average	45.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Solids, Total Suspended (00530) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	8.3 Monthly Average	12.5 Weekly Average	lbs/day	*****	4.0 Monthly Average	6.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	W
Nitrogen, Ammonia Total (As N) (00610) Effluent Gross Value	4.1 Monthly Average	6.2 Weekly Average	lbs/day	*****	2.0 Monthly Average	3.0 Weekly Average	mg/l	2X Weekly	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	GS
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	GS
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	GS

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

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

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

DSN 0011 (Continued): 0.25 MGD Treated Domestic Wastewater

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

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Flow, In Conduit or Thru Treatment Plant (50050) Effluent Gross Value	(Report) Monthly Average	(Report) Maximum Daily	MGD	*****	*****	*****	*****	Daily	Continuous	Not Seasonal
Chlorine, Total Residual (50060) See notes (3, 4) Effluent Gross Value	*****	*****	*****	*****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	2X Weekly	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	235 Maximum Daily	col/100mL	2X Weekly	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	52.1 Monthly Average	78.1 Weekly Average	lbs/day	*****	25.0 Monthly Average	37.5 Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	2X Weekly	24-Hr Composite	Not Seasonal
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

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

GS = Growing Season (April – October)

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

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

2. DSN 001T: 0.25 MGD Toxicity

This is an administrative outfall designation. Outfall 001T is the same physical outfall as Outfall 0011. Discharge from this outfall 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.

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)
GS = Growing Season (April – October)

3. DSN 0023: 3.0 MGD Treated Domestic Wastewater

During the period beginning on the effective date of this permit and lasting until completion of the 4.0 MGD facility expansion, the Permittee is authorized to discharge from Outfall 0023, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	*****	mg/l	3X Weekly test	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	8.5 Maximum Daily	S.U.	3X Weekly test	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	750 Monthly Average	1125 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	100 Monthly Average	150 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	50.0 Monthly Average	75.0 Weekly Average	lbs/day	*****	2.0 Monthly Average	3.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

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

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

DSN 0023 (Continued): 3.0 MGD Treated Domestic Wastewater

During the period beginning on the effective date of this permit and lasting until completion of the 4.0 MGD facility expansion, the Permittee is authorized to discharge from Outfall 0023, 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)
Zinc Total Recoverable (01094) Effluent Gross Value	*****	*****	*****	*****	197 Monthly Average	197 Maximum Daily	ug/l	Monthly	Grab	Not Seasonal
Copper Total Recoverable (01119) Effluent Gross Value	*****	*****	*****	*****	12.7 Monthly Average	18.0 Maximum Daily	ug/l	Monthly	Grab	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	*****	*****	*****	*****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	235 Maximum Daily	col/100mL	3X Weekly test	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	625 Monthly Average	938 Weekly Average	lbs/day	*****	25.0 Monthly Average	37.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

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

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

DSN 0023 (Continued): 3.0 MGD Treated Domestic Wastewater

During the period beginning on the effective date of this permit and lasting until completion of the 4.0 MGD facility expansion, the Permittee is authorized to discharge from Outfall 0023, 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, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

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

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

4. DSN 0024: 4.0 MGD Treated Domestic Wastewater

This is an administrative outfall. Outfall 0024 is the same physical outfall as Outfall 0023. During the period beginning on the completion of the 4.0 MGD facility expansion and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 0024, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

Parameter	Quantity or Loading		Units	Quality or Concentration			Units	Sample Freq See note (1)	Sample Type	Seasonal See note (2)
Oxygen, Dissolved (DO) (00300) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	*****	mg/l	3X Weekly test	Grab	Not Seasonal
pH (00400) Effluent Gross Value	*****	*****	*****	6.0 Minimum Daily	*****	8.5 Maximum Daily	S.U.	3X Weekly test	Grab	Not Seasonal
Solids, Total Suspended (00530) Effluent Gross Value	1000 Monthly Average	1501 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	133 Monthly Average	200 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	66.7 Monthly Average	100 Weekly Average	lbs/day	*****	2.0 Monthly Average	3.0 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	S
Nitrogen, Kjeldahl Total (As N) (00625) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal
Phosphorus, Total (As P) (00665) Effluent Gross Value	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	Monthly	24-Hr Composite	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

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

GS = Growing Season (April – October)

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

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

DSN 0024 (Continued): 4.0 MGD Treated Domestic Wastewater

This is an administrative outfall. Outfall 0024 is the same physical outfall as Outfall 0023. During the period beginning on the completion of the 4.0 MGD facility expansion and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 0024, 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)
Zinc Total Recoverable (01094) Effluent Gross Value	*****	*****	*****	*****	197 Monthly Average	197 Maximum Daily	ug/l	Monthly	Grab	Not Seasonal
Copper Total Recoverable (01119) Effluent Gross Value	*****	*****	*****	*****	12.7 Monthly Average	18.0 Maximum Daily	ug/l	Monthly	Grab	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	*****	*****	*****	*****	0.011 Monthly Average	0.019 Maximum Daily	mg/l	3X Weekly test	Grab	Not Seasonal
E. Coli (51040) Effluent Gross Value	*****	*****	*****	*****	126 Monthly Average	235 Maximum Daily	col/100mL	3X Weekly test	Grab	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Effluent Gross Value	834 Monthly Average	1251 Weekly Average	lbs/day	*****	25.0 Monthly Average	37.5 Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal
BOD, Carbonaceous 05 Day, 20C (80082) Raw Sew/Influent	(Report) Monthly Average	(Report) Weekly Average	lbs/day	*****	(Report) Monthly Average	(Report) Weekly Average	mg/l	3X Weekly test	24-Hr Composite	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

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

GS = Growing Season (April – October)

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

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

DSN 0024 (Continued): 4.0 MGD Treated Domestic Wastewater

This is an administrative outfall. Outfall 0024 is the same physical outfall as Outfall 0023. During the period beginning on the completion of the 4.0 MGD facility expansion and lasting through the expiration date of this permit, the Permittee is authorized to discharge from Outfall 0024, 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, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal
Solids, Suspended Percent Removal (81011) Percent Removal	*****	*****	*****	85.0 Monthly Average Minimum	*****	*****	%	Monthly	Calculated	Not Seasonal

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

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

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

See Permit Requirements for Stormwater in Part IV.G

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

GS = Growing Season (April – October)

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

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

5. DSN 002Q: 3.0 MGD, 4.0 MGD Treated Domestic Wastewater

This is an administrative outfall. Outfall 002Q is the same physical outfall as Outfall 0023. 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 002Q, which is described more fully in the Permittee's application. Such discharge shall be limited and monitored by the Permittee as specified below:

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

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

(3) Mercury monitoring is required quarterly using EPA approved methods 1631E/1669 or an alternative method specifically approved by the Department.

6. DSN 002T: 3.0 MGD, 4.0 MGD Toxicity

This is an administrative outfall designation. Outfall 002T is the same physical outfall as Outfall 0023. Discharge from this outfall shall be limited and monitored 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.

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)
GS = Growing Season (April – October)

7. DSN 003S and 007S: Storm Water

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 Outfalls 003S and 007S, which are described more fully in the Permittee's application as Outfalls DP-1 and DP-5, respectively. The discharges at Outfalls 003S and 007S shall be limited as specified below; however, the Permittee is authorized to conduct representative sampling at Outfall 007S for Outfall 003S:

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

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

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

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

See Permit Requirements for Stormwater in Part IV.G

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

GS = Growing Season (April – October)

(3) See Part IV.G.3 for storm water monitoring requirements.

8. DSN 004S and 008S: Storm Water

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 Outfalls 004S and 008S, which are described more fully in the Permittee's application as Outfall DP-2 and DP-6, respectively. The discharges at Outfalls 004S and 008S shall be limited and as specified below; however, the Permittee is authorized to conduct representative sampling at Outfall 008S for Outfall 004S.

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

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

(3) See Part IV.G.3 for storm water monitoring requirements.

9. DSN 005S and 009S: Storm Water

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 Outfalls 005S and 009S, which are described more fully in the Permittee's application as Outfalls DP-3 and DP-7. The discharges at Outfalls 005S and 009S shall be limited as specified below; however, the Permittee is authorized to conduct representative sampling at Outfall 009S for Outfall 005S.

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

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

(3) See Part IV.G.3 for storm water monitoring requirements.

10. DSN 006S and 010S: Storm Water

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 Outfalls 006S and 010S, which are described more fully in the Permittee's application as Outfalls DP-4 and DP-8. The discharges at Outfalls 006S and 010S shall be limited as specified below; however, the Permittee is authorized to conduct representative sampling at Outfall 010S for Outfall 006S.

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

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

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

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

See Permit Requirements for Stormwater in Part IV.G

(2) S = Summer (May – November)
W = Winter (December - April)
ECS = E. coli Summer (May - October)
ECW = E. coli Winter (November - April)
GS = Growing Season (April – October)

(3) See Part IV.G.3 for storm water monitoring requirements.

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.

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.

   The permittee shall sample and analyze for the pollutants listed in Table C of EPA Form 2A at the 3.0 MGD facility (Outfall 0023). At a minimum, effluent testing data must be based on at least three pollutant scans. Within 180 days of the effective date of this permit, the permittee shall resubmit EPA Form 2A which should include data that was not available prior to commencing discharge at the new 3.0 MGD facility.

PART II: OTHER REQUIREMENTS, RESPONSIBILITIES, AND DUTIES

A. OPERATIONAL AND MANAGEMENT REQUIREMENTS

1. **Facilities Operation and Maintenance**

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

2. **Best Management Practices**

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

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

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

3. **Certified Operator**

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

B. OTHER RESPONSIBILITIES

1. **Duty to Mitigate Adverse Impacts**

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

2. **Right of Entry and Inspection**

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

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

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

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

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

C. BYPASS AND UPSET

1. **Bypass**

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

   b. A bypass is not prohibited if:

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

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

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

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

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

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

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

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

2. **Upset**

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

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

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

(i) An upset occurred;

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

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

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

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

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

1. **Duty to Comply**

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

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

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

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

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

2. **Removed Substances**

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

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

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

4. **Compliance with Statutes and Rules**

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

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

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

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

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

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

2. **Change in Discharge**

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

3. **Transfer of Permit**

This permit may not be transferred or the name of the permittee changed without notice to the Director and subsequent modification or revocation and reissuance of the permit to identify the new permittee and to incorporate any other changes as may be required under the FWPCA or AWPCA. In the case of a change in name, ownership or control of the permittee's premises only, a request for permit modification in a format acceptable to the Director is required at least 30 days prior to the change. In the case of a change in name, ownership, or control of the permittee's premises accompanied by a change or proposed change in effluent characteristics, a complete permit application is required to be submitted to the Director at least 180 days prior to the change. Whenever the Director is notified of a change in name, ownership, or control, he may decide not to modify the existing permit and require the submission of a new permit application.

4. **Permit Modification and Revocation**

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

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

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

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

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

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

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

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

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

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

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

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

(8) To agree with a granted variance under 30l(c), 30l(g), 30l(h), 30l(k), or 3l6(a) of the FWPCA or for fundamentally different factors;

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

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

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

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

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

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

5. **Termination**

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

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

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

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

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

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

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

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

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

6. **Suspension**

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

7. **Stay**

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

F. COMPLIANCE WITH TOXIC POLLUTANT STANDARD OR PROHIBITION

If any applicable effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition) is established under Section 307(a) of the FWPCA, 33 U.S.C. Section I317(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 001 and 002.

b. The samples shall be diluted using appropriate control water to the Instream Waste Concentration (IWC) which is 100 percent effluent. The IWC is the actual concentration of effluent, after mixing, in the receiving stream during a 7-day, 10-year low flow period.

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

2. General Test Requirements

a. A minimum of three (3) 24-hour composite samples shall be obtained for use in the above biomonitoring tests. Samples shall be collected every other day so that the laboratory receives water samples on the

first, third, and fifth day of the seven-day test period. The holding time for each composite sample shall not exceed 36 hours. The control water shall be a water prepared in the laboratory in accordance with the EPA procedure described in EPA 821-R-02-013 (most current edition) or another control water selected by the Permittee and approved by the Department.

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

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

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

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

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

d. Toxicity tests shall be conducted for the duration of this permit in the month of **October**. Should results from the Annual Toxicity test indicate that Outfall 001 or Outfall 002 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, 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 335-6-6-.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. MERCURY MINIMIZATION PLAN

1. Plan Requirements

Within 180 days from the effective date of this Permit or initial discharge, whichever is later, the Permittee shall submit to the Department an updated Mercury Minimization Plan (MMP) prepared by an Alabama Registered Professional Engineer. The MMP shall be revised as needed to efficiently and effectively reduce mercury discharges to the maximum extent practicable. Proposed revisions to the MMP may be submitted to the Department with the annual MMP status report or as needed for Departmental review. The updated plan shall, at a minimum, include:

a. A program to identify and compile an inventory of potential sources of mercury which contribute to the discharge, including but not limited to, an assessment of the public water source, an assessment of the permittee's wastewater treatment chemicals containing mercury, dental offices, medical facilities, industrial or commercial users of the POTW, stormwater (including potential for atmospheric deposition within the treatment works), inflow and infiltration, school laboratories, and equipment containing mercury within the wastewater treatment works.

b. A monitoring plan which considers monitoring and possible seasonal variations at, but not limited to, the influent to the POTW (including the public water source and atmospheric deposition), receiving water upstream of the POTW discharge to determine surface water background values, within the collection system (including identification of specific locations), and of potential industrial and/or

commercial users, dental offices, medical facilities, and school laboratories. The monitoring plan should establish the initial frequency of proposed monitoring and shall utilize EPA Method 1631/1669 E, or an alternate method approved by the Department.

c. Plans to develop and implement cost-effective control measures for identified sources of mercury. Examples include, but are not limited to, public education and outreach at identified sources, evaluation of chemical usage and equipment usage within the wastewater collection and treatment systems for potential replacement with materials that do not contain mercury, audits of industrial users, etc.

d. Plans to develop a Public Education and Outreach program. Examples include identification to the public of recycling vendors who accept items containing mercury, a collection program for materials containing mercury for residents, news releases and public outreach to inform the public and/or potential sources of mercury of the issues associated with the inappropriate disposal of mercury, informational fact sheets for distribution where mercury containing products are purchased or used, etc.

2. Semi -Annual Progress Reports

The Permittee shall submit semi-annual MMP status reports by January 31st and July 31st, and each subsequent January 31st and July 31st. Each element of the MMP should be addressed in the semi-annual MMP status report, including but not limited to:

a. Potential Sources: A list of potential mercury sources that have been previously or newly identified, including levels of mercury contribution(s) from each source, either measured or estimated/predicted, to the permittee's discharge.

b. Monitoring Plan: A summary of all monitoring results not already submitted to the Department, including an analysis of all mercury monitoring results (i.e., trend analysis, if adequate data are available).

c. Control Measures: Details of control measures designed and/or implemented since last report submittal.

d. Public Education and Outreach: A summary of public education and outreach developed and/or conducted since the last report submittal.

e. Proposed revisions to the MMP, including justification for each adjustment. Examples of adjustments could include changes in monitoring locations or frequencies based upon previous results, changes in public education and outreach methods, control measures, inventory of potential sources, etc.

I. BEST MANAGEMENT PRACTICES (BMP) PLAN REQUIREMENTS

1. BMP Plan

The permittee shall develop and implement a Best Management Practices (BMP) Plan which prevents, or minimizes the potential for, the release of pollutants from ancillary activities, including material storage areas; plant site runoff; in-plant transfer, process and material handling areas; loading and unloading operations, and sludge and waste disposal areas, to the waters of the State through plant site runoff; spillage or leaks; sludge or waste disposal; or drainage from raw material storage.

2. Plan Content

The permittee shall prepare and implement a best management practices (BMP) plan, which shall:

a. Establish specific objectives for the control of pollutants:

(1) Each facility component or system shall be examined for its potential for causing a release of significant amounts of pollutants to waters of the State due to equipment failure, improper operation, natural phenomena such as rain or snowfall, etc.

(2) Where experience indicates a reasonable potential for equipment failure (e.g., a tank overflow or leakage), natural condition (e.g. precipitation), or circumstances to result in significant amounts of pollutants reaching surface waters, the plan should include a prediction of the direction, rate of flow, and total quantity of pollutants which could be discharged from the facility as a result of each condition or circumstance.

b. Establish specific best management practices to meet the objectives identified under paragraph a. of this section, addressing each component or system capable of causing a release of significant amounts of pollutants to the waters of the State, and identifying specific preventative or remedial measures to be implemented;

c. Establish a program to identify and repair leaking equipment items and damaged containment structures, which may contribute to contaminated stormwater runoff. This program must include regular visual inspections of equipment, containment structures and of the facility in general to ensure that the BMP is continually implemented and effective;

d. Prevent the spillage or loss of fluids, oil, grease, gasoline, etc. from vehicle and equipment maintenance activities and thereby prevent the contamination of stormwater from these substances;

e. Prevent or minimize stormwater contact with material stored on site;

f. Designate by position or name the person or persons responsible for the day to day implementation of the BMP

g Provide for routine inspections, on days during which the facility is manned, of any structures that function to prevent stormwater pollution or to remove pollutants from stormwater and of the facility in general. Routine inspections should be done at a frequency to ensure that the BMP is continually implemented and effective and in no case less frequent than once per year;

h. Provide for the use and disposal of any material used to absorb spilled fluids that could contaminate stormwater;

i. Develop a solvent management plan, if solvents are used on site. The solvent management plan shall include as a minimum lists of the solvents on site; the disposal method of solvents used instead of dumping, such as reclamation, contract hauling; and the procedures for assuring that solvents do not routinely spill or leak into the stormwater;

j. Provide for the disposal of all used oils, hydraulic fluids, firefighting foams, solvent degreasing material, etc. in accordance with good management practices and any applicable state or federal regulations

k. Include a diagram of the facility showing the locations where stormwater exits the facility, the locations of any structure or other mechanisms intended to prevent pollution of stormwater or to remove pollutants from stormwater, the locations of any collection and handling systems

l. Provide control sufficient to prevent or control pollution of stormwater by soil particles to the degree required to maintain compliance with the water quality standard for turbidity applicable to the waterbody(s) receiving discharge(s) under this permit

m. Provide spill prevention, control, and/or management sufficient to prevent or minimize contaminated stormwater runoff. Any containment system used to implement this requirement shall be constructed of materials compatible with the substance(s) contained and shall prevent the contamination of groundwater. The containment system shall also be capable of retaining a volume equal to 110 percent of the capacity of the largest tank for which containment is provided;

n. Provide and maintain curbing, diking or other means of isolating process areas to the extent necessary to allow segregation and collection for treatment of contaminated stormwater from process areas;

o. Be reviewed by plant engineering staff and the plant manager; and

p. Bear the signature of the plant manager.

3. Compliance Schedule

The permittee shall have reviewed (and revised if necessary) and fully implemented the BMP plan as soon as practicable but no later than six months after the effective date of this permit.

4. Department Review

a. When requested by the Director or his designee, the permittee shall make the BMP available for Department review.

b. The Director or his designee may notify the permittee at any time that the BMP is deficient and require correction of the deficiency.

c. The permittee shall correct any BMP 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.

5. Administrative Procedures

a. A copy of the BMP shall be maintained at the facility and shall be available for inspection by representatives of the Department.

b. A log of the routine inspection required above shall be maintained at the facility and shall be available for inspection by representatives of the Department. The log shall contain records of all inspections performed for the last three years and each entry shall be signed by the person performing the inspection.

c. The permittee shall provide training for any personnel required to implement the BMP and shall retain documentation of such training at the facility. This documentation shall be available for inspection by representatives of the Department. Training shall be performed prior to the date that implementation of the BMP is required.

d. BMP Plan Modification. The permittee shall amend the BMP plan whenever there is a change in the facility or change in operation of the facility which materially increases the potential for the ancillary activities to result in a discharge of significant amounts of pollutants.

e. BMP Plan Review. The permittee shall complete a review and evaluation of the BMP plan at least once every three years from the date of preparation of the BMP plan. Documentation of the BMP Plan review and evaluation shall be signed and dated by the Plant Manager.

EDWARD F. POOLOS
DIRECTOR

JEFFERY W. KITCHENS
DEPUTY DIRECTOR

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

KAY IVEY
GOVERNOR

FACT SHEET

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

Date Prepared: March 4, 2026 **By:** Stephanie Ammons

NPDES Permit No. AL0042234

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

   Baldwin County Sewer Service, LLC
   14747 Underwood Road
   Summerdale, AL 36580

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

   Spanish Fort Sewer WWTP
   12840 Highway 90
   Loxley, AL 36551

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	Bay Branch	Fish and Wildlife (F&W)
002	Bay Branch	Fish and Wildlife (F&W)
003	Fish River	Fish and Wildlife (F&W),Swimming and Other Whole Body Water-Contact Sports (S)
004	Fish River	Fish and Wildlife (F&W),Swimming and Other Whole Body Water-Contact Sports (S)
005	Bay Branch	Fish and Wildlife (F&W)
006	Bay Branch	Fish and Wildlife (F&W)
007	Bay Branch	Fish and Wildlife (F&W)

Feature ID	Receiving Water	Classification
008	Fish River	Fish and Wildlife (F&W),Swimming and Other Whole Body Water-Contact Sports (S)
009	Bay Branch	Fish and Wildlife (F&W)
010	Bay Branch	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.

NPDES PERMIT RATIONALE

NPDES Permit No: **AL0042234** Date: April 1, 2026

Permit Applicant: Baldwin County Sewer Service, LLC
14747 Underwood Road
Summerdale, AL 36580

Location: **Spanish Fort Sewer WWTP**
12840 Highway 90
Loxley, AL 36551

Draft Permit is:

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

Basis for Limitations:

Water Quality Model:	DO, NH3-N, CBOD5
Reissuance with no modification	
Outfall 0011:	DO, pH, TSS, TRC, E. coli, CBOD5 Percent Removal, TSS Percent Removal
Outfalls 0023 and 0024:	DO, pH, TSS, NH3-N, TRC, E. coli, CBOD5, CBOD5 Percent Removal, TSS Percent Removal, Zinc, Copper
Instream calculation at 7Q10:	100%
Toxicity based:	TRC, NH3-N
Secondary Treatment Levels:	TSS, CBOD5, TSS Percent Removal, CBOD5 Percent Removal
Other (described below):	pH, E. coli, Zinc, Copper

Design Flow in Million Gallons per Day: 0.25 MGD (Outfall 0011)
3.0 MGD (Outfall 0023)
4.0 MGD (Outfall 0024)

Major: Yes

Description of Discharge:

Feature ID	Description	Receiving Water	Waterbody Use Classification	303(d)	TMDL
001	Treated Domestic Wastewater	Bay Branch	Fish and Wildlife (F&W)	No	No
002	Treated Domestic Wastewater	Bay Branch	Fish and Wildlife (F&W)	No	No
003	Storm Water	Fish River	Fish and Wildlife (F&W),Swimming and Other Whole Body Water-Contact Sports (S)	Yes	Yes
004	Storm Water	Fish River	Fish and Wildlife (F&W),Swimming and Other Whole Body Water-Contact Sports (S)	Yes	Yes

Feature ID	Description	Receiving Water	Waterbody Use Classification	303(d)	TMDL
005	Storm Water	Bay Branch	Fish and Wildlife (F&W)	No	No
006	Storm Water	Bay Branch	Fish and Wildlife (F&W)	No	No
007	Storm Water	Bay Branch	Fish and Wildlife (F&W)	No	No
008	Storm Water	Fish River	Fish and Wildlife (F&W),Swimming and Other Whole Body Water-Contact Sports (S)	Yes	Yes
009	Storm Water	Bay Branch	Fish and Wildlife (F&W)	No	No
010	Storm Water	Bay Branch	Fish and Wildlife (F&W)	No	No

Discussion: This is a permit reissuance due to expiration. The permittee currently operates two facilities located in close proximity to each other. Because of the close proximity of the discharge locations at Bay Branch, the two facilities are permitted as one source under one permit. The outfall located on the west side of Bay Branch, designated as Outfall 0011, is the discharge from the 0.25 MGD facility. The permittee submitted notification on January 22, 2026, that the facility upgrade from the design capacity of 1.0 MGD to 3.0 MGD was completed on December 1, 2025 for the facility on the east side of Bay Branch. The discharge from the 3.0 MGD facility is designated as Outfall 0023. This permit also allows for increase in the design capacity for the facility on the east side of Bay Branch from 3.0 MGD to 4.0 MGD. The outfall designation for the 4.0 MGD facility will be Outfall 0024. Outfall 0024 will be the same physical outfall as Outfall 0023. Once the upgrade to the 4.0 MGD facility (Outfall 0024) is complete, Outfall 0023 (3.0 MGD facility) will become obsolete. Because the upgrade from 1.0 MGD design capacity to 3.0 MGD design capacity has been completed, this permit does not include Outfall 0022 which was designated for the 1.0 MGD facility in the previous permit.

The permit regulates the discharges of treated domestic wastewater to Bay Branch, a Tier I water body classified as Fish and Wildlife in the Mobile River Basin. The Permittee asserts that there are no significant industrial dischargers (i.e., no SID permits) to the treatment plant. The discharge is composed entirely of treated domestic wastewater. Bay Branch is not listed on the most recent 303(d) list of impaired waters, and there currently is no Total Maximum Daily Load (TMDL) established for this water body. The discharge at Bay Branch is in close proximity to Fish River. Fish River is classified as Swimming and Fish and Wildlife. Fish River is listed on the most recent 303(d) list for mercury impairment, and there is a Pathogens TMDL for Fish River. This permit requires mercury monitoring along with requiring the facility to develop a Mercury Minimization Plan, which should help minimize pollutants. The facility's stormwater discharge is consistent with the assumptions in the TMDL and is not expected to contribute to the impairment. Additionally, the facility is required to develop and implement a Stormwater Pollution Plan, which should help minimize pollutants in the storm water.

The *Escherichia coli* (E. coli) limits were determined based on the water-use classification of the receiving stream. The discharge at Bay Branch is classified as Fish and Wildlife and is located in close proximity to a Swimming classified water body. The more stringent Swimming limits apply. The limits are 126 col/100mL (monthly average) and 235 col/100mL (daily maximum) at Outfalls 0011, 0023, and 0024. These limits are consistent with the Fish River Pathogens TMDL which requires instream water quality criteria for pathogens at the point of discharge.

Limits for Dissolved Oxygen (DO), Five Day Carbonaceous Biochemical Oxygen Demand (CBOD5), and Total Ammonia as Nitrogen (NH3-N) were developed based on a Waste Load Allocation (WLA) model completed by ADEM's Water Quality Branch on October 11, 2019, for the 4.25 MGD discharge. Due to the proximity of Outfalls 001 and 002, the WLA model was developed using the combined design capacities. The Department's Water Quality Branch has indicated that the DO, CBOD5, and NH3-N limits for the 4.25 MGD discharge will also be protective of the 3.25 MGD discharge. The monthly average CBOD5 limit is 25.0 mg/L. The monthly average NH3-N limits are 2.0 mg/L during the summer season (May – November) and 4.0 mg/L during the winter season (December – April). The daily minimum DO limit is 6.0 mg/L. These limits apply to Outfall 0011, Outfall 0023, and Outfall 0024. The previous permit imposed more stringent NH3-N (winter season) and CBOD5 limits. Imposing less stringent limits is not backsliding because it is consistent with the Department's antidegradation policy and water quality standards are being attained for these pollutants.

The Municipal Section, in consultation with the Department's Water Quality Branch, has conducted a narrative nutrient reasonable potential analysis. Based on a review of the facility's current levels of nutrients in the discharge and current assessments of the available information, the Permittee is required to monitor and report effluent test results for Total Phosphorus (TP), Total Kjeldahl Nitrogen (TKN), and Nitrite plus Nitrate-Nitrogen (NO2+NO3-N). 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. Monitoring at Outfall 0011 is required during the growing season (April – October). Monitoring at Outfall 0023 and Outfall 0024 is required year-round.

The pH limits were developed in accordance with the water-use classification of the receiving stream. The pH limits are 6.0 s.u. (daily minimum) and 8.5 s.u. (daily maximum). These limits apply to Outfall 0011, Outfall 0023, and Outfall 0024.

The Total Residual Chlorine (TRC) limits of 0.011 mg/L (monthly average) and 0.019 mg/L (daily maximum) are based on ADEM's water quality standards and on the current Toxicity Rationale, which considers the available dilution in the receiving stream. These limits apply to Outfall 0011, Outfall 0023, and Outfall 0024. In accordance with a letter dated August 11, 1998 from EPA Headquarters and a 1991 memorandum from EPA Region 4's Environmental Services Division (ESD), due to testing and method detection limitations, a TRC measurement below 0.05 mg/L shall be considered below detection for compliance purposes. Monitoring for TRC is only applicable if chlorine is utilized for disinfection purposes.

The monthly average Total Suspended Solids (TSS) limit is established at 30.0 mg/L in accordance with 40 CFR 133.102. A minimum percent removal limit of 85.0 percent is imposed for TSS in accordance with 40 CFR 133.102. A minimum percent removal limit of 85.0 percent is imposed for CBOD5 in accordance with 40 CFR 133.102. These limits apply to Outfall 0011, Outfall 0023, and Outfall 0024.

The Department completed a reasonable potential analysis (RPA) for the 3.25 MGD and 4.25 MGD discharges based on data provided in the permittee's application and discharge monitoring reports (DMRs). The Department also considers background data upstream of the point of discharge in RPAs; however, there is no available background data for this discharge. The RPA indicates whether pollutants in treated effluent have the potential to contribute to excursions of Alabama's instream water quality standards. Based on the RPA, it was determined that there is a reasonable potential for instream water quality standards for Zinc, Copper, and Mercury to be exceeded. This permit will impose Total Recoverable Zinc limits of 197 µg/L (monthly average) and 197 µg/L (daily maximum) and Total Recoverable Copper limits of 12.7 µg/L (monthly average) and 18.0 µg/L (daily maximum). Based on DMR and application data submitted by the Permittee, it appears no reasonable potential exists for Lead and Bis (2-Ethylhexyl) Phthalate, which were in the previous permit. Therefore, limits for Lead and Bis (2-Ethylhexyl) Phthalate have not been included in this permit reissuance. The removal of Lead and Bis (2-Ethylhexyl) Phthalate limits is not considered

backsliding because it is consistent with the Department's antidegradation policy and water quality standards are being attained for this pollutant. Since this facility does not accept wastewater from any significant industrial dischargers, this permit shall require continued quarterly monitoring for Total Recoverable Mercury and a Mercury Minimization Plan as stated in Part IV.H. of the permit at Outfalls 0023 and 0024.

Chronic toxicity with two species (*Ceriodaphnia* and *Pimephales*) is being imposed in this permit. Toxicity testing is imposed for both survival and life-cyle impairment (i.e., growth and reproduction). Chronic toxicity testing is required on an annual basis at the calculated Instream Waste Concentration (IWC) of 100 percent. Toxicity testing is required at Outfall 0011, Outfall 0023, and Outfall 0024.

The frequency of monitoring for most parameters is two days per week at Outfall 0011 and three days per week at Outfall 0023 and Outfall 0024. Monitoring for NO2+NO3-N, TKN, and TP is to be conducted monthly during the growing season (April – October) at Outfall 0011 and monthly at Outfall 0023 and Outfall 0024 year-round. Monitoring for Zinc, and Copper is to be conducted monthly at Outfall 0023 and Outfall 0024. Monitoring for Mercury is to be conducted quarterly at Outfall 0023 and Outfall 0024. Percent removals are to be calculated monthly at Outfalls 0011, 0023, and 0024. Flow is to be monitored continuously, seven days per week, at Outfalls 0011, 0023, and 0024.

In the permit application, the Permittee reported eight storm water outfalls. Outfalls DP-5, DP-6, DP-7, and DP-8, as reported in the application, will correspond to Outfalls 007S, 008S, 009S, and 010S, respectively, in the permit. The Permittee has indicated that the remaining storm water outfalls are similar in nature of potential pollutants. At the Permittee's request, the Department is allowing representative sampling at Outfalls 007S, 008S, 009S, and 010S. Monitoring will not be required at Outfalls 003S, 004S, 005S, and 006S which correspond to Outfalls DP-1, DP-2, DP-3, and DP-4, respectively, in the permit application.

This permit requires that an updated EPA Form 2A be submitted within 180 from the effective date of this permit. The requirement is described more fully in Part I.E.2 of the permit.

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

Prepared by: Stephanie Ammons

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	**Spanish Fort Sewer WWTP**	
NPDES Permit Number:	**AL0042234**	
Receiving Stream:	**Bay Branch**	
Facility Design Flow (Q_w):	**3.250 MGD**	
Receiving Stream $7Q_{10}$:	**0.000 cfs**	
Receiving Stream $1Q_{10}$:	**0.000 cfs**	
Winter Headwater Flow (WHF):	**0.00 cfs**	
Summer Temperature for CCC:	**30 deg. Celsius**	
Winter Temperature for CCC:	**20 deg. Celsius**	
Headwater Background NH_3-N Level:	**0.11 mg/l**	
Receiving Stream pH:	**7.0 s.u.**	
Headwater Background FC Level (summer):	**N./A.**	**(Only applicable for facilities with diffusers.)**
(winter)	**N./A.**	

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

$$\text{Stream Dilution Ration (SDR)} = \frac{Qw}{7Q10 + Qw} = \textbf{100.00\%}$$

AMMONIA TOXICITY LIMITATIONS

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

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

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

= **100.00%** **Effluent-Dominated, CCC Applies**

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

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

	CMC	CCC
Allowable Summer Instream NH_3-N:	**36.09 mg/l**	**2.18 mg/l**
Allowable Winter Instream NH_3-N:	**36.09 mg/l**	**4.15 mg/l**

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

= **2.0 mg/l NH3-N at 7Q10**

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

= **4.0 mg/l NH3-N at Winter Flow**

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

	DO-based NH3-N limit	Toxicity-based NH3-N limit
Summer	**2.00 mg/l NH3-N**	**2.0 mg/l NH3-N**
Winter	**4.00 mg/l NH3-N**	**4.0 mg/l NH3-N**

Summer: The toxicity based limit of 2.00 mg/l NH3-N applies.
Winter: The toxicity 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

Instream Waste Concentration (IWC) = $\frac{Qw}{7Q10 + Qw}$ = **100.00%**

Note: This number will be rounded up for toxicity testing purposes.

DISINFECTION REQUIREMENTS

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

See the attached Disinfection Guidance for applicable stream standards.

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

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)		
Monthly limit as monthly average (November through April):	126	**126**
Monthly limit as monthly aveage (May through October):	126	**126**
Daily Max (November through April):	235	**235**
Daily Max (May through October):	235	**235**
Enterococci (applies to Coastal)		
Monthly limit as geometric mean (November through April):	Not applicable	**Not applicable**
Monthly limit as geometric mean (May through October):	Not applicable	**Not applicable**
Daily Max (November through April):	Not applicable	**Not applicable**
Daily Max (May through October):	Not applicable	**Not applicable**

MAXIMUM ALLOWABLE CHLORINATION LIMITS

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

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

Maximum allowable TRC in effluent:	0.011	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.019	(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: Stephanie Ammons Date: 4/1/2026

TOXICITY AND DISINFECTION RATIONALE

Facility Name:	**Spanish Fort Sewer WWTP**	
NPDES Permit Number:	**AL0042234**	
Receiving Stream:	**Bay Branch**	
Facility Design Flow (Q_w):	**4.250 MGD**	
Receiving Stream $7Q_{10}$:	**0.000 cfs**	
Receiving Stream $1Q_{10}$:	**0.000 cfs**	
Winter Headwater Flow (WHF):	**0.00 cfs**	
Summer Temperature for CCC:	**30 deg. Celsius**	
Winter Temperature for CCC:	**20 deg. Celsius**	
Headwater Background NH_3-N Level:	**0.11 mg/l**	
Receiving Stream pH:	**7.0 s.u.**	
Headwater Background FC Level (summer):	**N./A.**	**(Only applicable for facilities with diffusers.)**
(winter)	**N./A.**	

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

$$\text{Stream Dilution Ration (SDR)} = \frac{Qw}{7Q10 + Qw} = \textbf{100.00\%}$$

AMMONIA TOXICITY LIMITATIONS

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

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

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

= **100.00%** **Effluent-Dominated, CCC Applies**

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

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

	CMC	CCC
Allowable Summer Instream NH_3-N:	**36.09 mg/l**	**2.18 mg/l**
Allowable Winter Instream NH_3-N:	**36.09 mg/l**	**4.15 mg/l**

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

= **2.0 mg/l NH3-N at 7Q10**

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

= **4.0 mg/l NH3-N at Winter Flow**

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

	DO-based NH3-N limit	Toxicity-based NH3-N limit
Summer	**2.00 mg/l NH3-N**	**2.0 mg/l NH3-N**
Winter	**4.00 mg/l NH3-N**	**4.0 mg/l NH3-N**

Summer: The toxicity based limit of 2.00 mg/l NH3-N applies.
Winter: The toxicity 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

Instream Waste Concentration (IWC) = $\frac{Qw}{7Q10 + Qw}$ = **100.00%**

Note: This number will be rounded up for toxicity testing purposes.

DISINFECTION REQUIREMENTS

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

See the attached Disinfection Guidance for applicable stream standards.

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

	Stream Standard (colonies/100ml)	Effluent Limit (colonies/100ml)
E. Coli (applies to Non-coastal and Shellfish Harvesting Coastal)		
Monthly limit as monthly average (November through April):	126	**126**
Monthly limit as monthly aveage (May through October):	126	**126**
Daily Max (November through April):	235	**235**
Daily Max (May through October):	235	**235**
Enterococci (applies to Coastal)		
Monthly limit as geometric mean (November through April):	Not applicable	**Not applicable**
Monthly limit as geometric mean (May through October):	Not applicable	**Not applicable**
Daily Max (November through April):	Not applicable	**Not applicable**
Daily Max (May through October):	Not applicable	**Not applicable**

MAXIMUM ALLOWABLE CHLORINATION LIMITS

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

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

Maximum allowable TRC in effluent:	0.011	(0.011)/(SDR)
Maximum allowable TRC in effluent:	0.019	(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: Stephanie Ammons Date: 4/1/2026

Waste Load Allocation Summary

REQUEST INFORMATION

Request Number: 3557

From:	Stephanie Ammons	In Branch/Section	Municipal		
Date Submitted	3/29/2019	Date Required	4/28/2019	FUND Code	605
Date Permit application received by NPDES program					
Receiving	Bay Branch				
Previous Strea					
Facility	Spanish Fort Sewer WWTP	(Name of Discharger-WQ will use to file)			
		Previous Discharger Name			
River Basin	Mobile	Outfall Latitude	30.633100	(decimal degrees)	
*County	Baldwin	Outfall Longitude	-87.818220	(decimal degrees)	
Permit Number	AL0042234	Permit Type	Expansion and Permit Modification		
		Per	Active		
		Type of Discharger	MUNICIPAL		

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

If yes, impacting dischargers names.	Loxley WWTP	Impacting dischargers permit numbers.	AL0060283

Existing Discharge Design Flow	1.25	MGD
Proposed Discharge Design Flow	4.25	MGD

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

Comments included ☑ Yes ☐ No

Information Verified By: JBR

Year File Was Created: 2001

Response ID Number: 1698

Lat/Long Method: GPS

12 Digit HUC Code	031602050201		
Use Classification	F&W		
Site Visit Completed?	☑ Yes ☐ No	Date of Site Visit	3/28/2019
Waterbody Impaired?	☐ ☑	Date of WLA Response	10/11/2019
Antidegradation	☐ Yes ☑ No	Approved TMDL?	☑ ☐
Waterbody Tier Level	Tier I		
Use Support Category	3	Approval Date of TMDL	11/21/2013

Waste Load Allocation Information

Modeled Reach Length	10.67	Miles	Date of Allocation	9/9/2019	
Name of Model Used	SWQM		Allocation Type	2 Seasons	
Model Completed by	JBR		Type of Model Used	Desk-top	
Allocation Developed by	Water Quality Branch				

Waste Load Allocation Summary

Annual Effluent Limits		Conventional Parameters		Conventional Parameters		Other Parameters		Other Parameters	
Qw	MGD	Qw 4.25	MGD	Qw 4.25	MGD	Qw	MGD	Qw	MGD
		Season	Summer	Season	Winter	Season		Season	
		From	May	From	Dec	From		From	
		Through	Nov	Through	Apr	Through		Through	
CBOD5		CBOD5	25	CBOD5	25	TP		TP	
NH3-N		NH3-N	2	NH3-N	4	TN		TN	
TKN		TKN		TKN		TSS		TSS	
D.O.		D.O.	6	D.O.	6				

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

Water Quality Characteristics Immediately Upstream of Discharge

Parameter	Summer		Winter	
CBODu	2	mg/l	2	mg/l
NH3-N	0.11	mg/l	0.11	mg/l
Temperature	30	°C	20	°C
pH	7	su	7	su

Hydrology at Discharge Location

Drainage Area Qualifier				Method Used to Calculate
Exact	Drainage Area	2.84	sq mi	
	Stream 7Q10	0	cfs	<5.0 sq mi
	Stream 1Q10	0	cfs	<5.0 sq mi
	Stream 7Q2	0	cfs	<5.0 sq mi
	Annual Average	2.31	cfs	ADEM Estimate w/USGS Gage Data

Comments and/or Notations: This facility is included in the Fish River Pathogens TMDL.

Facility Name: **Spanish Fort Sewer WWTP (3.25 MGD)**

NPDES No.: **AL0042234**

6/13/2017

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

ID	Pollutant	Carcinogen "yes"	Type	Background from upstream source (C_{d2}) Daily Max µg/l	Background from upstream source (C_{d2}) Monthly Ave µg/l	Background Instream (C_s) Daily Max µg/l	Background Instream (C_s) Monthly Ave µg/l	Enter Max Daily Discharge as reported by Applicant (C_d) Max µg/l	Enter Avg Daily Discharge as reported by Applicant (C_d) Ave µg/l	Partition Coefficient (Stream / Lake)
1	Antimony		Metals	0	0	0	0	0	0	-
2	**Arsenic*,****	YES	Metals	0	0	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0	0	-
4	Cadmium**		Metals	0	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	0	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	0	0	
7	Copper**		Metals	0	0	0	0	322	80.28	0.388
8	Lead**		Metals	0	0	0	0	6.8	1.04	0.206
9	Mercury**		Metals	0	0	0	0	0.0332	0.0151	0.302
10	Nickel**		Metals	0	0	0	0	0	0	0.505
11	Selenium		Metals	0	0	0	0	0	0	-
12	Silver		Metals	0	0	0	0	0	0	-
13	Thallium		Metals	0	0	0	0	0	0	-
14	Zinc**		Metals	0	0	0	0	527	92.4	0.330
15	Cyanide		Metals	0	0	0	0	0	0	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0.036	0.009	-
17	Hardness (As CaCO3)		Metals	0	0	0	0	59400	46550	-
18	Acrolein		VOC	0	0	0	0	0	0	-
19	**Acrylonitrile***	YES	VOC	0	0	0	0	0	0	-
20	**Aldrin**	YES	VOC	0	0	0	0	0	0	-
21	**Benzene***	YES	VOC	0	0	0	0	0	0	-
22	**Bromoform***	YES	VOC	0	0	0	0	0	0	-
23	**Carbon Tetrachloride***	YES	VOC	0	0	0	0	0	0	-
24	**Chlordane**	YES	VOC	0	0	0	0	0	0	-
25	Clorobenzene		VOC	0	0	0	0	0	0	-
26	**Chlorodibromo-Methane***	YES	VOC	0	0	0	0	0	0	-
27	Chloroethane		VOC	0	0	0	0	0	0	-
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	0	0	-
29	**ChloroForm***	YES	VOC	0	0	0	0	0	0	-
30	**4,4'-DDD**	YES	VOC	0	0	0	0	0	0	-
31	**4,4'-DDE**	YES	VOC	0	0	0	0	0	0	-
32	**4.4'-DDT**	YES	VOC	0	0	0	0	0	0	-
33	**Dichlorobromo-Methane***	YES	VOC	0	0	0	0	0	0	-
34	1, 1-Dichloroethane		VOC	0	0	0	0	0	0	-
35	**1, 2-Dichloroethane***	YES	VOC	0	0	0	0	0	0	-
36	Trans-1, 2-Dichloro-Ethylene		VOC	0	0	0	0	0	0	-
37	**1, 1-Dichloroethylene***	YES	VOC	0	0	0	0	0	0	-
38	1, 2-Dichloropropane		VOC	0	0	0	0	0	0	-
39	1, 3-Dichloro-Propylene		VOC	0	0	0	0	0	0	-
40	**Dieldrin**	YES	VOC	0	0	0	0	0	0	-
41	Ethylbenzene		VOC	0	0	0	0	0	0	-
42	Methyl Bromide		VOC	0	0	0	0	0	0	-
43	Methyl Chloride		VOC	0	0	0	0	0	0	-
44	**Methylene Chloride***	YES	VOC	0	0	0	0	0	0	-
45	**1, 1, 2, 2-Tetrachloro-Ethane***	YES	VOC	0	0	0	0	0	0	-
46	**Tetrachloro-Ethylene***	YES	VOC	0	0	0	0	0	0	-
47	Toluene		VOC	0	0	0	0	0	0	-
48	**Toxaphene**	YES	VOC	0	0	0	0	0	0	-
49	**Tributyltine (TBT)**	YES	VOC	0	0	0	0	0	0	-
50	1, 1, 1-Trichloroethane		VOC	0	0	0	0	0	0	-
51	**1, 1, 2-Trichloroethane***	YES	VOC	0	0	0	0	0	0	-
52	**Trichlorethylene***	YES	VOC	0	0	0	0	0	0	-
53	**Vinyl Chloride***	YES	VOC	0	0	0	0	0	0	-
54	P-Chloro-M-Cresol		Acids	0	0	0	0	0	0	-
55	2-Chlorophenol		Acids	0	0	0	0	0	0	-
56	2, 4-Dichlorophenol		Acids	0	0	0	0	0	0	-
57	2, 4-Dimethylphenol		Acids	0	0	0	0	0	0	-
58	4, 6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	-
59	2, 4-Dinitrophenol		Acids	0	0	0	0	0	0	-
60	**4,6-Dinto-2-methylophenol**	YES	Acids	0	0	0	0	0	0	-
61	**Dioxin (2,3,7,8-TCDD)**	YES	Acids	0	0	0	0	0	0	-
62	2-Nitrophenol		Acids	0	0	0	0	0	0	-
63	4-Nitrophenol		Acids	0	0	0	0	0	0	-
64	**Pentachlorophenol***	YES	Acids	0	0	0	0	0	0	-
65	Phenol		Acids	0	0	0	0	0	0	-
66	**2, 4, 6-Trichlorophenol***	YES	Acids	0	0	0	0	0	0	-
67	Acenaphthene		Bases	0	0	0	0	0	0	-
68	Acenaphthylene		Bases	0	0	0	0	0	0	-
69	Anthracene		Bases	0	0	0	0	0	0	-
70	Benzidine		Bases	0	0	0	0	0	0	-
71	**Benzo(A)Anthracene***	YES	Bases	0	0	0	0	0	0	-
72	**Benzo(A)Pyrene***	YES	Bases	0	0	0	0	0	0	-
73	3, 4 Benzo-Fluoranthene		Bases	0	0	0	0	0	0	-
74	Benzo(GHI)Perylene		Bases	0	0	0	0	0	0	-
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	0	-
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0	-
77	**Bis (2-Chloroethyl)-Ether***	YES	Bases	0	0	0	0	0	0	-
78	Bis (2-Chloroiso-Propyl) Ether		Bases	0	0	0	0	0	0	-
79	**Bis (2-Ethylhexyl) Phthalate***	YES	Bases	0	0	0	0	0.54	0.1	-
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0	-
82	2-Chloronaphthalene		Bases	0	0	0	0	0	0	-
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
84	**Chrysene***	YES	Bases	0	0	0	0	0	0	-
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0	-
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0	-
87	**Dibenzo(A,H)Anthracene***	YES	Bases	0	0	0	0	0	0	-
88	1, 2-Dichlorobenzene		Bases	0	0	0	0	0	0	-
89	1, 3-Dichlorobenzene		Bases	0	0	0	0	0	0	-
90	1, 4-Dichlorobenzene		Bases	0	0	0	0	0	0	-
91	**3, 3-Dichlorobenzidine***	YES	Bases	0	0	0	0	0	0	-
92	Diethyl Phthalate		Bases	0	0	0	0	0	0	-
93	Dimethyl Phthalate		Bases	0	0	0	0	0	0	-
94	**2, 4-Dinitrotoluene***	YES	Bases	0	0	0	0	0	0	-
95	2, 6-Dinitrotoluene		Bases	0	0	0	0	0	0	-
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0	-
97	**Endosulfan (alpha)**	YES	Bases	0	0	0	0	0	0	-
98	**Endosulfan (beta)**	YES	Bases	0	0	0	0	0	0	-
99	**Endosulfan sulfate**	YES	Bases	0	0	0	0	0	0	-
100	**Endrin**	YES	Bases	0	0	0	0	0	0	-
101	**Endrin Aldeyhide**	YES	Bases	0	0	0	0	0	0	-
102	Fluoranthene		Bases	0	0	0	0	0	0	-
103	Fluorene		Bases	0	0	0	0	0	0	-
104	Heptochlor	YES	Bases	0	0	0	0	0	0	-
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	-
106	**Hexachlorobenzene***	YES	Bases	0	0	0	0	0	0	-
107	**Hexachlorobutadiene***	YES	Bases	0	0	0	0	0	0	-
108	**Hexachlorocyclohexan (alpa)**	YES	Bases	0	0	0	0	0	0	-
109	**Hexachlorocyclohexan (beta)**	YES	Bases	0	0	0	0	0	0	-
110	**Hexachlorocyclohexan (gamma)**	YES	Bases	0	0	0	0	0	0	-
111	HexachlorocycloPentadiene		Bases	0	0	0	0	0	0	-
112	Hexachloroethane		Bases	0	0	0	0	0	0	-
113	**Indeno(1, 2, 3-CK)Pyrene***	YES	Bases	0	0	0	0	0	0	-
114	Isophorone		Bases	0	0	0	0	0	0	-
115	Naphthalene		Bases	0	0	0	0	0	0	-
116	Nitrobenzene		Bases	0	0	0	0	0	0	-
117	**N-Nitrosodi-N-Propylamine***	YES	Bases	0	0	0	0	0	0	-
118	**N-Nitrosodi-N-Methylamine***	YES	Bases	0	0	0	0	0	0	-
119	**N-Nitrosodi-N-Phenylamine***	YES	Bases	0	0	0	0	0	0	-
120	**PCB-1016**	YES	Bases	0	0	0	0	0	0	-
121	**PCB-1221**	YES	Bases	0	0	0	0	0	0	-
122	**PCB-1232**	YES	Bases	0	0	0	0	0	0	-
123	**PCB-1242**	YES	Bases	0	0	0	0	0	0	-
124	**PCB-1248**	YES	Bases	0	0	0	0	0	0	-
125	**PCB-1254**	YES	Bases	0	0	0	0	0	0	-
126	**PCB-1260**	YES	Bases	0	0	0	0	0	0	-
127	Phenanthrene		Bases	0	0	0	0	0	0	-
128	Pyrene		Bases	0	0	0	0	0	0	-
129	1, 2, 4-Trichlorobenzene		Bases	0	0	0	0	0	0	-

* carcinogen

3.25	Enter Q_d = wastewater discharge flow from facility (MGD)
5.02849425	Q_d = wastewater discharge flow (cfs) (this value is calculated from the MGD)
0	Enter flow from upstream discharge Qd2 = background stream flow in MGD above point of discharge
0	Qd2 = background stream flow from upstream source (cfs)
0	Enter 7Q10, Q_s = background stream flow in cfs above point of discharge
0	Enter or estimated, 1Q10, Q_s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
2.31	Enter Mean Annual Flow, Q_s = background stream flow in cfs above point of discharge
0	Enter 7Q2, Q_s = background stream flow in cfs above point of discharge (For LWF class streams)
Refer to Lab	Enter C_s = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
$Q_d + Qd2 + Q_s$	Q_r = resultant in-stream flow, after discharge
Calculated on other	C_r = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
50	Enter, Background Hardness above point of discharge (assumed 50 South of Birmingham and 100 North of Birmingham)
7.00 s.u.	Enter, Background pH above point of discharge
YES	Enter, Is discharge to a stream? "YES" Other option would be to a Lake. (This changes the partition coefficients for the metals)

** Using Partition Coefficients

March 31, 2026

Facility Name: Spanish Fort Sewer WWTP (3.25 MGD)

NPDES No.: AL0042234

Freshwater F&W classification						Freshwater Acute (µg/l) Q_s =1Q10					Freshwater Chronic (µg/l) Q_s = 7Q10					Human Health Consumption Fish only (µg/l)			
																Carcinogen Q_s = Annual Average Non-Carcinogen Q_s = 7Q10			
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (Cd2) Daily Max	Max Daily Discharge as reported by Applicant (C_{max})	Water Quality Criteria (C_c)	Draft Permit Limit (C_{max})	20% of Draft Permit Limit	RP?	Background from upstream source (Cd2) Monthly Ave	Avg Daily Discharge as reported by Applicant (C_{ave})	Water Quality Criteria (C_c)	Draft Permit Limit (C_{max})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C_c)	Draft Permit Limit (C_{max})	20% of Draft Permit Limit	RP?
1	Antimony			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.73E+02	7.47E+01	No
2	Arsenic		YES	0	0	[illegible]	592.334	118.467	No	0	0	[illegible]	261.324	52.265	No	3.03E-01	4.42E-01	8.84E-02	No
3	Beryllium			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
4	Cadmium			0	0	[illegible]	4.347	0.869	No	0	0	[illegible]	0.644	0.129	No	-	-	-	-
5	Chromium/ Chromium III			0	0	[illegible]	1537.913	307.583	No	0	0	[illegible]	200.051	40.010	No	-	-	-	-
6	Chromium/ Chromium VI			0	0	[illegible]	16.000	3.200	No	0	0	[illegible]	11.000	2.200	No	-	-	-	-
7	Copper	YES		0	322	[illegible]	18.026	3.605	Yes	0	80.28	[illegible]	12.766	2.553	Yes	-	-	-	-
8	Lead			6.6	[illegible]	[illegible]	146.291	29.258	No	0	1.04	[illegible]	5.701	1.140	No	-	-	-	-
9	Mercury	YES		0	0.0332	2.400	2.400	0.480	No	0	0.0151	0.012	0.012	0.002	Yes	4.24E-02	4.24E-02	8.46E-03	Yes
10	Nickel			0	0	[illegible]	515.824	103.165	No	0	0	[illegible]	57.292	11.458	No	9.93E+02	9.93E+02	1.99E+02	No
11	Selenium			0	0	[illegible]	20.000	4.000	No	0	0	[illegible]	5.000	1.000	No	[illegible]	2.43E+03	4.86E+02	No
12	Silver			0	0	[illegible]	0.976	0.195	No	0	0	-	-	-	-	-	-	-	-
13	Thallium			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.74E-01	5.47E-02	No
14	Zinc	YES		0	527	[illegible]	197.369	39.474	Yes	0	92.4	[illegible]	198.983	39.797	Yes	1.49E+04	1.49E+04	2.98E+03	No
15	Cyanide			0	0	[illegible]	22.000	4.400	No	0	0	[illegible]	5.200	1.040	No	[illegible]	9.33E+03	1.87E+03	No
16	Total Phenolic Compounds			0	0.036	-	-	-	-	0	0.009	-	-	-	-	-	-	-	-
17	Hardness (As CaCO3)			0	59400	-	-	-	-	0	48550	-	-	-	-	-	-	-	-
18	Acrolein			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.43E+00	1.08E+00	No
19	Acrylonitrile		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.10E-01	4.20E-02	No
20	Aldrin		YES	0	0	[illegible]	3.000	0.600	No	0	0	-	-	-	-	[illegible]	4.29E-05	8.58E-06	No
21	Benzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.26E+01	4.52E+00	No
22	Bromoform		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.15E+02	2.30E+01	No
23	Carbon Tetrachloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.40E+00	2.79E-01	No
24	Chlordane		YES	0	0	[illegible]	2.400	0.480	No	0	0	[illegible]	0.004	0.001	No	[illegible]	6.90E-04	1.38E-04	No
25	Clorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.08E+02	1.81E+02	No
26	Chlorodibromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.08E+01	2.16E+00	No
27	Chloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
28	2-Chloro-Ethylvinyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
29	ChloroForm		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.46E+02	2.98E+01	No
30	4,4' - DDD		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.65E-04	5.29E-05	No
31	4,4' - DDE		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.87E-04	3.74E-05	No
32	4,4' - DDT		YES	0	0	1.100	1.100	0.220	No	0	0	0.001	0.001	0.000	No	[illegible]	1.87E-04	3.74E-05	No
33	Dichlorobromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.46E+01	2.93E+00	No
34	1, 1-Dichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
35	1, 2-Dichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.12E+01	6.24E+00	No
36	Trans-1, 2-Dichloro-Ethylene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.91E+03	1.18E+03	No
37	1, 1-Dichloroethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.08E+03	1.22E+03	No
38	1, 2-Dichloropropane			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.49E+00	1.70E+00	No
39	1, 3-Dichloro-Propylene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.23E+01	2.46E+00	No
40	Dieldrin		YES	0	0	[illegible]	0.240	0.048	No	0	0	[illegible]	0.056	0.011	No	[illegible]	4.56E-05	9.11E-06	No
41	Ethylbenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.24E+03	2.49E+02	No
42	Methyl Bromide			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.71E+01	1.74E+02	No
43	Methyl Chloride			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
44	Methylene Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.04E+02	1.01E+02	No
45	1, 1, 2, 2-Tetrachloro-Ethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.41E+00	6.81E-01	No
46	Tetrachloro-Ethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.80E+00	5.60E-01	No
47	Toluene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.72E+03	1.74E+03	No
48	Toxaphene		YES	0	0	[illegible]	0.730	0.146	No	0	0	[illegible]	0.000	0.000	No	[illegible]	2.36E-04	4.73E-05	No
49	Tributyltin (TBT)		YES	0	0	[illegible]	0.460	0.092	No	0	0	[illegible]	0.072	0.014	No	-	-	-	-
50	1, 1, 1-Trichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
51	1, 1, 2-Trichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.33E+01	2.66E+00	No
52	Trichloroethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.55E+01	5.10E+00	No
53	Vinyl Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.08E+00	4.16E-01	No
54	P-Chloro-M-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
55	2-Chlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.71E+01	1.74E+01	No
56	2, 4-Dichlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.72E+02	3.44E+01	No
57	2, 4-Dimethylphenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.96E+02	9.95E+01	No
58	4, 6-Dinitro-O-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
59	2, 4-Dinitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.11E+03	6.22E+02	No
60	4,6-Dinitro-2-methylphenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.41E+02	4.83E+01	No
61	Dioxin (2,3,7,8-TCDD)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.89E-08	7.78E-09	No
62	2-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
63	4-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
64	Pentachlorophenol		YES	0	0	[illegible]	8.723	1.745	No	0	0	[illegible]	6.693	1.339	No	[illegible]	2.58E+00	5.16E-01	No
65	Phenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.00E+05	1.00E+05	No
66	2, 4, 6-Trichlorophenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.08E+00	4.13E-01	No
67	Acenaphthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.79E+02	1.16E+02	No
68	Acenaphthylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
69	Anthracene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.33E+04	4.67E+03	No
70	Benzidine			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.16E-04	2.32E-05	No
71	Benzo(A)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.55E-02	3.11E-03	No
72	Benzo(A)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.55E-02	3.11E-03	No
73	Benzo(b)fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.07E-02	2.13E-03	No
74	Benzo(GHI)Perylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
75	Benzo(K)Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.07E-02	2.13E-03	No
76	Bis (2-Chloroethoxy) Methane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
77	Bis (2-Chloroethyl)-Ether		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.49E-01	8.97E-02	No
78	Bis (2-Chloroiso-Propyl) Ether			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.78E+04	7.56E+03	No
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0.54	-	-	-	-	0	0.1	-	-	-	-	[illegible]	1.87E+00	3.74E-01	No
80	4-Bromophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
81	Butyl Benzyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.13E+03	2.25E+02	No
82	2-Chloronaphthalene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.24E+02	1.85E+02	No
83	4-Chlorophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
84	Chrysene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.55E-02	3.11E-03	No
85	Di-N-Butyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.62E+03	5.24E+02	No
86	Di-N-Octyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
87	Dibenzo(A,H)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.55E-02	3.11E-03	No
88	1, 2-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.55E+02	1.51E+02	No
89	1, 3-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.62E+02	1.12E+02	No
90	1, 4-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.12E+02	2.25E+01	No
91	3, 3-Dichlorobenzidine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.43E-02	4.85E-03	No
92	Diethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.56E+04	5.11E+03	No
93	Dimethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.46E+05	1.30E+05	No
94	2, 4-Dinitrotoluene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.89E+00	5.78E-01	No
95	2, 6-Dinitrotoluene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
96	1,2-Diphenylhydrazine			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.17E-01	2.34E-02	No
97	Endosulfan (alpha)		YES	0	0	[illegible]	0.220	0.044	No	0	0	[illegible]	0.056	0.011	No	[illegible]	7.57E+01	1.51E+01	No
98	Endosulfan (beta)		YES	0	0	[illegible]	0.220	0.044	No	0	0	[illegible]	0.056	0.011	No	[illegible]	7.57E+01	1.51E+01	No
99	Endosulfan sulfate		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.57E+01	1.51E+01	No
100	Endrin		YES	0	0	[illegible]	0.086	0.017	No	0	0	[illegible]	0.036	0.007	No	[illegible]	5.15E-02	1.03E-02	No
101	Endrin Aldeyhde		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.57E-01	5.15E-02	No
102	Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.12E+01	1.62E+01	No
103	Fluorene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.11E+03	6.22E+02	No
104	Heptochlor		YES	0	0	[illegible]	0.520	0.104	No	0	0	[illegible]	0.004	0.001	No	[illegible]	6.76E-05	1.35E-05	No
105	Heptachlor Epoxide		YES	0	0	[illegible]	0.520	0.104	No	0	0	[illegible]	0.004	0.001	No	[illegible]	3.34E-05	8.68E-06	No
106	Hexachlorobenzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.45E-04	4.90E-05	No
107	Hexachlorobutadiene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.57E+01	3.14E+00	No
108	Hexachlorocyclohexan (alpha)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.16E-03	8.32E-04	No
109	Hexachlorocyclohexan (beta)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.46E-02	2.91E-03	No
110	Hexachlorocyclohexan (gamma)		YES	0	0	[illegible]	0.950	0.190	No	0	0	-	-	-	-	[illegible]	1.57E+00	3.14E-01	No
111	HexachlorocyclоPentadiene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.45E+02	1.29E+02	No
112	Hexachloroethane			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.92E+00	3.84E-01	No
113	Indeno(1, 2, 3-CK)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.55E-02	3.11E-03	No
114	Isophorone			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.81E+02	1.12E+02	No
115	Naphthalene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
116	Nitrobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.04E+02	8.07E+01	No
117	N-Nitrosodi-N-Propylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.30E-01	8.61E-02	No
118	N-Nitrosodimethylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.57E+00	5.14E-01	No
119	N-Nitrosodiphenylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.11E+00	1.02E+00	No
120	PCB-1016		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
121	PCB-1221		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
122	PCB-1232		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
123	PCB-1242		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
124	PCB-1248		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
125	PCB-1254		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
126	PCB-1260		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.46E-05	1.09E-05	No
127	Phenanthrene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
128	Pyrene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.33E+03	4.67E+02	No
129	1, 2, 4-Trichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.09E+01	8.19E+00	No

Facility Name: **Spanish Fort Sewer WWTP (4.25 MGD)**

NPDES No.: **AL0042234**

8/13/2017

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

ID	Pollutant	Carcinogen "yes"	Type	Background from upstream source (C_{d1}) Daily Max	Background from upstream source (C_{d2}) Monthly Ave	Background Instream (C_s) Daily Max	Background Instream (C_s) Monthly Ave	Enter Max Daily Discharge as reported by Applicant (C_d) Max	Enter Avg Daily Discharge as reported by Applicant (C_d) Ave	Partition Coefficient (Stream / Lake)
				µg/l	µg/l	µg/l	µg/l	µg/l	µg/l	
1	Antimony		Metals	0	0	0	0	0	0	-
2	**Arsenic*,****	YES	Metals	0	0	0	0	0	0	0.574
3	Beryllium		Metals	0	0	0	0	0	0	-
4	Cadmium**		Metals	0	0	0	0	0	0	0.236
5	Chromium / Chromium III**		Metals	0	0	0	0	0	0	0.210
6	Chromium / Chromium VI**		Metals	0	0	0	0	0	0	
7	Copper**		Metals	0	0	0	0	322	80.28	0.388
8	Lead**		Metals	0	0	0	0	6.8	1.04	0.206
9	Mercury**		Metals	0	0	0	0	0.0332	0.0151	0.302
10	Nickel**		Metals	0	0	0	0	0	0	0.505
11	Selenium		Metals	0	0	0	0	0	0	-
12	Silver		Metals	0	0	0	0	0	0	-
13	Thallium		Metals	0	0	0	0	0	0	-
14	Zinc**		Metals	0	0	0	0	527	92.4	0.330
15	Cyanide		Metals	0	0	0	0	0	0	-
16	Total Phenolic Compounds		Metals	0	0	0	0	0.036	0.009	-
17	Hardness (As CaCO3)		Metals	0	0	0	0	59400	48550	-
18	Acrolein		VOC	0	0	0	0	0	0	-
19	**Acrylonitrile***	YES	VOC	0	0	0	0	0	0	-
20	**Aldrin**	YES	VOC	0	0	0	0	0	0	-
21	**Benzene***	YES	VOC	0	0	0	0	0	0	-
22	**Bromoform***	YES	VOC	0	0	0	0	0	0	-
23	**Carbon Tetrachloride***	YES	VOC	0	0	0	0	0	0	-
24	**Chlordane**	YES	VOC	0	0	0	0	0	0	-
25	Clorobenzene		VOC	0	0	0	0	0	0	-
26	**Chlorodibromo-Methane***	YES	VOC	0	0	0	0	0	0	-
27	Chloroethane		VOC	0	0	0	0	0	0	-
28	2-Chloro-Ethylvinyl Ether		VOC	0	0	0	0	0	0	-
29	**ChloroForm***	YES	VOC	0	0	0	0	0	0	-
30	**4,4'-DDD**	YES	VOC	0	0	0	0	0	0	-
31	**4,4'-DDE**	YES	VOC	0	0	0	0	0	0	-
32	**4.4'-DDT**	YES	VOC	0	0	0	0	0	0	-
33	**Dichlorobromo-Methane***	YES	VOC	0	0	0	0	0	0	-
34	1, 1-Dichloroethane		VOC	0	0	0	0	0	0	-
35	**1, 2-Dichloroethane***	YES	VOC	0	0	0	0	0	0	-
36	Trans-1, 2-Dichloro-Ethylene		VOC	0	0	0	0	0	0	-
37	**1, 1-Dichloroethylene***	YES	VOC	0	0	0	0	0	0	-
38	1, 2-Dichloropropane		VOC	0	0	0	0	0	0	-
39	1, 3-Dichloro-Propylene		VOC	0	0	0	0	0	0	-
40	**Dieldrin**	YES	VOC	0	0	0	0	0	0	-
41	Ethylbenzene		VOC	0	0	0	0	0	0	-
42	Methyl Bromide		VOC	0	0	0	0	0	0	-
43	Methyl Chloride		VOC	0	0	0	0	0	0	-
44	**Methylene Chloride***	YES	VOC	0	0	0	0	0	0	-
45	**1, 1, 2, 2-Tetrachloro-Ethane***	YES	VOC	0	0	0	0	0	0	-
46	**Tetrachloro-Ethylene***	YES	VOC	0	0	0	0	0	0	-
47	Toluene		VOC	0	0	0	0	0	0	-
48	**Toxaphene**	YES	VOC	0	0	0	0	0	0	-
49	**Tributyltine (TBT)**	YES	VOC	0	0	0	0	0	0	-
50	1, 1, 1-Trichloroethane		VOC	0	0	0	0	0	0	-
51	**1, 1, 2-Trichloroethane***	YES	VOC	0	0	0	0	0	0	-
52	**Trichlorethylene***	YES	VOC	0	0	0	0	0	0	-
53	**Vinyl Chloride***	YES	VOC	0	0	0	0	0	0	-
54	P-Chloro-M-Cresol		Acids	0	0	0	0	0	0	-
55	2-Chlorophenol		Acids	0	0	0	0	0	0	-
56	2, 4-Dichlorophenol		Acids	0	0	0	0	0	0	-
57	2, 4-Dimethylphenol		Acids	0	0	0	0	0	0	-
58	4, 6-Dinitro-O-Cresol		Acids	0	0	0	0	0	0	-
59	2, 4-Dinitrophenol		Acids	0	0	0	0	0	0	-
60	**4,6-Dintro-2-methylophenol**	YES	Acids	0	0	0	0	0	0	-
61	**Dioxin (2,3,7,8-TCDD)**	YES	Acids	0	0	0	0	0	0	-
62	2-Nitrophenol		Acids	0	0	0	0	0	0	-
63	4-Nitrophenol		Acids	0	0	0	0	0	0	-
64	**Pentachlorophenol***	YES	Acids	0	0	0	0	0	0	-
65	Phenol		Acids	0	0	0	0	0	0	-
66	**2, 4, 6-Trichlorophenol***	YES	Acids	0	0	0	0	0	0	-
67	Acenaphthene		Bases	0	0	0	0	0	0	-
68	Acenaphthylene		Bases	0	0	0	0	0	0	-
69	Anthracene		Bases	0	0	0	0	0	0	-
70	Benzidine		Bases	0	0	0	0	0	0	-
71	**Benzo(A)Anthracene***	YES	Bases	0	0	0	0	0	0	-
72	**Benzo(A)Pyrene***	YES	Bases	0	0	0	0	0	0	-
73	3, 4 Benzo-Fluoranthene		Bases	0	0	0	0	0	0	-
74	Benzo(GHI)Perylene		Bases	0	0	0	0	0	0	-
75	Benzo(K)Fluoranthene		Bases	0	0	0	0	0	0	-
76	Bis (2-Chloroethoxy) Methane		Bases	0	0	0	0	0	0	-
77	**Bis (2-Chloroethyl)-Ether***	YES	Bases	0	0	0	0	0	0	-
78	Bis (2-Chloroiso-Propyl) Ether		Bases	0	0	0	0	0	0	-
79	**Bis (2-Ethylhexyl) Phthalate***	YES	Bases	0	0	0	0	0.54	0.1	-
80	4-Bromophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
81	Butyl Benzyl Phthalate		Bases	0	0	0	0	0	0	-
82	2-Chloronaphthalene		Bases	0	0	0	0	0	0	-
83	4-Chlorophenyl Phenyl Ether		Bases	0	0	0	0	0	0	-
84	**Chrysene***	YES	Bases	0	0	0	0	0	0	-
85	Di-N-Butyl Phthalate		Bases	0	0	0	0	0	0	-
86	Di-N-Octyl Phthalate		Bases	0	0	0	0	0	0	-
87	**Dibenzo(A,H)Anthracene***	YES	Bases	0	0	0	0	0	0	-
88	1, 2-Dichlorobenzene		Bases	0	0	0	0	0	0	-
89	1, 3-Dichlorobenzene		Bases	0	0	0	0	0	0	-
90	1, 4-Dichlorobenzene		Bases	0	0	0	0	0	0	-
91	**3, 3-Dichlorobenzidine***	YES	Bases	0	0	0	0	0	0	-
92	Diethyl Phthalate		Bases	0	0	0	0	0	0	-
93	Dimethyl Phthalate		Bases	0	0	0	0	0	0	-
94	**2, 4-Dinitrotoluene***	YES	Bases	0	0	0	0	0	0	-
95	2, 6-Dinitrotoluene		Bases	0	0	0	0	0	0	-
96	1,2-Diphenylhydrazine		Bases	0	0	0	0	0	0	-
97	**Endosulfan (alpha)**	YES	Bases	0	0	0	0	0	0	-
98	**Endosulfan (beta)**	YES	Bases	0	0	0	0	0	0	-
99	**Endosulfan sulfate**	YES	Bases	0	0	0	0	0	0	-
100	**Endrin**	YES	Bases	0	0	0	0	0	0	-
101	**Endrin Aldeyhide**	YES	Bases	0	0	0	0	0	0	-
102	Fluoranthene		Bases	0	0	0	0	0	0	-
103	Fluorene		Bases	0	0	0	0	0	0	-
104	Heptochlor	YES	Bases	0	0	0	0	0	0	-
105	Heptachlor Epoxide	YES	Bases	0	0	0	0	0	0	-
106	**Hexachlorobenzene***	YES	Bases	0	0	0	0	0	0	-
107	**Hexachlorobutadiene***	YES	Bases	0	0	0	0	0	0	-
108	**Hexachlorocyclohexan (alpa)**	YES	Bases	0	0	0	0	0	0	-
109	**Hexachlorocyclohexan (beta)**	YES	Bases	0	0	0	0	0	0	-
110	**Hexachlorocyclohexan (gamma)**	YES	Bases	0	0	0	0	0	0	-
111	HexachlorocyclcPentadiene		Bases	0	0	0	0	0	0	-
112	Hexachloroethane		Bases	0	0	0	0	0	0	-
113	**Indene(1, 2, 3-CK)Pyrene***	YES	Bases	0	0	0	0	0	0	-
114	Isophorone		Bases	0	0	0	0	0	0	-
115	Naphthalene		Bases	0	0	0	0	0	0	-
116	Nitrobenzene		Bases	0	0	0	0	0	0	-
117	**N-Nitrosodi-N-Propylamine***	YES	Bases	0	0	0	0	0	0	-
118	**N-Nitrosodi-N-Methylamine***	YES	Bases	0	0	0	0	0	0	-
119	**N-Nitrosodi-N-Phenylamine***	YES	Bases	0	0	0	0	0	0	-
120	**PCB-1016**	YES	Bases	0	0	0	0	0	0	-
121	**PCB-1221**	YES	Bases	0	0	0	0	0	0	-
122	**PCB-1232**	YES	Bases	0	0	0	0	0	0	-
123	**PCB-1242**	YES	Bases	0	0	0	0	0	0	-
124	**PCB-1248**	YES	Bases	0	0	0	0	0	0	-
125	**PCB-1254**	YES	Bases	0	0	0	0	0	0	-
126	**PCB-1260**	YES	Bases	0	0	0	0	0	0	-
127	Phenanthrene		Bases	0	0	0	0	0	0	-
128	Pyrene		Bases	0	0	0	0	0	0	-
129	1, 2, 4-Trichlorobenzene		Bases	0	0	0	0	0	0	-

4.25	Enter Q_d = wastewater discharge flow from facility (MGD)
6.57572325	Q_d = wastewater discharge flow (cfs) (this value is caluclated from the MGD)
0	Enter flow from upstream discharge Qd2 = background stream flow in MGD above point of discharge
0	Qd2 = background stream flow from upstream source (cfs)
0	Enter 7Q10, Q_s = background stream flow in cfs above point of discharge
0	Enter or estimated, 1Q10, Q_s = background stream flow in cfs above point of discharge (1Q10 estimated at 75% of 7Q10)
2.31	Enter Mean Annual Flow, Q_s = background stream flow in cfs above point of discharge
0	Enter 7Q2, Q_s = background stream flow in cfs above point of discharge (For LWF class streams)
Enter is Left	Enter C_s = background in-stream pollutant concentration in µg/l (assuming this is zero "0" unless there is data)
Q_d +Qd2+Q_s	Q_r = resultant in-stream flow, after discharge
Calculated on other	C_r = resultant in-stream pollutant concentration in µg/l in the stream (after complete mixing occurs)
50	Enter, Background Hardness above point of discharge (assumed 50 South of Birmingham and 100 North of Birmingham)
7.00 s.u.	Enter, Background pH above point of discharge
YES	Enter, Is discharge to a stream? "YES" Other option would be to a Lake. (This changes the partition coefficients for the metals)

** Using Partition Coefficients

March 31, 2026

Facility Name: Spanish Fort Sewer WWTP (4.25 MGD)

NPDES No.: AL0042234

Freshwater F&W classification.						Freshwater Acute (µg/l) Q_s =1Q10						Freshwater Chronic (µg/l) Q_s = 7Q10				Human Health Consumption Fish only (µg/l) Carcinogen Q_s = Annual Average Non-Carcinogen Q_s = 7Q10			
ID	Pollutant	RP?	Carcinogen yes	Background from upstream source (Cd2) Daily Max	Max Daily Discharge as reported by Applicant (C_{max})	Water Quality Criteria (C_s)	Draft Permit Limit (C_{dmax})	20% of Draft Permit Limit	RP?	Background from upstream source (Cd2) Monthly Ave	Avg Daily Discharge as reported by Applicant (C_{davg})	Water Quality Criteria (C_s)	Draft Permit Limit (C_{davg})	20% of Draft Permit Limit	RP?	Water Quality Criteria (C_s)	Draft Permit Limit (C_{davg})	20% of Draft Permit Limit	RP?
1	Antimony			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.73E+02	7.47E+01	No
2	Arsenic		YES	0	0	[illegible]	592.334	118.467	No	0	0	[illegible]	281.324	52.265	No	3.03E-01	4.09E-01	8.19E-02	No
3	Beryllium			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
4	Cadmium			0	0	[illegible]	4.347	0.869	No	0	0	[illegible]	0.644	0.129	No	-	-	-	-
5	Chromium/ Chromium III			0	0	[illegible]	1537.913	307.583	No	0	0	[illegible]	200.051	40.010	No	-	-	-	-
6	Chromium/ Chromium VI			0	0	[illegible]	16.000	3.200	No	0	0	[illegible]	11.000	2.200	No	-	-	-	-
7	Copper	YES		0	322	[illegible]	18.026	3.605	Yes	0	80.26	[illegible]	12.766	2.553	Yes	-	-	-	-
8	Lead			0	6.6	[illegible]	146.291	29.258	No	0	1.04	[illegible]	5.701	1.140	No	-	-	-	-
9	Mercury	YES		0	0.0332	2.400	2.400	0.480	No	0	0.0151	[illegible]	0.012	0.002	Yes	4.24E-02	4.24E-02	8.46E-03	Yes
10	Nickel			0	0	[illegible]	515.624	103.165	No	0	0	[illegible]	57.292	11.458	No	9.93E+02	9.93E+02	1.99E+02	No
11	Selenium			0	0	[illegible]	20.000	4.000	No	0	0	[illegible]	5.000	1.000	No	[illegible]	2.43E+03	4.86E+02	No
12	Silver			0	0	[illegible]	0.976	0.195	No	0	0	-	-	-	-	-	-	-	-
13	Thallium			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.74E-01	5.47E-02	No
14	Zinc	YES		0	527	[illegible]	197.369	39.474	Yes	0	92.4	[illegible]	198.983	39.797	Yes	1.49E+04	1.49E+04	2.98E+03	No
15	Cyanide			0	0	[illegible]	22.000	4.400	No	0	0	[illegible]	5.200	1.040	No	[illegible]	9.33E+03	1.87E+03	No
16	Total Phenolic Compounds			0	0.036	-	-	-	-	0	0.009	-	-	-	-	-	-	-	-
17	Hardness (As CaCO3)			0	59400	-	-	-	-	0	48550	-	-	-	-	-	-	-	-
18	Acrolein			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.43E+00	1.09E+00	No
19	Acrylonitrile		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.95E-01	3.89E-02	No
20	Aldrin		YES	0	0	[illegible]	3.000	0.600	No	0	0	-	-	-	-	[illegible]	3.97E-05	7.94E-06	No
21	Benzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.09E+01	4.18E+00	No
22	Bromoform		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.06E+02	2.13E+01	No
23	Carbon Tetrachloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.29E+00	2.59E-01	No
24	Chlordane		YES	0	0	[illegible]	2.400	0.480	No	0	0	[illegible]	0.004	0.001	No	[illegible]	6.39E-04	1.26E-04	No
25	Clorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.08E+02	1.81E+02	No
26	Chlorodibromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.00E+01	2.00E+00	No
27	Chloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
28	2-Chloro-Ethylvinyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
29	ChloroForm		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.38E+02	2.76E+01	No
30	4,4' - DDD		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.45E-04	4.90E-05	No
31	4,4' - DDE		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.73E-04	3.46E-05	No
32	4,4' - DDT		YES	0	0	1.100	1.100	0.220	No	0	0	0.001	0.001	0.000	No	[illegible]	1.73E-04	3.46E-05	No
33	Dichlorobromo-Methane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.36E+01	2.71E+00	No
34	1, 1-Dichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
35	1, 2-Dichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.89E+01	5.77E+00	No
36	Trans-1, 2-Dichloro-Ethylene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.91E+03	1.16E+03	No
37	1, 1-Dichloroethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.63E+03	1.13E+03	No
38	1, 2-Dichloropropane			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.49E+00	1.70E+00	No
39	1, 3-Dichloro-Propylene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.23E+01	2.46E+00	No
40	Dieldrin		YES	0	0	[illegible]	0.240	0.048	No	0	0	[illegible]	0.056	0.011	No	[illegible]	4.22E-05	8.44E-06	No
41	Ethylbenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.24E+03	2.49E+02	No
42	Methyl Bromide			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.71E+02	1.74E+02	No
43	Methyl Chloride			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
44	Methylene Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.87E+02	9.34E+01	No
45	1, 1, 2, 2-Tetrachloro-Ethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.15E+00	6.31E-01	No
46	Tetrachloro-Ethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.59E+00	5.16E-01	No
47	Toluene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.72E+03	1.74E+03	No
48	Toxaphene		YES	0	0	[illegible]	0.730	0.146	No	0	0	[illegible]	0.000	0.000	No	[illegible]	2.19E-04	4.38E-05	No
49	Tributyltin (TBT)		YES	0	0	[illegible]	0.460	0.092	No	0	0	[illegible]	0.072	0.014	No	-	-	-	-
50	1, 1, 1-Trichloroethane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
51	1, 1, 2-Trichloroethane		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.23E+01	2.46E+00	No
52	Trichlorethylene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.36E+01	4.72E+00	No
53	Vinyl Chloride		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.92E+00	3.85E-01	No
54	P-Chloro-M-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
55	2-Chlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.71E+01	1.74E+01	No
56	2, 4-Dichlorophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.72E+02	3.44E+01	No
57	2, 4-Dimethylphenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.98E+02	9.95E+01	No
58	4, 6-Dinitro-O-Cresol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
59	2, 4-Dinitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.11E+03	6.22E+02	No
60	4,6-Dinitro-2-methylphenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.24E+02	4.47E+01	No
61	Dioxin (2,3,7,8-TCDD)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.60E-08	7.21E-09	No
62	2-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
63	4-Nitrophenol			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
64	Pentachlorophenol		YES	0	0	[illegible]	8.723	1.745	No	0	0	[illegible]	8.693	1.339	No	[illegible]	2.39E+00	4.78E-01	No
65	Phenol			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.00E+05	1.00E+05	No
66	2, 4, 6-Trichlorophenol		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.91E+00	3.82E-01	No
67	Acenaphthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.79E+02	1.16E+02	No
68	Acenaphthylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
69	Anthracene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.33E+04	4.67E+03	No
70	Benzidine			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.16E-04	2.32E-05	No
71	Benzo(A)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
72	Benzo(A)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
73	Benzo(b)fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.07E-02	2.13E-03	No
74	Benzo(GHI)Perylene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
75	Benzo(K)Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.07E-02	2.13E-03	No
76	Bis (2-Chloroethoxy) Methane			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
77	Bis (2-Chloroethyl)-Ether		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.15E-01	8.31E-02	No
78	Bis (2-Chloroiso-Propyl) Ether			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.78E+04	7.56E+03	No
79	Bis (2-Ethylhexyl) Phthalate		YES	0	0.54	-	-	-	-	0	0.1	-	-	-	-	[illegible]	1.73E+00	3.46E-01	No
80	4-Bromophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
81	Butyl Benzyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.13E+03	2.25E+02	No
82	2-Chloronaphthalene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	9.24E+02	1.85E+02	No
83	4-Chlorophenyl Phenyl Ether			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
84	Chrysene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
85	Di-N-Butyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.62E+03	5.24E+02	No
86	Di-N-Octyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
87	Dibenzo(A,H)Anthracene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
88	1, 2-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.55E+02	1.51E+02	No
89	1, 3-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.62E+02	1.12E+02	No
90	1, 4-Dichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.12E+02	2.25E+01	No
91	3, 3-Dichlorobenzidine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.25E-02	4.49E-03	No
92	Diethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.56E+04	5.11E+03	No
93	Dimethyl Phthalate			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.48E+05	1.30E+05	No
94	2, 4-Dinitrotoluene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.68E+00	5.35E-01	No
95	2, 6-Dinitrotoluene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
96	1,2-Diphenylhydrazine			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.17E-01	2.34E-02	No
97	Endosulfan (alpha)		YES	0	0	[illegible]	0.220	0.044	No	0	0	[illegible]	0.056	0.011	No	[illegible]	7.01E+01	1.40E+01	No
98	Endosulfan (beta)		YES	0	0	[illegible]	0.220	0.044	No	0	0	[illegible]	0.056	0.011	No	[illegible]	7.01E+01	1.40E+01	No
99	Endosulfan sulfate		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	7.01E+01	1.40E+01	No
100	Endrin		YES	0	0	[illegible]	0.086	0.017	No	0	0	[illegible]	0.036	0.007	No	[illegible]	4.77E-02	9.53E-03	No
101	Endrin Aldehyde		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.38E-01	4.77E-02	No
102	Fluoranthene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	8.12E+01	1.62E+01	No
103	Fluorene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.11E+03	6.22E+02	No
104	Heptochlor		YES	0	0	[illegible]	0.520	0.104	No	0	0	[illegible]	0.004	0.001	No	[illegible]	6.28E-05	1.25E-05	No
105	Heptachlor Epoxide		YES	0	0	[illegible]	0.520	0.104	No	0	0	[illegible]	0.004	0.001	No	[illegible]	3.09E-05	6.18E-06	No
106	Hexachlorobenzene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.27E-04	4.54E-05	No
107	Hexachlorobutadiene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.45E+01	2.91E+00	No
108	Hexachlorocyclohexan (alpha)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.85E-03	7.70E-04	No
109	Hexachlorocyclohexan (beta)		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.35E-02	2.69E-03	No
110	Hexachlorocyclohexan (gamma)		YES	0	0	[illegible]	0.950	0.190	No	0	0	-	-	-	-	[illegible]	1.46E+00	2.91E-01	No
111	HexachlorocyclоPentadiene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	6.45E+02	1.29E+02	No
112	Hexachloroethane			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.92E+00	3.84E-01	No
113	Indeno(1, 2, 3-CK)Pyrene		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	1.44E-02	2.88E-03	No
114	Isophorone			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	5.61E+02	1.12E+02	No
115	Naphthalene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
116	Nitrobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.04E+02	8.07E+01	No
117	N-Nitrosodi-N-Propylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	3.99E-01	7.97E-02	No
118	N-Nitrosodimethylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.38E+00	4.76E-01	No
119	N-Nitrosodiphenylamine		YES	0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.73E+00	9.46E-01	No
120	PCB-1016		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
121	PCB-1221		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
122	PCB-1232		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
123	PCB-1242		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
124	PCB-1248		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
125	PCB-1254		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
126	PCB-1260		YES	0	0	-	-	-	-	0	0	[illegible]	0.014	0.003	No	[illegible]	5.05E-05	1.01E-05	No
127	Phenanthrene			0	0	-	-	-	-	0	0	-	-	-	-	-	-	-	-
128	Pyrene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	2.33E+03	4.67E+02	No
129	1, 2, 4-Trichlorobenzene			0	0	-	-	-	-	0	0	-	-	-	-	[illegible]	4.09E+01	8.19E+00	No

Spanish Fort Sewer WWTP

Permit No. AL0042234

Total Recoverable Zinc DMR and Permit Application Data (Outfall 002)

Monitoring Period End Date	Monthly Average (ug/L)	Maximum Daily (ug/L)
6/30/21	110	110
7/31/21	90.6	90.6
8/31/21	85.1	85.1
9/30/21	167	167
10/31/21	79.1	79.1
11/30/21	79.6	79.6
12/31/21	81.9	81.9
1/31/22	89.1	89.1
2/28/22	90.8	90.8
3/31/22	104	104
4/30/22	139	139
5/31/22	87.8	87.7
6/30/22	103	103
7/31/22	70.2	70.2
8/31/22	112	112
9/30/22	76.6	76.6
10/31/22	101	101
11/30/22	82.6	82.6
12/31/22	87.3	87.3
1/31/23	47	47
2/28/23	63.1	63.1
3/31/23	75.8	75.8
4/30/23	76.6	76.6
5/31/23	123	123
6/30/23	68.2	68.2
7/31/23	101	101
8/31/23	124	124
9/30/23	164	164
10/31/23	92.6	92.6
11/30/23	102	102
12/31/23	84.6	84.6
1/31/24	61.2	61.2
2/29/24	42.4	42.4
3/31/24	76.6	76.6
4/30/24	97.6	97.6
5/31/24	73.2	73.2
6/30/24	111	111
7/31/24	110	110
8/31/24	118	118
9/30/24	98.2	98.2
10/31/24	78.1	78.1
11/30/24	68.7	68.7
12/31/24	71.8	71.8
1/31/25	56.4	56.4
2/28/25	47.9	47.9
3/31/25	52	52
4/30/25	51	51
5/31/25	77	77
6/30/25	77.5	77.5
7/31/25	56.2	56.2
8/31/25	59.5	59.5
9/30/25	50.4	50.4
10/31/25	55.3	55.3
11/30/25	40.4	40.4
12/31/25	68.9	68.9
1/31/26	83	83
2/28/26	74.3	74.3
3/2/21 (app)	527	527
6/22/21 (app)	116	116
1/11/22 (app)	111	111
2/15/23 (app)	68.2	68.2

Average = 92.4 ug/L

Maximum = 527 ug/L

Spanish Fort Sewer WWTP

Permit No. AL0042234

Total Recoverable Copper DMR and Permit Application Data (Outfall 002)

Monitoring Period End Date	Monthly Average (ug/L)	Maximum Daily (ug/L)
12/31/25	7.0	7.0
1/31/26	7.8	7.8
2/28/26	7.2	7.2
3/2/21 (app)	322	322
6/22/21 (app)	218	218
1/11/22 (app)	*B	*B
2/15/23 (app)	*B	*B

*B = Below Method Detection Limit

Average = 80.28 ug/L

Maximum = 322 ug/L

Spanish Fort Sewer WWTP

Permit No. AL0042234

Total Recoverable Lead DMR and Permit Application Data (Outfall 002)

Monitoring Period End Date	Monthly Average (ug/L)	Maximum Daily (ug/L)
12/31/25	0.18	0.18
1/31/26	0.16	0.16
2/28/26	0.19	0.19
3/2/21 (app)	6.8	6.8
6/22/21 (app)	*B	*B
1/11/22 (app)	*B	*B
2/15/23 (app)	*B	*B

*B = Below Method Detection Limit

Average = 1.04 ug/L

Maximum = 6.8 ug/L

Spanish Fort Sewer WWTP

Permit No. AL0042234

Bis (2-Ethylhexyl) Phthalate DMR and Permit Application Data (Outfall 002)

Monitoring Period End Date	Monthly Average (ug/L)	Maximum Daily (ug/L)
12/31/25	0.54	*****
1/31/26	0.19	*****
2/28/26	*B	*****
3/2/21 (app)	*B	*B
6/22/21 (app)	*B	*B
1/11/22 (app)	*B	*B
2/15/23 (app)	*B	*B

*B = Below Method Detection Limit

Average = 0.10 ug/L

Maximum = 0.54 ug/L

Spanish Fort Sewer WWTP

Permit No. AL0042234

Total Recoverable Mercury DMR Data (Outfall 002Q)

Monitoring Period End Date	Monthly Average (ug/L)	Maximum Daily (ug/L)
6/30/21	0.0141	0.0141
9/30/21	0.015	0.015
12/31/21	0.00673	0.00673
3/31/22	0.0166	0.0166
6/30/22	0.0012	0.0012
9/30/22	0.0267	0.0267
12/31/22	0.00836	0.00836
3/31/23	0.0166	0.0166
6/30/23	0.0173	0.0173
9/30/23	0.0198	0.0198
12/31/23	0.0332	0.0332
3/31/24	0.0185	0.0185
6/30/24	0.015	0.015
9/30/24	0.0259	0.0259
12/31/24	0.00655	0.00655
3/31/25	0.01	0.01
6/30/25	0.0151	0.0151
9/30/25	0.00143	0.00143
12/31/25	0.0137	0.0137
3/31/24	0.0185	0.0185
6/30/24	0.015	0.015
9/30/24	0.0259	0.0259
12/31/24	0.00655	0.00655

Average = 0.0151 ug/L

Maximum = 0.0332 ug/L

BCSS
BALDWIN COUNTY SEWER SERVICE
clean and simple

January 26, 2026

ADEM
Alabama Department of Environmental Management
Municipal Section
Water Division
P.O. Box 301463
Montgomery, AL 36130-1463
Attn: Ms. Stephanie Ammons

Re: ADEM Responsible Official

Dear Stephanie,

This confirms the designation of Gerry McManus as the ADEM responsible official (RO) for Baldwin County Sewer Service, LLC. Please let us know if you have any questions or if we can be of further assistance.

Thank You,

Brooks C. Delaney
Manager

P.O. Box 1628 | Foley, AL 36536 | ph: 251-971-3022 | fax: 251-971-6039 | BaldwinCountySewer.com

From: Gerry Mcmanus <gerry@baldwincountysewer.com>
Sent: Wednesday, February 11, 2026 9:56 PM
To: Jeffrey A. Harrison <jeff.harrison@3notch.com>
Cc: Ammons, Stephanie <SAmmons@adem.alabama.gov>
Subject: Re: Information Needed for Spanish Ft WWTP Application Renewal -ADEM

Good Evening,

Please see the requested information below.

Cell Number 251-605-0135

Office 251-971-3022

Address 14747 Underwood Road, Summerdale, Al 36580

Title CFO / Controller

Thank You,

Gerry

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

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

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

PURPOSE OF THIS APPLICATION

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

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

SECTION A – GENERAL INFORMATION

1. Facility Name: Spanish Fort WWTP Facility County: Baldwin

   a. Operator Name: Baldwin County Sewer Service, LLC

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

   If No, provide the following information:

   Operator Name: _____

   Operator Address (Street or PO Box): 14747 Underwood Road

   City: Summerdale Alabama Zip: 36580

   Phone Number: 251-971-3022 Email Address: clarence@baldwincountysewer.com

   Operator Status:

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

   ☐ Private ☐ Other (please specify): LLC

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

   > The Operator is the Owner and is responsible for the operation, maintenance, and compliance of the existing facility.

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

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

2. NPDES Permit Number: AL 0042234 (Not applicable if initial permit application)

3. Facility Location (Front Gate): Latitude: 30.6402937 Longitude: -87.804151

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

   Name and Title: Clarence Burke

   Address: 14747 Underwood Road

   City: Summerdale State: Alabama Zip: 36580

   Phone Number: 251-971-3022 Email Address: clarence@baldwincountysewer.com

5. Designated Facility/DMR Contact:

Name: David Flesch Title: Operator-Spanish Fort Sewer WWTP

Phone Number: 251-747-2977 Email Address: david.flesch@baldwincountysewer.com

6. Designated Emergency Contact:

Name: David Flesch Title: Operator-Spanish Fort Sewer WWTP

Phone Number: 251-747-2977 Email Address: david.flesch@baldwincountysewer.com

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

Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

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

Facility Name	Permit Number	Type of Action	Date of Action
Spanish Fort WWTP	AL0042234	Notice of Violation	06/30/2022

SECTION B – WASTEWATER DISCHARGE INFORMATION

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

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

For each shared outfall, provide the following:

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

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

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

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

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DEC 12 2025

MUNICIPAL SECTION

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

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

Most recent expansion was completed in December 2025.

SECTION C – WASTE STORAGE AND DISPOSAL INFORMATION

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

Description of Waste	Description of Storage Location
Waste activated sludge	sludge holding pond and biofilter bags

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

SECTION D – INDUSTRIAL INDIRECT DISCHARGE CONTRIBUTORS

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

Company Name	Description of Industrial Wastewater	Existing or Proposed	Flow (MGD)	Subject to SID Permit?
None				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No

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

If yes, please attach a copy of the ordinance.

SECTION E – COASTAL ZONE INFORMATION

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

If yes, complete items E.1 – E.12 below:

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

SECTION F – ANTI-DEGRADATION EVALUATION

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

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

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

   If yes, do not complete this section.

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

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

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

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

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

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

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

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

SECTION G – EPA Application Forms

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

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

SECTION H– ENGINEERING REPORT/BMP PLAN REQUIREMENTS

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

SECTION I– RECEIVING WATERS

Outfall No.	Receiving Water(s)	303(d) Segment?	Included in TMDL?*
OF001	Bay Branch	☐ Yes ■ No	☐ Yes ■ No
OF002	Bay Branch	☐ Yes ■ No	☐ Yes ■ No
SW	003S/004S/008S Fish River	■ Yes ☐ No	■ Yes ☐ No

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

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

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

(3) Requested interim limitations, if applicable;

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

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

SECTION J – APPLICATION CERTIFICATION

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

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

Signature of Responsible Official:_____ Date Signed:_____

Name: _____ Title: _____

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

Mailing Address:_____

City:_____ State:_____ Zip:_____

Phone Number:_____ Email Address:_____

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

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

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

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

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

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

RECEIVED

DEC 12 2025

MUNICIPAL SECTION

Agreements and Signature(s)

SUBMISSION AGREEMENTS

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

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

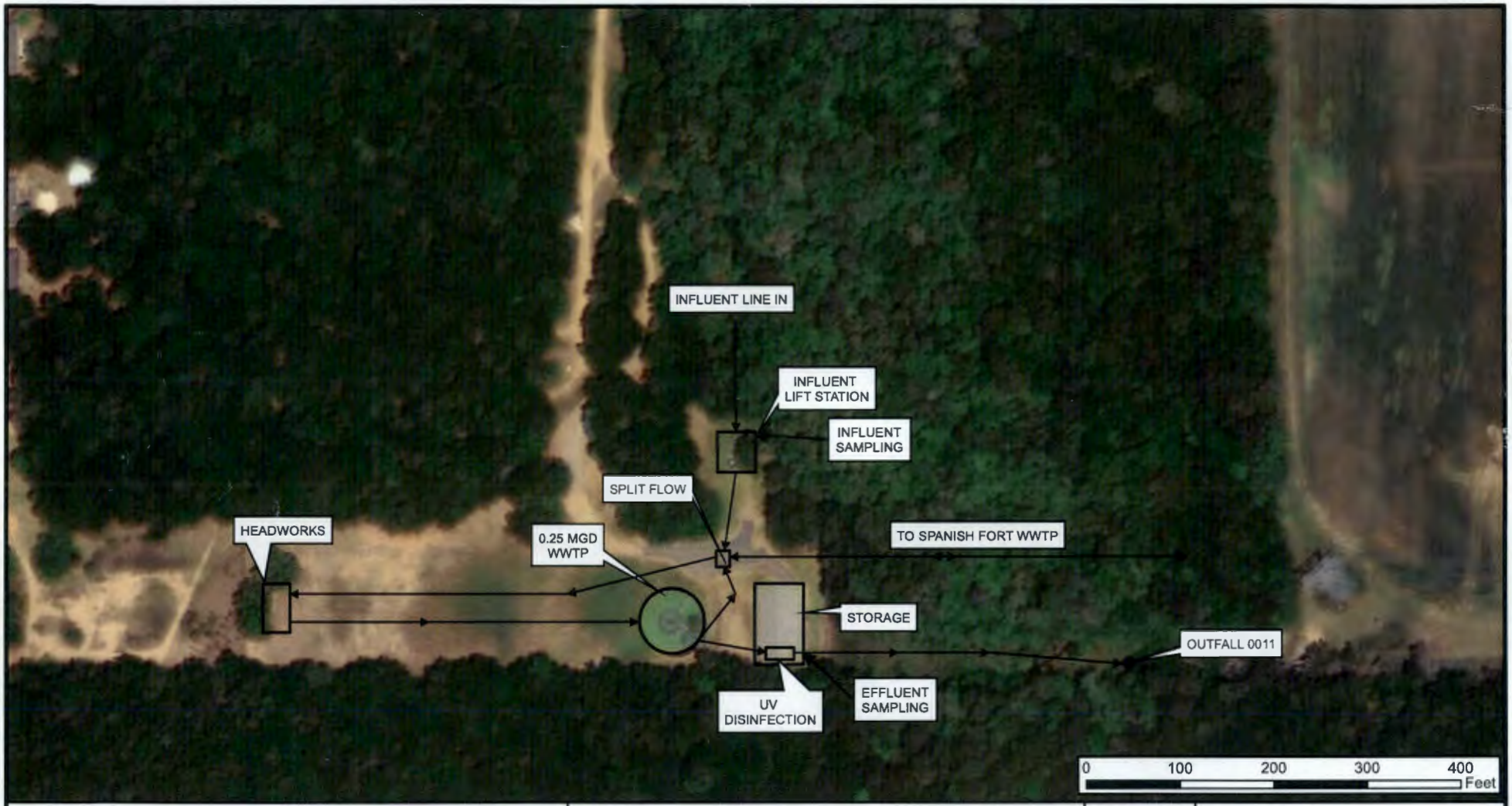
I certify under penalty of lawthat this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage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

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

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

(a) In the case of a corporation, by a principal executive officer of at least the level of vice president, or a manager assigned or delegated in accordance with corporate procedures, with such delegation submitted in writing if required by the Department, who is responsible for manufacturing, production, or operating facilities and is authorized to make management decisions which govern the operation of the regulated facility;
(b) In the case of a partnership, by a general partner;
(c) In the case of a sole proprietorship, by the proprietor; or
(d) In the case of a municipal, state, federal, or other public entity, by either a principal executive officer, or ranking elected official.

Signed By Clarence Burke on 12/29/2023 at 5:25 PM



Baldwin County Sewer Service WWTP

Spanish Fort Outfall 0011 Schematic

AL0042234 Loxley, AL

CDG

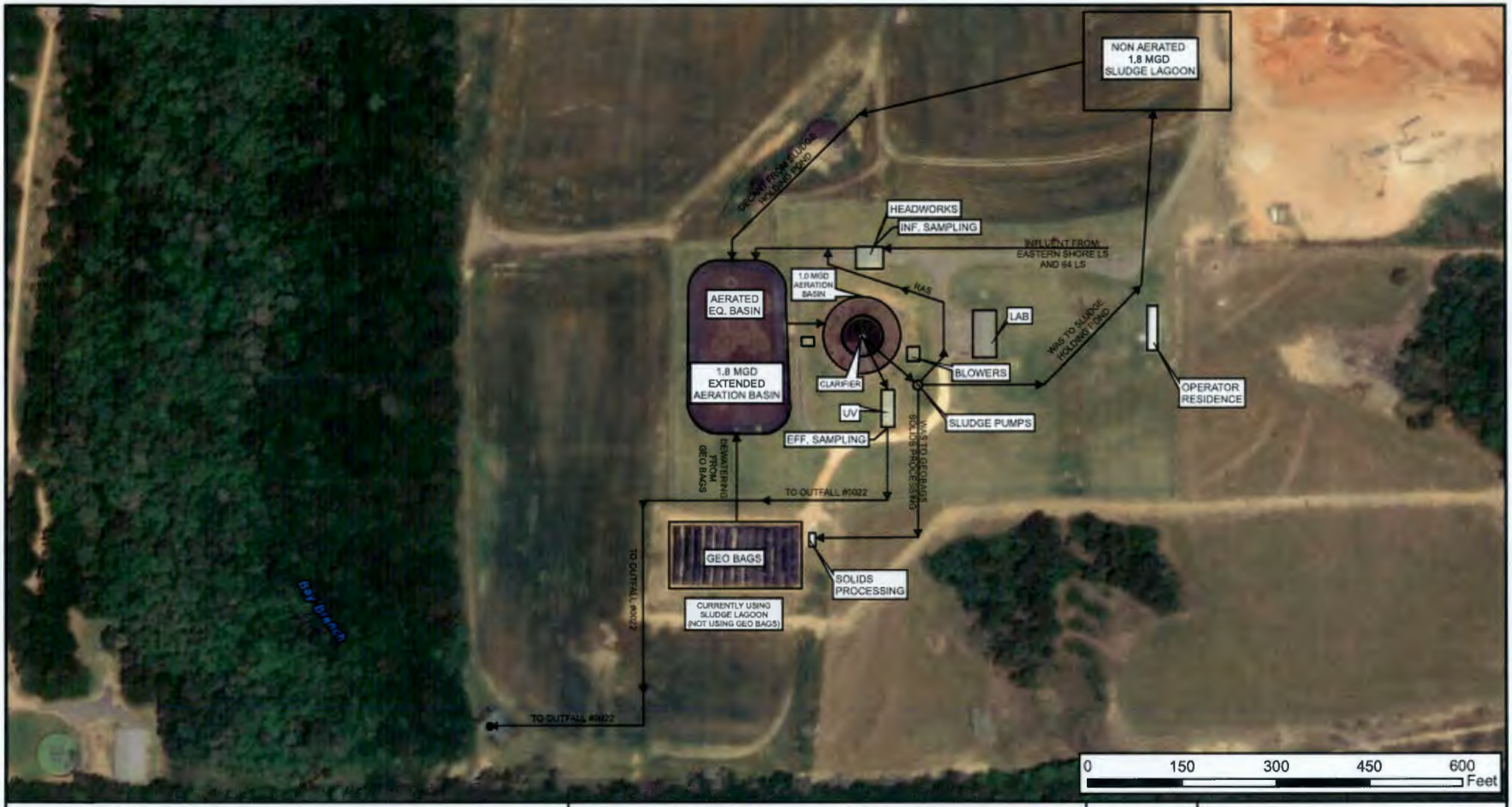
1952 West Main Street
Dothan, AL 36301
(334) 677-9431
www.cdge.com

Scale Text:
1 in. = 100 ft.

Drawn By: BRJ

Checked by: CDC

Date: November 2023



Baldwin County Sewer Service WWTP

Spanish Fort Outfall 0022 Schematic

AL0042234 Loxley, AL

CDG

1962 West Main Street
Dothan, AL 36301
(334) 677-9431
www.cdge.com

Scale Text:
1 in. = 150 ft.

Drawn By:	BRJ
Checked by:	JAH
Date:	December 2024

Baldwin County Sewer Services, LLC

Spanish Fort WWTP Outfall 0024 Process Flow Diagram

AL0042234 Loxley, Alabama

THREE NOTCH GROUP

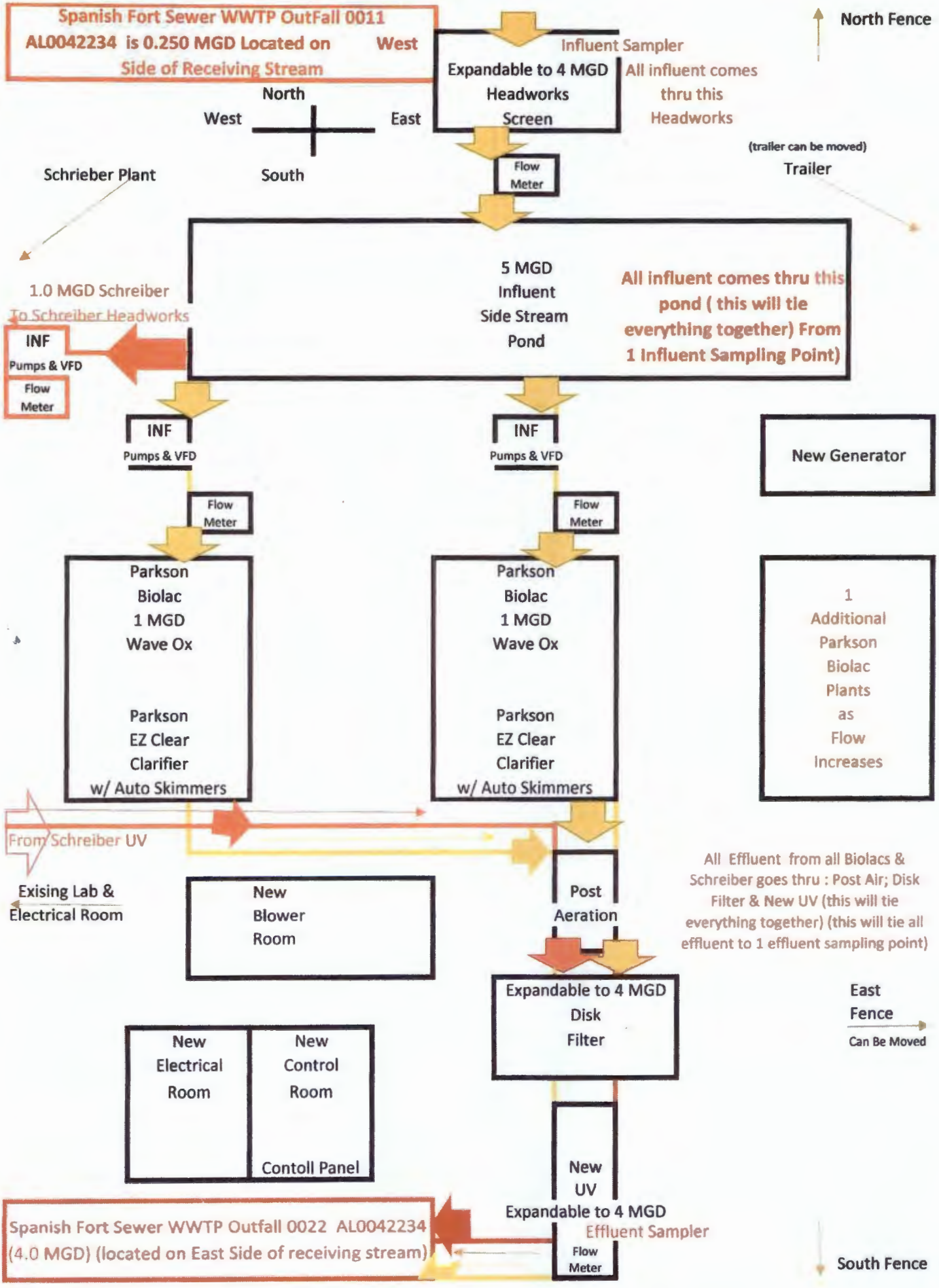
100 N Gay Street, Suite 350
Auburn, AL 36830
(334) 466-9431
www.3notch.com

Scale Text:
1 in. = 300 ft.

Drawn By: BRJ

Checked by: JAH

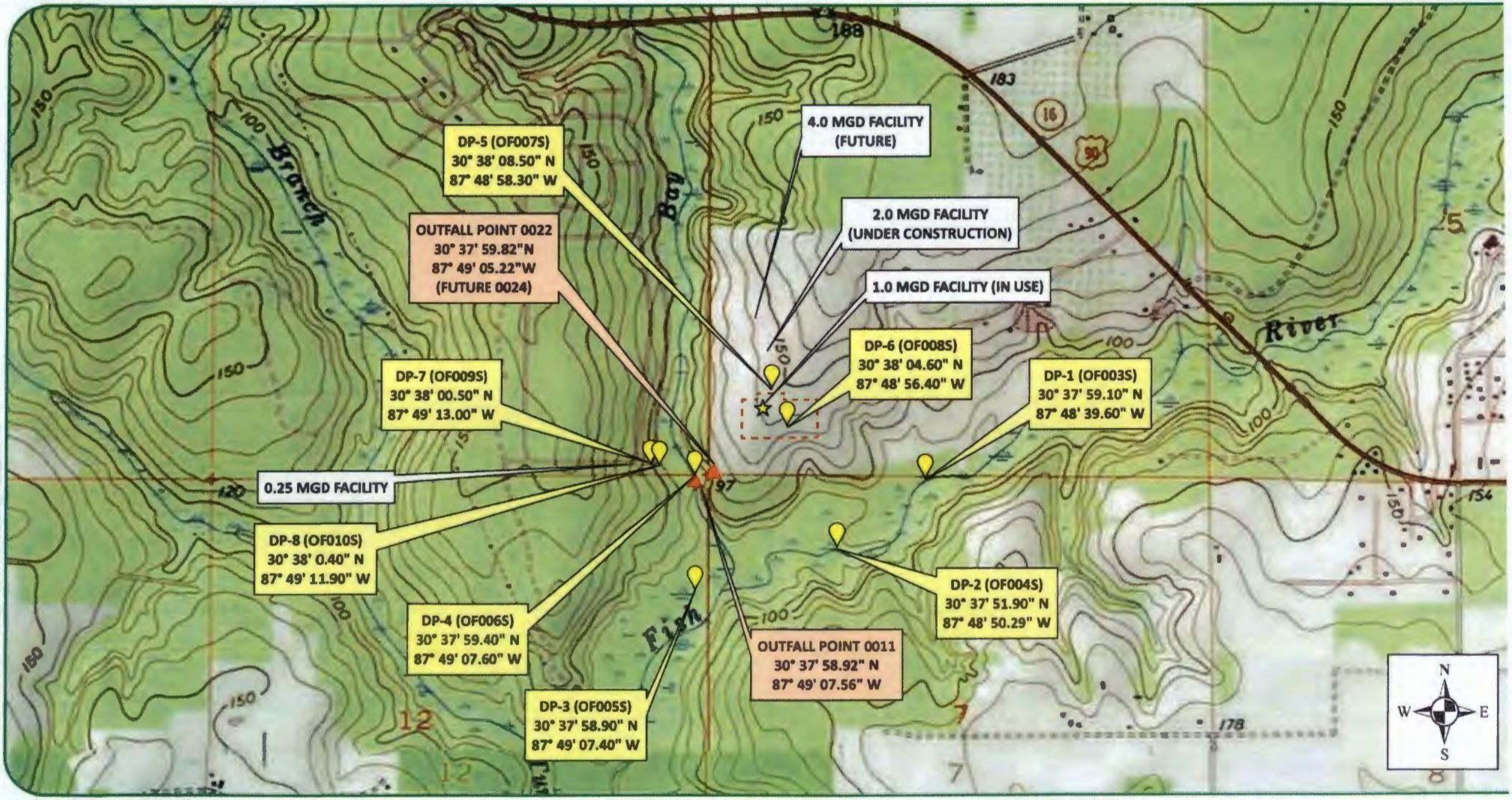
Date: February 2026


Spanish Fort Sewer WWTP OutFall 0011
AL0042234 is 0.250 MGD Located on West Side of Receiving Stream
North
West
East
South
Schrieber Plant
Influent Sampler
Expandable to 4 MGD Headworks Screen
All influent comes thru this Headworks
Flow Meter
(trailer can be moved)
Trailer
North Fence
1.0 MGD Schreiber
To Schreiber Headworks
INF
Pumps & VFD
Flow Meter
5 MGD Influent Side Stream Pond
All influent comes thru this pond (this will tie everything together) From 1 Influent Sampling Point)
INF
Pumps & VFD
INF
Pumps & VFD
New Generator
Flow Meter
Flow Meter
Parkson Biolac 1 MGD Wave Ox
Parkson EZ Clear Clarifier w/ Auto Skimmers
Parkson Biolac 1 MGD Wave Ox
Parkson EZ Clear Clarifier w/ Auto Skimmers
1 Additional Parkson Biolac Plants as Flow Increases
From Schreiber UV
Exising Lab & Electrical Room
New Blower Room
Post Aeration
All Effluent from all Biolacs & Schreiber goes thru : Post Air; Disk Filter & New UV (this will tie everything together) (this will tie all effluent to 1 effluent sampling point)
Expandable to 4 MGD Disk Filter
East Fence
Can Be Moved
New Electrical Room
New Control Room
Contoll Panel
New UV
Expandable to 4 MGD
Effluent Sampler
Flow Meter
Spanish Fort Sewer WWTP Outfall 0022 AL0042234 (4.0 MGD) (located on East Side of receiving stream)
South Fence

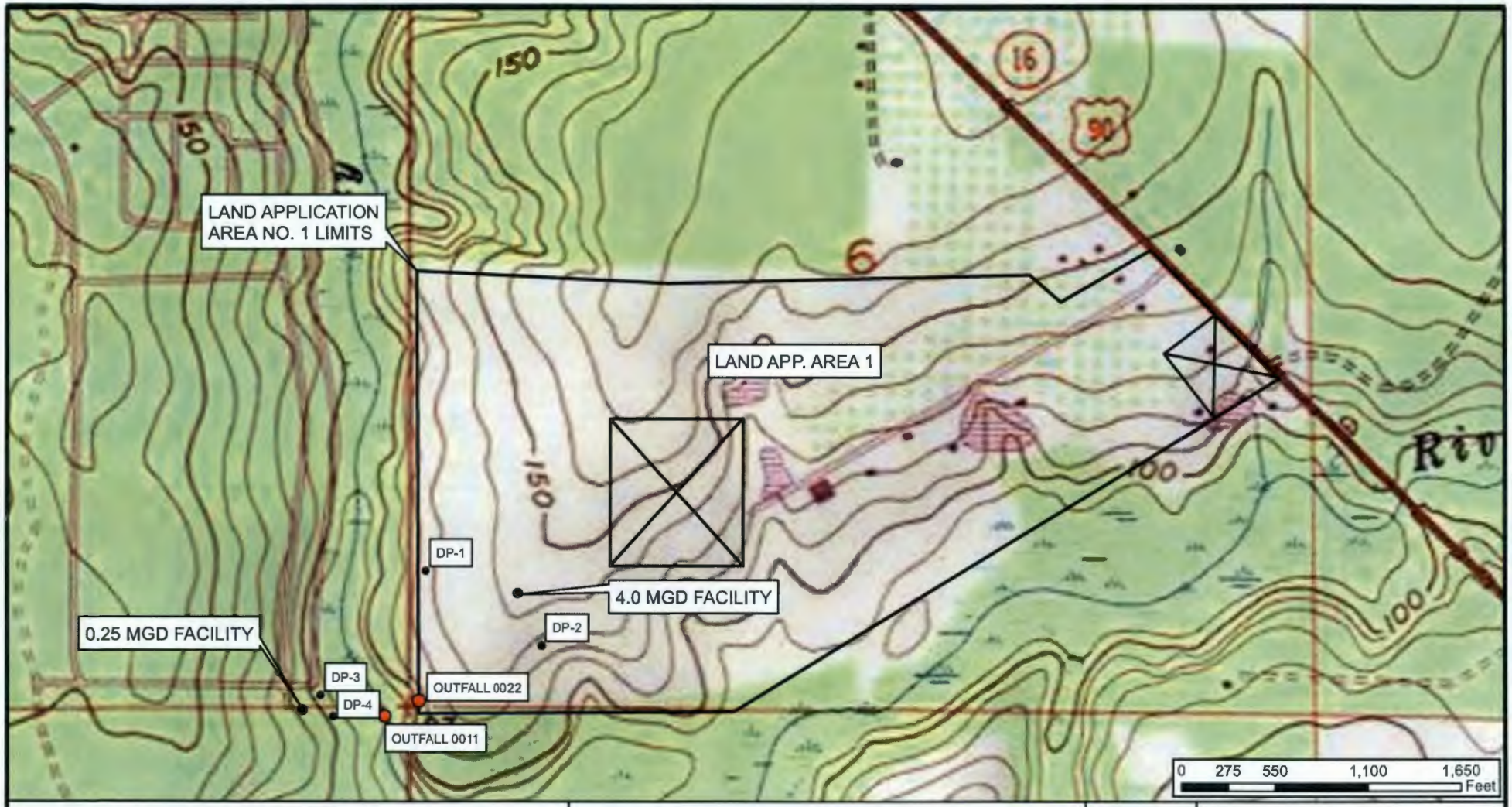
Baldwin County Sewer Services, LLC

SPANISH FORT WWTP OUTFALL LOCATIONS

AL0042234 Loxley, Alabama FEBRUAF



THREE NOTCH GROUP



Baldwin County Sewer Service WWTP

Land Application Area 1

AL0042234 Loxley, AL

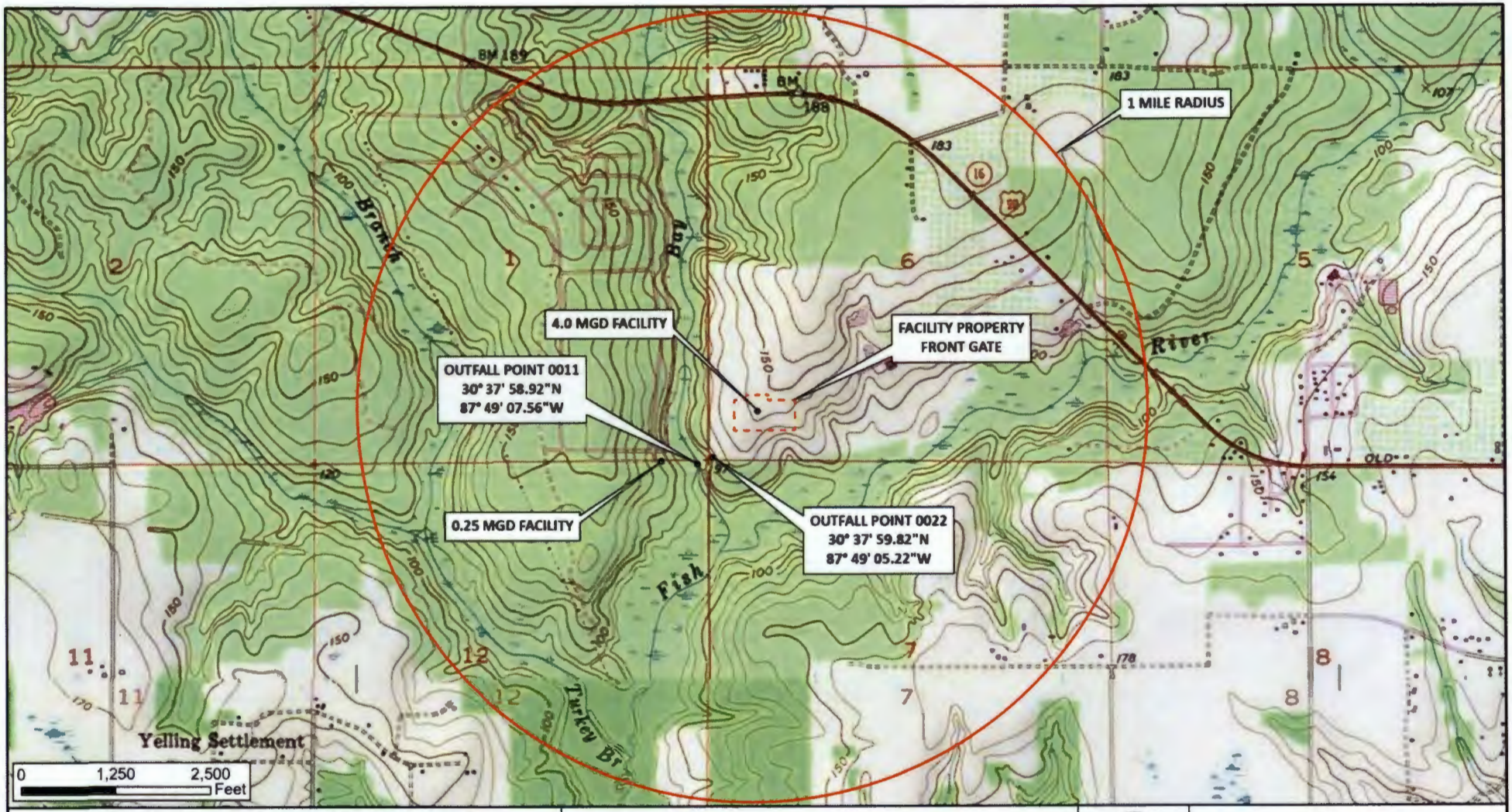
CDG

Engineering. Environmental. Answers.

170 East Main Street
Dothan, AL 36301
(334 677-9431
www.cdge.com

Scale Text:
1 in. = 550 ft.

Drawn By:	BRJ
Checked by:	CDC
Date:	December 2020



Baldwin County Sewer Services, LLC

Spanish Fort WWTP Site
Topographic Overview

AL0042234 Loxley, Alabama

CDG

1962 West Main Street
Dothan, AL 36301
(334) 677-9431
www.cdge.com

Scale Text:
1 in. = 1,250 ft.

Drawn By:	BRJ
Checked by:	JAH
Date:	November 2023

Baldwin County Sewer Service WWTP

Spanish Fort Land Application Area No. 1 Boundary and Buffer

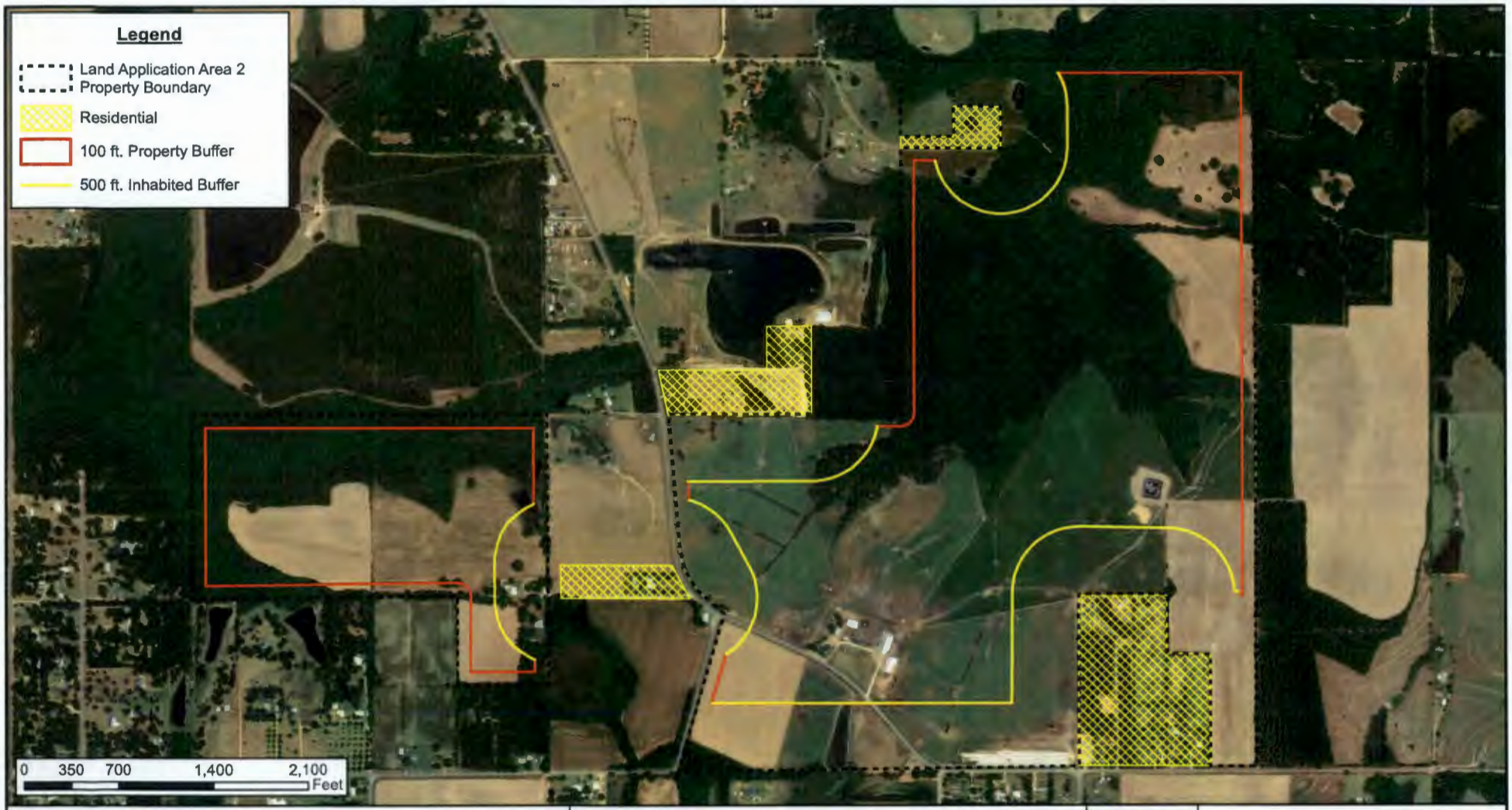
Loxley, Alabama

CDG
Engineering. Environmental. Answers.

170 East Main Street
Dothan, AL 36301
(334 677-9431
www.cdge.com

Scale Text:
1 in. = 500 ft.

Drawn By:	BRJ
Checked by:	CDC
Date:	December 2020



Baldwin County Sewer Service WWTP

Spanish Fort Land Application Area No. 2 Boundary and Buffer

Loxley, Alabama

CDG
Engineering. Environmental. Answers.

170 East Main Street
Dothan, AL 36301
(334 677-9431
www.cdge.com

Scale Text:
1 in. = 700 ft.

Drawn By:	BRJ
Checked by:	CDC
Date:	December 2020

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

Form 2A NPDES | EPA

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

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

Facility Information

1.1 Facility name
Spanish Fort Sewer WWTP

Mailing address (street or P.O. box)
14747 Underwood Road

City or town	State	ZIP code
Summerdale	AL	36580

Contact name (first and last)	Title	Phone number	Email address
Clarence E. Burke, Jr.	Owner/Manager	(251) 971-3022	clarence@baldwincountysewer.com

Location address (street, route number, or other specific identifier) ☐ Same as mailing address
12840 Highway 90

City or town	State	ZIP code
Loxley	AL	36551

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

Applicant Information

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

Applicant name

Applicant address (street or P.O. box)

City or town	State	ZIP code

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

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

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

Existing Environmental Permits

1.6 Indicate below any existing environmental permits. (Check all that apply and print or type the corresponding permit number for each.)

Existing Environmental Permits

☑ NPDES (discharges to surface water) AL0042234	☐ RCRA (hazardous waste)	☐ UIC (underground injection control)
☐ PSD (air emissions)	☐ Nonattainment program (CAA)	☐ NESHAPs (CAA)
☐ Ocean dumping (MPRSA)	☐ Dredge or fill (CWA Section 404)	☐ Other (specify)

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

Collection System and Population Served

1.7 Provide the collection system information requested below for the treatment works.

Municipality Served	Population Served	Collection System Type (indicate percentage)	Ownership Status
Baldwin County	22,108	100 % separate sanitary sewer	☑ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
Total Population Served	22,108		

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

Indian Country

1.8 Is the treatment works located in Indian Country?

☐ Yes ☑ No

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

☐ Yes ☑ No

Design and Actual Flow Rates

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

Design Flow Rate
OF 0011 0.25 mgd

Annual Average Flow Rates (Actual)		
Two Years Ago	**Last Year**	**This Year**
OF 011:0.123 mgd	OF011:0.22 mgd	OF011: 0.171 mgd
Maximum Daily Flow Rates (Actual)		
Two Years Ago	**Last Year**	**This Year**
OF011: 0.272 mgd	OF011:0.32 mgd	OF011:0.216 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**
2	0	0	0	0

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

Collection System and Population Served

1.7 Provide the collection system information requested below for the treatment works.

Municipality Served	Population Served	Collection System Type (indicate percentage)	Ownership Status
Baldwin County	22,108	100 % separate sanitary sewer	☑ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
Total Population Served	22,108		

	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?

☐ Yes ☑ No

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

☐ Yes ☑ No

Design and Actual Flow Rates

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

Design Flow Rate
OF 0023: 3.0 mgd

Annual Average Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
0 mgd	0 mgd	OF 0023: 1.5 mgd

Maximum Daily Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
0 mgd	0 mgd	OF 0023: 3.0 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
2	0	0	0	0

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

Collection System and Population Served

1.7 Provide the collection system information requested below for the treatment works.

Municipality Served	Population Served	Collection System Type (indicate percentage)	Ownership Status
Baldwin County	22,108	100 % separate sanitary sewer	☑ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
		____ % separate sanitary sewer	☐ Own ☐ Maintain
		____ % combined storm and sanitary sewer	☐ Own ☐ Maintain
		☐ Unknown	☐ Own ☐ Maintain
Total Population Served	22,108		

	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?

☐ Yes ☑ No

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

☐ Yes ☑ No

Design and Actual Flow Rates

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

Design Flow Rate
OF 0024: 4.0 mgd

Annual Average Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
0 mgd	0 mgd	0 mgd
Maximum Daily Flow Rates (Actual)		
Two Years Ago	Last Year	This Year
0 mgd	0 mgd	0 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
2	0	0	0	0

Outfalls and Other Discharge or Disposal Methods

Outfalls Other Than to Waters of the United States

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

☐ Yes ☑ No ➔ SKIP to Item 1.14.

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

Surface Impoundment Location and Discharge Data

Location	Average Daily Volume Discharged to Surface Impoundment	Continuous or Intermittent (check one)
	gpd	☐ Continuous ☐ Intermittent
	gpd	☐ Continuous ☐ Intermittent
	gpd	☐ Continuous ☐ Intermittent

1.14 Is wastewater applied to land?

☐ Yes ☑ No ➔ SKIP to Item 1.16.

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

Land Application Site and Discharge Data

Location	Size	Average Daily Volume Applied	Continuous or Intermittent (check one)
	acres	gpd	☐ Continuous ☐ Intermittent
	acres	gpd	☐ Continuous ☐ Intermittent
	acres	gpd	☐ Continuous ☐ Intermittent

1.16 Is effluent transported to another facility for treatment prior to discharge?

☐ Yes ☑ No ➔ SKIP to Item 1.21.

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

1.18 Is the effluent transported by a party other than the applicant?

☐ Yes ☑ No ➔ SKIP to Item 1.20.

1.19 Provide information on the transporter below.

Transporter Data

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

Outfalls and Other Discharge or Disposal Methods Continued

1.20 In the table below, indicate the name, address, contact information, NPDES number, and average daily flow rate of the receiving facility.

Receiving Facility Data

Facility name	Mailing address (street or P.O. box)	
City or town	State	ZIP code
Contact name (first and last)	Title	
Phone number	Email address	
NPDES number of receiving facility (if any) ☐ None	Average daily flow rate mgd	

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

☐ Yes ☑ No → SKIP to Item 1.23.

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

Information on Other Disposal Methods

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

Variance Requests

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

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

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

☑ Not applicable

Contractor Information

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

☐ Yes ☑ No → SKIP to Section 2.

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

Contractor Information

	Contractor 1	Contractor 2	Contractor 3
Contractor name (company name)			
Mailing address (street or P.O. box)			
City, state, and ZIP code			
Contact name (first and last)			
Phone number			
Email address			
Operational and maintenance responsibilities of contractor			

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

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

Design Flow

Outfalls to Waters of the United States

2.1 Does the treatment works have a design flow greater than or equal to 0.1 mgd?

☑ Yes ☐ No ➔ SKIP to Section 3.

Inflow and Infiltration

2.2 Provide the treatment works' current average daily volume of inflow and infiltration.

Average Daily Volume of Inflow and Infiltration
25,000 gpd

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

Continue to monitor the system and respond to callouts for force main repairs

Topographic Map

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

☑ Yes ☐ No

Flow Diagram

2.4 Have you attached a process flow diagram or schematic to this application that contains all the required information? (See instructions for specific requirements.)

☑ Yes ☐ No

Scheduled Improvements and Schedules of Implementation

2.5 Are improvements to the facility scheduled?

☐ Yes ☑ No ➔ SKIP to Section 3.

Briefly list and describe the scheduled improvements.

1.

2.

3.

4.

2.6 Provide scheduled or actual dates of completion for improvements.

Scheduled or Actual Dates of Completion for Improvements

Scheduled Improvement (from above)	Affected Outfalls (list outfall number)	Begin Construction (MM/DD/YYYY)	End Construction (MM/DD/YYYY)	Begin Discharge (MM/DD/YYYY)	Attainment of Operational Level (MM/DD/YYYY)
1.					
2.					
3.					
4.					

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

☐ Yes ☐ No ☐ None required or applicable

Explanation:

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

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

Description of Outfalls

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

	Outfall Number 001	Outfall Number 002	Outfall Number ____
State	Alabama	Alabama	
County	Baldwin	Baldwin	
City or town	Loxley	Loxley	
Distance from shore	N/A ft.	N/A ft.	ft.
Depth below surface	ft.	ft.	ft.
Average daily flow rate	0.17 mgd	1.02 mgd	mgd
Latitude	30° 37′ 58.9″ N	30° 37′ 59.8″ N	° ′ ″
Longitude	-87° 49′ 7.56″ W	-87° 49′ 5.22″ W	° ′ ″

Seasonal or Periodic Discharge Data

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

☐ Yes ☑ No ➔ SKIP to Item 3.4.

3.3 If so, provide the following information for each applicable outfall.

	Outfall Number ____	Outfall Number ____	Outfall Number ____
Number of times per year discharge occurs			
Average duration of each discharge (specify units)			
Average flow of each discharge	mgd	mgd	mgd
Months in which discharge occurs			

Diffuser Type

3.4 Are any of the outfalls listed under Item 3.1 equipped with a diffuser?

☐ Yes ☑ No ➔ SKIP to Item 3.6.

3.5 Briefly describe the diffuser type at each applicable outfall.

	Outfall Number ____	Outfall Number ____	Outfall Number ____

Waters of the U.S.

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

☑ Yes ☐ No ➔ SKIP to Section 6.

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Receiving Water Description

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

	Outfall Number 001	Outfall Number 002	Outfall Number ____
Receiving water name	Bay Branch	Bay Branch	
Name of watershed, river, or stream system	Fish River	Fish River	
U.S. Soil Conservation Service 14-digit watershed code			
Name of state management/river basin	Mobile Bay	Mobile Bay	
U.S. Geological Survey 8-digit hydrologic cataloging unit code	03160205	03160205	
Critical low flow (acute)	N/A cfs	N/A cfs	cfs
Critical low flow (chronic)	N/A cfs	N/A cfs	cfs
Total hardness at critical low flow	N/A mg/L of $CaCO_3$	N/A mg/L of $CaCO_3$	mg/L of $CaCO_3$

Treatment Description

3.8 Provide the following information describing the treatment provided for discharges from each outfall.

	Outfall Number 001	Outfall Number 002	Outfall Number ____
Highest Level of Treatment (check all that apply per outfall)	☐ Primary ☐ Equivalent to secondary ☑ Secondary ☐ Advanced ☐ Other (specify) _____	☐ Primary ☐ Equivalent to secondary ☑ Secondary ☐ Advanced ☐ Other (specify) _____	☐ Primary ☐ Equivalent to secondary ☐ Secondary ☐ Advanced ☐ Other (specify) _____
Design Removal Rates by Outfall			
BOD_5 or $CBOD_5$	85 %	85 %	%
TSS	85 %	85 %	%
Phosphorus	☑ Not applicable %	☑ Not applicable %	☐ Not applicable %
Nitrogen	☑ Not applicable %	☑ Not applicable %	☐ Not applicable %
Other (specify) _____	☑ Not applicable %	☑ Not applicable %	☐ Not applicable %

Treatment Description Continued

3.9 Describe the type of disinfection used for the effluent from each outfall in the table below. If disinfection varies by season, describe below.

	Outfall Number 0011	Outfall Number 0022	Outfall Number ____
Disinfection type	UV	UV	
Seasons used	Year-round	Year-round	
Dechlorination used?	☑ Not applicable ☐ Yes ☐ No	☑ Not applicable ☐ Yes ☐ No	☐ Not applicable ☐ Yes ☐ No

Effluent Testing Data

3.10 Have you completed monitoring for all Table A parameters and attached the results to the application package?

☑ Yes ☐ No

3.11 Have you conducted any WET tests during the 4.5 years prior to the date of the application on any of the facility's discharges or on any receiving water near the discharge points?

☑ Yes ☐ No ➔ SKIP to Item 3.13.

3.12 Indicate the number of acute and chronic WET tests conducted since the last permit reissuance of the facility's discharges by outfall number or of the receiving water near the discharge points.

	Outfall Number 011		Outfall Number 022		Outfall Number ____	
	Acute	Chronic	Acute	Chronic	Acute	Chronic
Number of tests of discharge water	0	1	0	2		
Number of tests of receiving water	0	0	0	0		

3.13 Does the treatment works have a design flow greater than or equal to 0.1 mgd?

☑ Yes ☐ No ➔ SKIP to Item 3.16.

3.14 Does the POTW use chlorine for disinfection, use chlorine elsewhere in the treatment process, or otherwise have reasonable potential to discharge chlorine in its effluent?

☐ Yes ➔ Complete Table B, including chlorine. ☑ No ➔ Complete Table B, omitting chlorine.

3.15 Have you completed monitoring for all applicable Table B pollutants and attached the results to this application package?

☑ Yes ☐ No

3.16 Does one or more of the following conditions apply?

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

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

3.17 Have you completed monitoring for all applicable Table C pollutants and attached the results to this application package?

☑ Yes ☐ No

3.18 Have you completed monitoring for all applicable Table D pollutants required by your NPDES permitting authority and attached the results to this application package?

☑ Yes ☐ No additional sampling required by NPDES permitting authority.

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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 disinfection varies by season, describe below.

	Outfall Number 0023	Outfall Number 0024	Outfall Number ____
Disinfection type	UV	UV	
Seasons used	Year-round	Year-round	
Dechlorination used?	☑ Not applicable ☐ Yes ☐ No	☑ Not applicable ☐ Yes ☐ No	☐ Not applicable ☐ Yes ☐ No

Effluent Testing Data

3.10 Have you completed monitoring for all Table A parameters and attached the results to the application package?
☑ Yes ☐ No

3.11 Have you conducted any WET tests during the 4.5 years prior to the date of the application on any of the facility's discharges or on any receiving water near the discharge points?
☑ Yes ☐ No ➔ SKIP to Item 3.13.

3.12 Indicate the number of acute and chronic WET tests conducted since the last permit reissuance of the facility's discharges by outfall number or of the receiving water near the discharge points.

	Outfall Number ____		Outfall Number ____		Outfall Number ____	
	Acute	Chronic	Acute	Chronic	Acute	Chronic
Number of tests of discharge water						
Number of tests of receiving water						

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

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

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

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

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

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

3.18 Have you completed monitoring for all applicable Table D pollutants required by your NPDES permitting authority and attached the results to this application package?
☑ Yes ☐ No additional sampling required by NPDES permitting authority.

Effluent Testing Data Continued

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

☑ Yes ☐ No ➔ Complete tests and Table E and SKIP to Item 3.26.

3.20 Have you previously submitted the results of the above tests to your NPDES permitting authority?

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

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

Date(s) Submitted (MM/DD/YYYY)	Summary of Results
10/03/2023	4/22/23 Chronic tests; PASSED for each 7/27/23 Chronic tests; PASSED for each 10/3/23 Chronic tests OF0011/0022; PASSED for each

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

☐ Yes ☑ No ➔ SKIP to Item 3.26.

3.23 Describe the cause(s) of the toxicity:

3.24 Has the treatment works conducted a toxicity reduction evaluation?

☐ Yes ☑ No ➔ SKIP to Item 3.26.

3.25 Provide details of any toxicity reduction evaluations conducted.

3.26 Have you completed Table E for all applicable outfalls and attached the results to the application package?

☑ Yes ☐ Not applicable because previously submitted information to the NPDES permitting authority.

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

Industrial Discharges and Hazardous Wastes

4.1 Does the POTW receive discharges from SIUs or NSCIUs?

☐ Yes ☑ No ➔ SKIP to Item 4.7.

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

Number of SIUs	Number of NSCIUs

4.3 Does the POTW have an approved pretreatment program?

☐ Yes ☐ No

4.4 Have you submitted either of the following to the NPDES permitting authority that contains information substantially identical to that required in Table F: (1) a pretreatment program annual report submitted within one year of the application or (2) a pretreatment program?

☐ Yes ☐ No ➔ SKIP to Item 4.6.

4.5 Identify the title and date of the annual report or pretreatment program referenced in Item 4.4. SKIP to Item 4.7.

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

☐ Yes ☐ No

Industrial Discharges and Hazardous Wastes Continued

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

☐ Yes ☑ No ➔ SKIP to Item 4.9.

4.8 If yes, provide the following information:

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

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

☐ Yes ☑ No ➔ SKIP to Section 5.

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

☐ Yes ➔ SKIP to Section 5. ☐ No

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

☐ Yes ☐ No

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

CSO Map and Diagram

5.1 Does the treatment works have a combined sewer system?

☐ Yes ☑ No ➔ SKIP to Section 6.

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

☐ Yes ☐ No

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

☐ Yes ☐ No

CSO Outfall Description

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

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

CSO Monitoring

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

	CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
Rainfall	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
CSO flow volume	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
CSO pollutant concentrations	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Receiving water quality	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
CSO frequency	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Number of storm events	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

CSO Events in Past Year

5.6 Provide the following information for each of your CSO outfalls.

	CSO Outfall Number ____	CSO Outfall Number ____	CSO Outfall Number ____
Number of CSO events in the past year	events	events	events
Average duration per event	hours ☐ Actual or ☐ Estimated	hours ☐ Actual or ☐ Estimated	hours ☐ Actual or ☐ Estimated
Average volume per event	million gallons ☐ Actual or ☐ Estimated	million gallons ☐ Actual or ☐ Estimated	million gallons ☐ Actual or ☐ Estimated
Minimum rainfall causing a CSO event in last year	inches of rainfall ☐ Actual or ☐ Estimated	inches of rainfall ☐ Actual or ☐ Estimated	inches of rainfall ☐ Actual or ☐ Estimated

CSO Receiving Waters

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

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

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

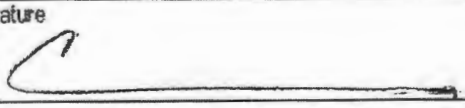
Checklist and Certification Statement

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

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

6.2 **Certification Statement**

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

Name (print or type first and last name)	Official title
Clarence E. Burke, Jr.	Owner/Manager
Signature	Date signed
	12-21-23

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	0011

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TABLE A. EFFLUENT PARAMETERS FOR ALL POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Biochemical oxygen demand ☐ BOD_5 or ☑ $CBOD_5$ (report one)	6.10	mg/L	3.6	mg/L	60	SM-5210B	1 mg/L ☐ ML ☑ MDL
Fecal coliform	100	col/100 mL	16.22	col/100 mL	60	EPA 1604	☐ ML ☐ MDL
Design flow rate	0.97	MGD	0.23	MGD	60		
pH (minimum)	6.0	S.U.					
pH (maximum)	7.2	S.U.					
Temperature (winter)	N/A	N/A	N/A	N/A	N/A		
Temperature (summer)	N/A	N/A	N/A	N/A	N/A		
Total suspended solids (TSS)	45.0	mg/L	18.15	mg/L	60	SM-2440D	0.5 ☐ ML ☑ MDL

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

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	0022

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

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Ammonia (as N)	8.1	mg/L	3.25	mg/L	10	SM 4500 NH3-N	☐ ML ☐ MDL
Chlorine (total residual, TRC)[2]		N/A		n/A	10	N/A	☐ ML ☐ MDL
Dissolved oxygen	7.02	mg/L	8.0	mg/L	10	SM4500 02	☐ ML ☐ MDL
Nitrate/nitrite	14.16	mg/L	26.10	mg/L	10	EPA 353.2	☐ ML ☐ MDL
Kjeldahl nitrogen	4.59	mg/L	10.2	mg/L	10	SM 4500 N-org	☐ ML ☐ MDL
Oil and grease	5.0	mg/L	5.0	mg/L	10		☐ ML ☐ MDL
Phosphorus	6.23	mg/L	12.8	mg/L	10	SM 4500-P	☐ ML ☐ MDL
Total dissolved solids	27.25	mg/L	33.0	mg/L	10		☐ ML ☐ MDL

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

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

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Metals, Cyanide, and Total Phenols							
Hardness (as $CaCO_3$)	57.6	mg/L	51.8	mg/L	3	SM3111B	1 mg/L ☐ ML ☑ MDL
Antimony, total recoverable	0.1	mg/L	0.1	mg/L	3	MS3111B	0.1 mg/L ☐ ML ☑ MDL
Arsenic, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.01 mg/L ☐ ML ☑ MDL
Beryllium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.01 mg/L ☐ ML ☑ MDL
Cadmium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.005 m ☐ ML ☑ MDL
Chromium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.01 mg/L ☐ ML ☑ MDL
Copper, total recoverable	0.0204	mg/L	0.0188	mg/L	3	SM3111B	0.005 m ☐ ML ☑ MDL
Lead, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA200.9	0.01 mg/L ☐ ML ☑ MDL
Mercury, total recoverable	0.00	mg/L	0.00	mg/L	3	EPA245.1	0.001 m ☐ ML ☑ MDL
Nickel, total recoverable	0.01	mg/L	0.01	mg/L	3	SM3111B	0.01 mg/L ☐ ML ☑ MDL
Selenium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA200.9	0.01 mg/L ☐ ML ☑ MDL
Silver, total recoverable	0.01	mg/L	0.01	mg/L	3	SM3111B	0.01 mg/L ☐ ML ☑ MDL
Thallium, total recoverable	0.02	mg/L	0.02	mg/L	3	EPA200.9	0.02 mg/L ☐ ML ☑ MDL
Zinc, total recoverable	0.527	mg/L	0.206	mg/L	3	SM3111B	0.005 m ☐ ML ☑ MDL
Cyanide	0.02	mg/L	0.02	mg/L	3	SM4500CN	0.01 mg/L ☐ ML ☑ MDL
Total phenolic compounds	0.05	mg/L	0.05	mg/L	3	EPA420.4	0.05 mg/L ☐ ML ☑ MDL
Volatile Organic Compounds							
Acrolein	50	ug/L	50	ug/L	3	EPA 624	50 ug/L ☐ ML ☑ MDL
Acrylonitrile	1	ug/L	1	ug/L	3	EPA 624	1 ☐ ML ☑ MDL
Benzene	1	ug/L	1	ug/L	3	EPA 624	1 ☐ ML ☑ MDL
Bromoform	1	ug/L	1	ug/L	3	EPA 624	1 ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Carbon tetrachloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Chlorobenzene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Chlorodibromomethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☑ ML ☑ MDL
Chloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
2-chloroethylvinyl ether	5	ug/L	5	ug/L	3	EPA 624	5 ug/L ☐ ML ☑ MDL
Chloroform	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Dichlorobromomethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1-dichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,2-dichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
trans-1,2-dichloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1-dichloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,2-dichloropropane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,3-dichloropropylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Ethylbenzene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Methyl bromide	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Methyl chloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Methylene chloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1,2,2-tetrachloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Tetrachloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Toluene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1,1-trichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1,2-trichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Trichloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Vinyl chloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Acid-Extractable Compounds							
p-chloro-m-cresol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2-chlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4-dichlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4-dimethylphenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4,6-dinitro-o-cresol	25	ug/L	25	ug/L	3	EPA 625	25 ug/L ☐ ML ☑ MDL
2,4-dinitrophenol	25	ug/L	25	ug/L	3	EPA 625	25 ug/L ☐ ML ☑ MDL
2-nitrophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4-nitrophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Pentachlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Phenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4,6-trichlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Base-Neutral Compounds							
Acenaphthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Acenaphthylene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Anthracene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Benzidine	95	ug/L	95	ug/L	3	EPA 625	95 ug/L ☐ ML ☑ MDL
Benzo(a)anthracene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Benzo(a)pyrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
3,4-benzofluoranthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Benzo(k)fluoranthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-chloroethoxy) methane	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-chloroethyl) ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-chloroisopropyl) ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-ethylhexyl) phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4-bromophenyl phenyl ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Butyl benzyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2-chloronaphthalene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4-chlorophenyl phenyl ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Chrysene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
di-n-butyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
di-n-octyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Dibenzo(a,h)anthracene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,2-dichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,3-dichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,4-dichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
3,3-dichlorobenzidine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Diethyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Dimethyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4-dinitrotoluene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,6-dinitrotoluene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Fluoranthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Fluorene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachlorobutadiene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachlorocyclo-pentadiene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachloroethane	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Indeno(1,2,3-cd)pyrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Isophorone	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Naphthalene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Nitrobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☑ ML ☑ MDL
N-nitrosodi-n-propylamine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☑ ML ☑ MDL
N-nitrosodimethylamine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
N-nitrosodiphenylamine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Phenanthrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Pyrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,2,4-trichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL

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

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Metals, Cyanide, and Total Phenols							
Hardness (as $CaCO_3$)	59.4	mg/L	48.55	mg/L	3	SM3111B	1 mg/L ☐ ML ☑ MDL
Antimony, total recoverable	0.1	mg/L	0.1	mg/L	3	MS3111B	0.1 mg/L ☐ ML ☑ MDL
Arsenic, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.01 mg/L ☐ ML ☑ MDL
Beryllium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.01 mg/L ☐ ML ☑ MDL
Cadmium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.005 mg/L ☐ ML ☑ MDL
Chromium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA 200.9	0.01 mg/L ☐ ML ☑ MDL
Copper, total recoverable	0.322	mg/L	0.322	mg/L	3	SM3111B	0.005 mg/L ☐ ML ☑ MDL
Lead, total recoverable	0.0068	mg/L	0.0068	mg/L	3	EPA200.9	0.01 mg/L ☐ ML ☑ MDL
Mercury, total recoverable	0.00	mg/L	0.00	mg/L	3	EPA245.1	0.001 mg/L ☐ ML ☑ MDL
Nickel, total recoverable	0.01	mg/L	0.01	mg/L	3	SM3111B	0.01 mg/L ☐ ML ☑ MDL
Selenium, total recoverable	0.01	mg/L	0.01	mg/L	3	EPA200.9	0.01 mg/L ☐ ML ☑ MDL
Silver, total recoverable	0.01	mg/L	0.01	mg/L	3	SM3111B	0.01 mg/L ☐ ML ☑ MDL
Thallium, total recoverable	0.02	mg/L	0.02	mg/L	3	EPA200.9	0.02 mg/L ☐ ML ☑ MDL
Zinc, total recoverable	0.527	mg/L	0.206	mg/L	3	SM3111B	0.005 mg/L ☐ ML ☑ MDL
Cyanide	0.02	mg/L	0.02	mg/L	3	SM4500CN	0.01 mg/L ☐ ML ☑ MDL
Total phenolic compounds	0.05	mg/L	0.05	mg/L	3	EPA420.4	0.05 mg/L ☐ ML ☑ MDL
Volatile Organic Compounds							
Acrolein	50	ug/L	50	ug/L	3	EPA 624	50 ug/L ☐ ML ☑ MDL
Acrylonitrile	1	ug/L	1	ug/L	3	EPA 624	1 ☐ ML ☑ MDL
Benzene	1	ug/L	1	ug/L	3	EPA 624	1 ☐ ML ☑ MDL
Bromoform	1	ug/L	1	ug/L	3	EPA 624	1 ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Carbon tetrachloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Chlorobenzene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Chlorodibromomethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☑ ML ☑ MDL
Chloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
2-chloroethylvinyl ether	5	ug/L	5	ug/L	3	EPA 624	5 ug/L ☐ ML ☑ MDL
Chloroform	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Dichlorobromomethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1-dichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,2-dichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
trans-1,2-dichloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1-dichloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,2-dichloropropane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,3-dichloropropylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Ethylbenzene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Methyl bromide	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Methyl chloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Methylene chloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1,2,2-tetrachloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Tetrachloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Toluene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1,1-trichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
1,1,2-trichloroethane	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Trichloroethylene	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Vinyl chloride	1	ug/L	1	ug/L	3	EPA 624	1 ug/L ☐ ML ☑ MDL
Acid-Extractable Compounds							
p-chloro-m-cresol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2-chlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4-dichlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4-dimethylphenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4,6-dinitro-o-cresol	25	ug/L	25	ug/L	3	EPA 625	25 ug/L ☐ ML ☑ MDL
2,4-dinitrophenol	25	ug/L	25	ug/L	3	EPA 625	25 ug/L ☐ ML ☑ MDL
2-nitrophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4-nitrophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Pentachlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Phenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4,6-trichlorophenol	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Base-Neutral Compounds							
Acenaphthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Acenaphthylene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Anthracene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Benzidine	95	ug/L	95	ug/L	3	EPA 625	95 ug/L ☐ ML ☑ MDL
Benzo(a)anthracene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Benzo(a)pyrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
3,4-benzofluoranthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
Benzo(ghi)perylene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Benzo(k)fluoranthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-chloroethoxy) methane	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-chloroethyl) ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-chloroisopropyl) ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Bis (2-ethylhexyl) phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4-bromophenyl phenyl ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Butyl benzyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2-chloronaphthalene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
4-chlorophenyl phenyl ether	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Chrysene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
di-n-butyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
di-n-octyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Dibenzo(a,h)anthracene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,2-dichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,3-dichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,4-dichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
3,3-dichlorobenzidine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Diethyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Dimethyl phthalate	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,4-dinitrotoluene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
2,6-dinitrotoluene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL

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TABLE C. EFFLUENT PARAMETERS FOR SELECTED POTWS

Pollutant	Maximum Daily Discharge		Average Daily Discharge			Analytical Method[1]	ML or MDL (include units)
	Value	Units	Value	Units	Number of Samples		
1,2-diphenylhydrazine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Fluoranthene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Fluorene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachlorobutadiene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachlorocyclo-pentadiene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Hexachloroethane	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Indeno(1,2,3-cd)pyrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Isophorone	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Naphthalene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Nitrobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☑ ML ☑ MDL
N-nitrosodi-n-propylamine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☑ ML ☑ MDL
N-nitrosodimethylamine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
N-nitrosodiphenylamine	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Phenanthrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
Pyrene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL
1,2,4-trichlorobenzene	10	ug/L	10	ug/L	3	EPA 625	10 ug/L ☐ ML ☑ MDL

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

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TABLE 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 0404	Test Number 0711	Test Number 1003
Test species	P. Promelas/ C. Daphnia	P. Promelas/ C. Daphnia	P. Promelas/ C. Daphnia
Age at initiation of test	<24 hour	<24 hours	<24 hours
Outfall number	0022	0022	0022
Date sample collected	04/03/2023	07/10/2023	10/02/2023
Date test started	04/04/2023	07/11/2023	10/03/2023
Duration	7 days	7 days	7 days
Toxicity Test Methods			
Test method number			
Manual title			
Edition number and year of publication			
Page number(s)			
Sample Type			
Check one:	☐ Grab ☑ 24-hour composite	☐ Grab ☑ 24-hour composite	☐ Grab ☑ 24-hour composite
Sample Location			
Check one:	☐ Before Disinfection ☑ After Disinfection ☐ After Dechlorination	☐ Before Disinfection ☑ After Disinfection ☐ After Dechlorination	☐ Before disinfection ☑ After disinfection ☐ After dechlorination
Point in Treatment Process			
Describe the point in the treatment process at which the sample was collected for each test.	Prior to outfall at Bay Branch	Prior to outfall at Bay Branch	Prior to outfall at Bay Branch
Toxicity Type			
Indicate for each test whether the test was performed to asses acute or chronic toxicity, or both. (Check one response.)	☐ Acute ☑ Chronic ☐ Both	☐ Acute ☑ Chronic ☐ Both	☐ Acute ☑ Chronic ☐ Both

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	0022

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

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 0404	Test Number 0711	Test Number 1003
Test Type			
Indicate the type of test performed. (Check one response.)	☐ Static ☑ Static-renewal ☐ Flow-through	☐ Static ☑ Static-renewal ☐ Flow-through	☐ Static ☑ Static-renewal ☐ Flow-through
Source of Dilution Water			
Indicate the source of dilution water. (Check one response.)	☑ Laboratory water ☐ Receiving water	☑ Laboratory water ☐ Receiving water	☑ Laboratory water ☐ Receiving water
If laboratory water, specify type.	MHRW	RCF	NGRW
If receiving water, specify source.			
Type of Dilution Water			
Indicate the type of dilution water. If salt water, specify "natural" or type of artificial sea salts or brine used.	☑ Fresh water ☐ Salt water (specify)	☑ Fresh water ☐ Salt water (specify)	☑ Fresh water ☐ Salt water (specify)
Percentage Effluent Used			
Specify the percentage effluent used for all concentrations in the test series.			
Parameters Tested			
Check the parameters tested.	☑ pH ☐ Salinity ☐ Temperature ☐ Ammonia ☐ Dissolved oxygen	☑ pH ☐ Salinity ☐ Temperature ☐ Ammonia ☐ Dissolved oxygen	☑ pH ☐ Salinity ☐ Temperature ☐ Ammonia ☐ Dissolved oxygen
Acute Test Results			
Percent survival in 100% effluent	%	%	%
LC_{50}			
95% confidence interval	%	%	%
Control percent survival	%	%	%

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	0022

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

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 0404		Test Number 0711		Test Number 1003	
Acute Test Results Continued						
Other (describe)						
Chronic Test Results						
NOEC	%		%		%	
IC_{25}	%		%		%	
Control percent survival	100 %		100 %		100 %	
Other (describe)						
Quality Control/Quality Assurance						
Is reference toxicant data available?	☑ Yes	☐ No	☑ Yes	☐ No	☑ Yes	☐ No
Was reference toxicant test within acceptable bounds?	☑ Yes	☐ No	☑ Yes	☐ No	☑ Yes	☐ No
What date was reference toxicant test run (MM/DD/YYYY)?	04/04/2023		07/11/2023		10/03/2023	
Other (describe)						

This page intentionally left blank.

TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

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

EPA Identification Number	NPDES Permit Number	Facility Name
110010074560	AL0042234	Spanish Fort Sewer WWTP

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TABLE F. INDUSTRIAL DISCHARGE INFORMATION

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

	SIU ___	SIU ___	SIU ___
Under what categories and subcategories is the SIU subject?			
Has the POTW experienced problems (e.g., upsets, pass-through interferences) in the past 4.5 years that are attributable to the SIU?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
If yes, describe.			

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

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

PART 1 — LIMITED BACKGROUND INFORMATION (40 CFR 122.21(c)(2)(ii))

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

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

Facility Information

1.1 Facility name

Mailing address (street or P.O. box)

City or town	State	ZIP code

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

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

City or town	State	ZIP code

1.2 **Ownership Status**

☐ Public—federal ☐ Public—state ☐ Other public (specify)_____

☐ Private ☐ Other (specify) _____

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

Applicant Information

2.1 Is applicant different from entity listed under Item 1.1 above?

☐ Yes ☐ No ➔ SKIP to Item 2.3 (Part 1, Section 2).

2.2 Applicant name

Applicant address (street or P.O. box)

City or town	State	ZIP code

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

2.3 Is the applicant the facility's owner, operator, or both? (Check only one response.)

☐ Owner ☐ Operator ☐ Both

2.4 To which entity should the NPDES permitting authority send correspondence? (Check only one response.)

☐ Facility ☐ Applicant ☐ Facility and applicant (they are one and the same)

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

Sewage Sludge Amount

3.1 Provide the total dry metric tons per the latest 365-day period of sewage sludge generated, treated, used, and disposed of:

Practice	Dry Metric Tons per 365-Day Period
Amount generated at the facility	
Amount treated at the facility	
Amount used (i.e., received from off site) at the facility	
Amount disposed of at the facility	

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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PART 1, SECTION 4. POLLUTANT CONCENTRATIONS (40 CFR 122.21(c)(2)(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) _____			

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
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PART 1, SECTION 5. TREATMENT PROVIDED AT YOUR FACILITY (40 CFR 122.21(c)(2)(ii)(C))

Treatment Provided at Your Facility

5.1 For each sewage sludge use or disposal practice, indicate the amount of sewage sludge used or disposed of, the applicable pathogen class and reduction alternative, and the applicable vector attraction reduction option. Attach additional pages, as necessary.

Use or Disposal Practice (check one)	Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
☐ Land application of bulk sewage ☐ Land application of biosolids (bulk) ☐ Land application of biosolids (bags) ☐ Surface disposal in a landfill ☐ Other surface disposal ☐ Incineration		☐ Not applicable ☐ Class A, Alternative 1 ☐ Class A, Alternative 2 ☐ Class A, Alternative 3 ☐ Class A, Alternative 4 ☐ Class A, Alternative 5 ☐ Class A, Alternative 6 ☐ Class B, Alternative 1 ☐ Class B, Alternative 2 ☐ Class B, Alternative 3 ☐ Class B, Alternative 4 ☐ Domestic septage, pH adjustment	☐ Not applicable ☐ Option 1 ☐ Option 2 ☐ Option 3 ☐ Option 4 ☐ Option 5 ☐ Option 6 ☐ Option 7 ☐ Option 8 ☐ Option 9 ☐ Option 10 ☐ Option 11

5.2 For each of the use and disposal practices specified in Item 5.1, identify the treatment process(es) used at your facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge. (Check all that apply.)

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery
- ☐ Other (specify) _____

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

Sewage Sludge Sent to Other Facilities

6.1 Does the sewage sludge from your facility meet the ceiling concentrations in Table 1 of 40 CFR 503.13, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), *and* one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8)?

☐ Yes ➔ SKIP to Part 1, Section 8 (Certification). ☐ No

6.2 Is sewage sludge from your facility provided to another facility for treatment, distribution, use, or disposal?

☐ Yes ☐ No ➔ SKIP to Part 1, Section 7.

6.3

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

6.4 Which activities does the receiving facility provide? (Check all that apply.)

- ☐ Treatment or blending
- ☐ Sale or give-away in bag or other container
- ☐ Land application
- ☐ Surface disposal
- ☐ Incineration
- ☐ Other (describe)
- ☐ Composting

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

☐ Check here if you have provided separate attachments with this information.

7.1

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

7.2 Site type (check all that apply)

☐ Agricultural	☐ Lawn or home garden	☐ Forest
☐ Surface disposal	☐ Public contact	☐ Incineration
☐ Reclamation	☐ Municipal solid waste landfill	☐ Other (describe)

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

Checklist and Certification Statement

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

Column 1	Column 2
☑ Section 1: Facility Information	☐ w/ attachments
☑ Section 2: Applicant Information	☐ w/ attachments
☑ Section 3: Sewage Sludge Amount	☐ w/ attachments
☐ Section 4: Pollutant Concentrations	☐ w/ attachments
☐ Section 5: Treatment Provided at Your Facility	☐ w/ attachments
☐ Section 6: Sewage Sludge Sent to Other Facilities	☐ w/ attachments
☐ Section 7: Use and Disposal Sites	☐ w/ attachments
☐ Section 8: Checklist and Certification Statement	

Checklist and Certification Statement Continued

8.2 **Certification Statement**

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

Name (print or type first and last name)	Official title	Phone number

Signature	Date signed

PART 1 APPLICANTS STOP HERE.

Submit completed application package to your NPDES permitting authority.

This page intentionally left blank.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

PART 2 — **PERMIT APPLICATION INFORMATION (40 CFR 122.21(q))**

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

PART 2, SECTION 1. GENERAL INFORMATION (40 CFR 122.21(q)(1–7) AND (q)(13))

General Information

All Part 2 applicants must complete this section.

Facility Information

1.1	Facility name: Spanish Fort Sewer WWTP			
	Mailing address (street or P.O. box): 14747 Underwood Road			
	City or town: Summerdale	State: AL	ZIP code: 36580	Phone number: (251) 917-3022
	Contact name (first and last): Clarence E. Burke, Jr.	Title: Owner/Manager	Email address: clarence.ceb@gmail.com	
	Location address (street, route number, or other specific identifier): 12840 Highway 90 ☐ Same as mailing address			
	City or town: Loxley	State: AL	ZIP code: 36551	
1.2	Is this facility a Class I sludge management facility? ☐ Yes ☑ No			
1.3	**Facility Design Flow Rate**	4.25 MGD (See Footnote below)		
1.4	**Total Population Served**	22,108		
1.5	**Ownership Status**: ☐ Public—federal ☐ Public—state ☐ Other public (specify) _____ ☑ Private ☐ Other (specify) _____			

Applicant Information

1.6	Is applicant different from entity listed under Item 1.1 above? ☐ Yes ☑ No → SKIP to Item 1.8 (Part 2, Section 1).			
1.7	Applicant name			
	Applicant mailing address (street or P.O. box)			
	City or town		State	ZIP code
	Contact name (first and last)	Title	Phone number	Email address
1.8	Is the applicant the facility's owner, operator, or both? (Check only one response.) ☐ Operator ☐ Owner ☑ Both			
1.9	To which entity should the NPDES permitting authority send correspondence? (Check only one response.) ☑ Facility ☐ Applicant ☐ Facility and applicant (they are one and the same)			

Footnote
1.3: 1.25 MGD flow rate is the current operation of the combined OF0011 (0.25 MGD) and OF0022 (1.0 MGD). The permitee is also requesting reissuance with OF0023 (3.0 MGD) and OF0024 (4.0 MGD).

1.10	Facility's NPDES permit number ☐ Check here if you do not have an NPDES permit but are otherwise required to submit Part 2 of Form 2S.	AL0042234

1.11 Indicate all other federal, state, and local permits or construction approvals received or applied for that regulate this facility's sewage sludge management practices below.

✓

☐ RCRA (hazardous wastes)	☐ Nonattainment program (CAA)	☐ NESHAPs (CAA)
☐ PSD (air emissions)	☐ Dredge or fill (CWA Section 404)	☑ Other (specify) AL0078565 NPDES
☐ Ocean dumping (MPRSA)	☐ UIC (underground injection of fluids)	AL0049859 NPDES AL0070904

Indian Country

1.12 Does any generation, treatment, storage, application to land, or disposal of sewage sludge from this facility occur in Indian Country?

☐ Yes ☑ No ➔ SKIP to Item 1.14 (Part 2, Section 1) below.

1.13 Provide a description of the generation, treatment, storage, land application, or disposal of sewage sludge that occurs.

Topographic Map

1.14 Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.)

☑ Yes ☐ No

Line Drawing

1.15 Have you attached a line drawing and/or a narrative description that identifies all sewage sludge practices that will be employed during the term of the permit containing all the required information to this application? (See instructions for specific requirements.)

☑ Yes ☐ No

Contractor Information

1.16 Do contractors have any operational or maintenance responsibilities related to sewage sludge generation, treatment, use, or disposal at the facility?

☐ Yes ☑ No ➔ SKIP to Item 1.18 (Part 2, Section 1) below.

1.17 Provide the following information for each contractor.

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

	Contractor 1	Contractor 2	Contractor 3
Contractor company name			
Mailing address (street or P.O. box)			
City, state, and ZIP code			
Contact name (first and last)			
Telephone number			
Email address			

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MUNICIPAL SECTION

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

General Information Continued

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

Pollutant Concentrations

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

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

1.18

Pollutant	Average Monthly Concentration (mg/kg dry weight)	Analytical Method	Detection Level
Arsenic	0.7	6020	0.7
Cadmium	0.7	6020	0.7
Chromium	3.3	6020	3.3
Copper	20.3	6020	3
Lead	3.3	6020	3.3
Mercury	5.2	7471	5.2
Molybdenum	3.3	6020	3.3
Nickel	3.3	6020	3.3
Selenium	3	6020	3
Zinc	186.4	6020	33

Checklist and Certification Statement

1.19 In Column 1 below, mark the sections of Form 2S, Part 2, that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing. Note that not all applicants are required to complete all sections or provide attachments. See Exhibit 2S-2 in the Instructions.

Column 1	Column 2
☑ Section 1 (General Information)	☐ w/ attachments
☑ Section 2 (Generation of Sewage Sludge or Preparation of a Material Derived from Sewage Sludge)	☐ w/ attachments
☑ Section 3 (Land Application of Bulk Sewage Sludge)	☐ w/ attachments
☐ Section 4 (Surface Disposal)	☐ w/ attachments
☐ Section 5 (Incineration)	☐ w/ attachments

1.20 **Certification Statement**

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

Name (print or type first and last name)	Official title
Gerry McManus	CFO / Controller
Signature	Date signed
	4-10-26
Telephone number	[redacted]
251-971-3022	

Upon the request of the NPDES permitting authority, you must submit any other information the authority deems necessary to assess sewage sludge use or disposal practices at your facility and identify appropriate permitting requirements.

PART 2, SECTION 2. GENERATION OF SEWAGE SLUDGE OR PREPARATION OF A MATERIAL DERIVED FROM SEWAGE SLUDGE (40 CFR 122.21(q)(8) THROUGH (12))

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

2.1 Does your facility generate sewage sludge or derive a material from sewage sludge?

☑ Yes ☐ No ➔ SKIP to Part 2, Section 3.

Amount Generated Onsite

2.2 Total dry metric tons per 365-day period generated at your facility: 256

Amount Received from Off Site Facility

2.3 Does your facility receive sewage sludge from another facility for treatment use or disposal?

☐ Yes ☑ No ➔ SKIP to Item 2.7 (Part 2, Section 2) below.

2.4 Indicate the total number of facilities from which you receive sewage sludge for treatment, use, or disposal:

Provide the following information for each of the facilities from which you receive sewage sludge.

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

2.5

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

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

Amount (dry metric tons)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
	☐ Not applicable ☐ Class A, Alternative 1 ☐ Class A, Alternative 2 ☐ Class A, Alternative 3 ☐ Class A, Alternative 4 ☐ Class A, Alternative 5 ☐ Class A, Alternative 6 ☐ Class B, Alternative 1 ☐ Class B, Alternative 2 ☐ Class B, Alternative 3 ☐ Class B, Alternative 4 ☐ Domestic septage, pH adjustment	☐ Not applicable ☐ Option 1 ☐ Option 2 ☐ Option 3 ☐ Option 4 ☐ Option 5 ☐ Option 6 ☐ Option 7 ☐ Option 8 ☐ Option 9 ☐ Option 10 ☐ Option 11

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

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☑ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery
- ☐ Other (specify) _____

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

Treatment Provided at Your Facility

2.8 For each sewage sludge use or disposal practice, indicate the applicable pathogen class and reduction alternative and the applicable vector attraction reduction option provided at your facility. Attach additional pages, as necessary.

Use or Disposal Practice (check one)	Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
☐ Land application of bulk sewage	☐ Not applicable	☐ Not applicable
☐ Land application of biosolids (bulk)	☐ Class A, Alternative 1	☐ Option 1
☐ Land application of biosolids (bags)	☐ Class A, Alternative 2	☐ Option 2
☐ Surface disposal in a landfill	☐ Class A, Alternative 3	☐ Option 3
☑ Other surface disposal	☐ Class A, Alternative 4	☐ Option 4
☐ Incineration	☐ Class A, Alternative 5	☐ Option 5
	☐ Class A, Alternative 6	☐ Option 6
	☐ Class B, Alternative 1	☐ Option 7
	☑ Class B, Alternative 2	☐ Option 8
	☐ Class B, Alternative 3	☐ Option 9
	☐ Class B, Alternative 4	☑ Option 10
	☐ Domestic septage, pH adjustment	☐ Option 11

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

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☑ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery

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

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

Geobags and waste pond

Preparation of Sewage Sludge Meeting Ceiling and Pollutant Concentrations, Class A Pathogen Requirements, and One of Vector Attraction Reduction Options 1 to 8

2.11 Does the sewage sludge from your facility meet the ceiling concentrations in Table 1 of 40 CFR 503.13, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), *and* one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8) and is it land applied?

☐ Yes ☑ No ➔ SKIP to Item 2.14 (Part 2, Section 2) below.

2.12 Total dry metric tons per 365-day period of sewage sludge subject to this subsection that is applied to the land:

2.13 Is sewage sludge subject to this subsection placed in bags or other containers for sale or give-away for application to the land?

☐ Yes ☐ No

☑ Check here once you have completed Items 2.11 to 2.13, then ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

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

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

2.14 Do you place sewage sludge in a bag or other container for sale or give-away for land application?

☐ Yes ☑ No ➔ SKIP to Item 2.17 (Part 2, Section 2) below.

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

2.16 Attach a copy of all labels or notices that accompany the sewage sludge being sold or given away in a bag or other container for application to the land.

☐ Check here to indicate that you have attached all labels or notices to this application package.

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

Shipment Off Site for Treatment or Blending

2.17 Does another facility provide treatment or blending of your facility's sewage sludge? (This question does not pertain to dewatered sludge sent directly to a land application or surface disposal site.)

☐ Yes ☑ No ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

2.18 Indicate the total number of facilities that provide treatment or blending of your facility's sewage sludge. Provide the information in Items 2.19 to 2.26 (Part 2, Section 2) below for each facility.

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

2.19 Name of receiving facility

Mailing address (street or P.O. box)

City or town		State	ZIP code
Contact name (first and last)	Title	Phone number	Email address

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

City or town	State	ZIP code

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

2.21 Does the receiving facility provide additional treatment to reduce pathogens in sewage sludge from your facility or reduce the vector attraction properties of sewage sludge from your facility?

☐ Yes ☐ No ➔ SKIP to Item 2.24 (Part 2, Section 2) below.

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

Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
☐ Not applicable	☐ Not applicable
☐ Class A, Alternative 1	☐ Option 1
☐ Class A, Alternative 2	☐ Option 2
☐ Class A, Alternative 3	☐ Option 3
☐ Class A, Alternative 4	☐ Option 4
☐ Class A, Alternative 5	☐ Option 5
☐ Class A, Alternative 6	☐ Option 6
☐ Class B, Alternative 1	☐ Option 7
☐ Class B, Alternative 2	☐ Option 8
☐ Class B, Alternative 3	☐ Option 9
☐ Class B, Alternative 4	☐ Option 10
☐ Domestic septage, pH adjustment	☐ Option 11

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

2.23 Which treatment process(es) are used at the receiving facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge from your facility? (Check all that apply.)

- ☐ Preliminary operations (e.g., sludge grinding and degritting)
- ☐ Thickening (concentration)
- ☐ Stabilization
- ☐ Anaerobic digestion
- ☐ Composting
- ☐ Conditioning
- ☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)
- ☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
- ☐ Heat drying
- ☐ Thermal reduction
- ☐ Methane or biogas capture and recovery
- ☐ Other (specify) _____

2.24 Attach a copy of any information you provide the receiving facility to comply with the "notice and necessary information" requirement of 40 CFR 503.12(g).

☐ Check here to indicate that you have attached material.

2.25 Does the receiving facility place sewage sludge from your facility in a bag or other container for sale or give-away for application to the land?

☐ Yes ☐ No ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

2.26 Attach a copy of all labels or notices that accompany the product being sold or given away.

☐ Check here to indicate that you have attached material.

☐ Check here once you have completed Items 2.17 to 2.26 (Part 2, Section 2), then ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

Land Application of Bulk Sewage Sludge

2.27 Is sewage sludge from your facility applied to the land?

☐ Yes ☐ No ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

2.28 Total dry metric tons per 365-day period of sewage sludge applied to all land application sites: _____

2.29 Did you identify all land application sites in Part 2, Section 3 of this application?

☐ Yes ☐ No ➔ Submit a copy of the land application plan with your application.

2.30 Are any land application sites located in states other than the state where you generate sewage sludge or derive a material from sewage sludge?

☐ Yes ☐ No ➔ SKIP to Item 2.32 (Part 2, Section 2) below.

2.31 Describe how you notify the NPDES permitting authority for the states where the land application sites are located. Attach a copy of the notification.

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

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

Surface Disposal

2.32 Is sewage sludge from your facility placed on a surface disposal site?

☐ Yes ☑ No ➔ SKIP to Item 2.39 (Part 2, Section 2) below.

2.33 Total dry metric tons of sewage sludge from your facility placed on all surface disposal sites per 365-day period: _____

2.34 Do you own or operate all surface disposal sites to which you send sewage sludge for disposal?

☐ Yes ➔ SKIP to Item 2.39 (Part 2, Section 2) below. ☐ No

2.35 Indicate the total number of surface disposal sites to which you send your sewage sludge. _____

(Provide the information in Items 2.36 to 2.38 of Part 2, Section 2, for each facility.)

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

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

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

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

2.48 Name of landfill

Mailing address (street or P.O. box)

City or town		State	ZIP code
Contact name (first and last)	Title	Phone number	Email address

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

County	County code ☐ Not available	
City or town	State	ZIP code

2.49 Total dry metric tons of sewage sludge from your facility placed in this municipal solid waste landfill per 365-day period:

2.50 List the numbers of all other federal, state, and local permits that regulate the operation of this municipal solid waste landfill.

Permit Number	Type of Permit

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

☐ Check here to indicate you have attached the requested information.

2.52 Does the municipal solid waste landfill comply with applicable criteria set forth in 40 CFR 258?

☐ Yes ☐ No

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

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

Land Application of Bulk Sewage Sludge

3.1 Does your facility apply sewage sludge to land?

☑ Yes ☐ No ➔ SKIP to Part 2, Section 4.

3.2 Do any of the following conditions apply?

- The sewage sludge meets the ceiling concentrations in Table 1 of 40 CFR 503.12, the pollutant concentrations in Table 3 of 40 CFR 503.13, Class A pathogen reduction requirements at 40 CFR 503.32(a), *and* one of the vector attraction reduction requirements at 40 CFR 503.33(b)(1)–(8);
- The sewage sludge is sold or given away in a bag or other container for application to the land; or
- You provide the sewage sludge to another facility for treatment or blending.

☐ Yes ➔ SKIP to Part 2, Section 4. ☑ No

3.3 Complete Section 3 for every site on which the sewage sludge is applied.

☑ Check here if you have attached sheets to the application package for one or more land application sites.

Identification of Land Application Site

3.4 Site name or number
Site No. 1 - Spanish Fort / Site No. 2-Robertsdale

Location address (street, route number, or other specific identifier) ☐ Same as mailing address
12840 Highway 90 / 2311 CR 62

County	County code	☐ Not available
Baldwin		

City or town	State	ZIP code
Loxley / Robertsdale	Alabama	36551/ 36567

Latitude/Longitude of Land Application Site (see instructions)

Latitude	Longitude
30° 38′ 16.36″ N	-87° 48′ 58.85″ W

Method of Determination

☐ USGS map ☐ Field survey ☑ Other (specify) GIS

3.5 Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location.

☑ Check here to indicate you have attached a topographic map for this site.

Owner Information

3.6 Are you the owner of this land application site?

☑ Yes ➔ SKIP to Item 3.8 (Part 2, Section 3) below. ☐ No

3.7 Owner name

Mailing address (street or P.O. box)

City or town		State	ZIP code
Contact name (first and last)	Title	Phone number	Email address

Applier Information

3.8 Are you the person who applies, or who is responsible for application of, sewage sludge to this land application site?

☐ Yes ➔ SKIP to Item 3.10 (Part 2, Section 3) below. ☑ No

3.9 Applier's name
David Flesch / Matthew Conway

Mailing address (street or P.O. box)
12840 Highway 90 / 23211 CR 62

City or town		State	ZIP code
Loxley / Robertdale		AL	36551 / 36567
Contact name (first and last)	Title	Phone number	Email address
David Flesch	Biosolids coordinator	(251) 747-2977	david.flesch@baldwincounty.c

Land Application of Bulk Sewage Sludge Continued

Site Type

3.10 Type of land application:

- ☑ Agricultural land
- ☐ Forest
- ☐ Reclamation site
- ☐ Public contact site
- ☐ Other (describe)

Crop or Other Vegetation Grown on Site

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

Crops are rotated based on demand and soil (oats, hay, corn/maize, milo)

3.12 What is the nitrogen requirement for this crop or vegetation?

Ranges from 1 lb/bu to 3 lb/bu

Vector Attraction Reduction

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

- ☑ Yes
- ☐ No ➔ SKIP to Item 3.16 (Part 2, Section 3) below.

3.14 Indicate which vector attraction reduction option is met. (Check only one response.)

- ☐ Option 9 (injection below land surface)
- ☑ Option 10 (incorporation into soil within 6 hours)

3.15 Describe any treatment processes used at the land application site to reduce vector attraction properties of sewage sludge.

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

Cumulative Loadings and Remaining Allotments

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

- ☐ Yes
- ☑ No ➔ SKIP to Part 2, Section 4.

3.17 Have you contacted the NPDES permitting authority in the state where the bulk sewage sludge subject to CPLRs will be applied to ascertain whether bulk sewage sludge subject to CPLRs has been applied to this site on or since July 20, 1993?

- ☐ Yes
- ☐ No ➔ Sewage sludge subject to CPLRs may not be applied to this site. SKIP to Part 2, Section 4.

3.18 Provide the following information about your NPDES permitting authority:

NPDES permitting authority name	
Contact person	
Telephone number	
Email address	

3.19 Based on your inquiry, has bulk sewage sludge subject to CPLRs been applied to this site since July 20, 1993?

- ☐ Yes
- ☐ No ➔ SKIP to Part 2, Section 4.

3.20 Provide the following information for every facility other than yours that is sending, or has sent, bulk sewage sludge subject to CPLRs to this site since July 20, 1993. If more than one such facility sends sewage sludge to this site, attach additional pages as necessary.

- ☐ Check here to indicate that additional pages are attached.

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

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

Surface Disposal

4.1 Do you own or operate a surface disposal site?

☐ Yes ☑ No ➔ SKIP to Part 2, Section 5.

4.2 Complete all items in Section 4 for each active sewage sludge unit that you own or operate.

☐ Check here to indicate that you have attached material to the application package for one or more active sewage sludge units.

Information on Active Sewage Sludge Units

4.3 Unit name or number

Mailing address (street or P.O. box)

City or town		State	ZIP code
Contact name (first and last)	Title	Phone number	Email address

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

County		County code ☐ Not available	
City or town		State	ZIP code

Latitude/Longitude of Active Sewage Sludge Unit (see instructions)

Latitude	Longitude
° ' "	° ' "

Method of Determination

☐ USGS map ☐ Field survey ☐ Other (specify) _____

4.4 Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the site location.

☐ Check here to indicate that you have completed and attached a topographic map.

4.5	Total dry metric tons of sewage sludge placed on the active sewage sludge unit per 365-day period:	
4.6	Total dry metric tons of sewage sludge placed on the active sewage sludge unit over the life of the unit:	

4.7 Does the active sewage sludge unit have a liner with a maximum permeability of 1×10^{-7} centimeters per second (cm/sec)?

☐ Yes ☐ No ➔ SKIP to Item 4.9 (Part 2, Section 4) below.

4.8 Describe the liner.

☐ Check here to indicate that you have attached a description to the application package.

4.9 Does the active sewage sludge unit have a leachate collection system?

☐ Yes ☐ No ➔ SKIP to Item 4.11 (Part 2, Section 4) below.

4.10 Describe the leachate collection system and the method used for leachate disposal and provide the numbers of any federal, state, or local permit(s) for leachate disposal.

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

Surface Disposal Continued

4.11	Is the boundary of the active sewage sludge unit less than 150 meters from the property line of the surface disposal site? ☐ Yes ☐ No ➔ SKIP to Item 4.13 (Part 2, Section 4) below.	
4.12	Provide the actual distance in meters:	meters
4.13	Remaining capacity of active sewage sludge unit in dry metric tons:	dry metric tons
4.14	Anticipated closure date for active sewage sludge unit, if known (MM/DD/YYYY):	
4.15	Attach a copy of any closure plan that has been developed for this active sewage sludge unit. ☐ Check here to indicate that you have attached a copy of the closure plan to the application package.	

Sewage Sludge from Other Facilities

4.16	Is sewage sludge sent to this active sewage sludge unit from any facilities other than your facility? ☐ Yes ☐ No ➔ SKIP to Item 4.21 (Part 2, Section 4) below.	
4.17	Indicate the total number of facilities (other than your facility) that send sewage sludge to this active sewage sludge unit. (Complete Items 4.18 to 4.20 directly below for each such facility.) ☐ Check here to indicate that you have attached responses for each facility to the application package.	

4.18

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

4.19 Indicate the pathogen class and reduction alternative and the vector attraction reduction option met for the sewage sludge before leaving the other facility.

Pathogen Class and Reduction Alternative	Vector Attraction Reduction Option
☐ Not applicable	☐ Not applicable
☐ Class A, Alternative 1	☐ Option 1
☐ Class A, Alternative 2	☐ Option 2
☐ Class A, Alternative 3	☐ Option 3
☐ Class A, Alternative 4	☐ Option 4
☐ Class A, Alternative 5	☐ Option 5
☐ Class A, Alternative 6	☐ Option 6
☐ Class B, Alternative 1	☐ Option 7
☐ Class B, Alternative 2	☐ Option 8
☐ Class B, Alternative 3	☐ Option 9
☐ Class B, Alternative 4	☐ Option 10
☐ Domestic septage, pH adjustment	☐ Option 11

4.20 Which treatment process(es) are used at the other facility to reduce pathogens in sewage sludge or reduce the vector attraction properties of sewage sludge before leaving the other facility? (Check all that apply.)

☐ Preliminary operations (e.g., sludge grinding and degritting)	☐ Thickening (concentration)
☐ Stabilization	☐ Anaerobic digestion
☐ Composting	☐ Conditioning
☐ Disinfection (e.g., beta ray irradiation, gamma ray irradiation, pasteurization)	☐ Dewatering (e.g., centrifugation, sludge drying beds, sludge lagoons)
☐ Heat drying	☐ Thermal reduction
☐ Methane or biogas capture and recovery	☐ Other (specify) _____

Surface Disposal Continued

Vector Attraction Reduction

4.21 Which vector attraction reduction option, if any, is met when sewage sludge is placed on this active sewage sludge unit?

- ☐ Option 9 (Injection below and surface)
- ☐ Option 10 (Incorporation into soil within 6 hours)
- ☐ Option 11 (Covering active sewage sludge unit daily)
- ☐ None

4.22 Describe any treatment processes used at the active sewage sludge unit to reduce vector attraction properties of sewage sludge.

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

Groundwater Monitoring

4.23 Is groundwater monitoring currently conducted at this active sewage sludge unit, or are groundwater monitoring data otherwise available for this active sewage sludge unit?

- ☐ Yes
- ☐ No ➔ SKIP to Item 4.26 (Part 2, Section 4) below.

4.24 Provide a copy of available groundwater monitoring data.

☐ Check here to indicate you have attached the monitoring data.

4.25 Describe the well locations, the approximate depth to groundwater, and the groundwater monitoring procedures used to obtain these data.

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

4.26 Has a groundwater monitoring program been prepared for this active sewage sludge unit?

- ☐ Yes
- ☐ No ➔ SKIP to Item 4.28 (Part 2, Section 4) below.

4.27 Submit a copy of the groundwater monitoring program with this permit application.

☐ Check here to indicate you have attached the monitoring program.

4.28 Have you obtained a certification from a qualified groundwater scientist that the aquifer below the active sewage sludge unit has not been contaminated?

- ☐ Yes
- ☐ No ➔ SKIP to Item 4.30 (Part 2, Section 4) below.

4.29 Submit a copy of the certification with this permit application.

☐ Check here to indicate you have attached the certification to the application package.

Site-Specific Limits

4.30 Are you seeking site-specific pollutant limits for the sewage sludge placed on the active sewage sludge unit?

- ☐ Yes
- ☐ No ➔ SKIP to Part 2, Section 5.

4.31 Submit information to support the request for site-specific pollutant limits with this application.

☐ Check here to indicate you have attached the requested information.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

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

Incineration

Incinerator Information

5.1 Do you fire sewage sludge in a sewage sludge incinerator?

☐ Yes ☑ No ➔ SKIP to END.

5.2 Indicate the total number of incinerators used at your facility. (Complete the remainder of Section 5 for each such incinerator.)

☐ Check here to indicate that you have attached information for one or more incinerators.

5.3 Incinerator name or number

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

County	County code ☐ Not available	
City or town	State	ZIP code

Latitude/Longitude of Incinerator (see instructions)

Latitude	Longitude
° ' "	° ' "

Method of Determination

☐ USGS map ☐ Field survey ☐ Other (specify) _____

Amount Fired

5.4 Dry metric tons per 365-day period of sewage sludge fired in the sewage sludge incinerator:

Beryllium NESHAP

5.5 Submit information, test data, and a description of measures taken that demonstrate whether the sewage sludge incinerated is beryllium-containing waste and will continue to remain as such.

☐ Check here to indicate that you have attached this material to the application package.

5.6 Is the sewage sludge fired in this incinerator "beryllium-containing waste" as defined at 40 CFR 61.31?

☐ Yes ☐ No ➔ SKIP to Item 5.8 (Part 2, Section 5) below.

5.7 Submit with this application a complete report of the latest beryllium emission rate testing *and* documentation of ongoing incinerator operating parameters indicating that the NESHAP emission rate limit for beryllium has been and will continue to be met.

☐ Check here to indicate that you have attached this information.

Mercury NESHAP

5.8 Is compliance with the mercury NESHAP being demonstrated via stack testing?

☐ Yes ☐ No ➔ SKIP to Item 5.11 (Part 2, Section 5) below.

5.9 Submit a complete report of stack testing and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit.

☐ Check here to indicate that you have attached this information.

5.10 Provide copies of mercury emission rate tests for the two most recent years in which testing was conducted.

☐ Check here to indicate that you have attached this information.

5.11 Do you demonstrate compliance with the mercury NESHAP by sewage sludge sampling?

☐ Yes ☐ No ➔ SKIP to Item 5.13 (Part 2, Section 5) below.

5.12 Submit a complete report of sewage sludge sampling and documentation of ongoing incinerator operating parameters indicating that the incinerator has met and will continue to meet the mercury NESHAP emission rate limit.

☐ Check here to indicate that you have attached this information.

Incineration Continued

Dispersion Factor

5.13	Dispersion factor in micrograms/cubic meter per gram/second:	
5.14	Name and type of dispersion model:	
5.15	Submit a copy of the modeling results and supporting documentation. ☐ Check here to indicate that you have attached this information.	

Control Efficiency

5.16 Provide the control efficiency, in hundredths, for each of the pollutants listed below.

Pollutant	Control Efficiency, in Hundredths
Arsenic	
Cadmium	
Chromium	
Lead	
Nickel	

5.17	Attach a copy of the results or performance testing and supporting documentation (including testing dates). ☐ Check here to indicate that you have attached this information.	

Risk-Specific Concentration for Chromium

5.18	Provide the risk-specific concentration (RSC) used for chromium in micrograms per cubic meter:	
5.19	Was the RSC determined via Table 2 in 40 CFR 503.43? ☐ Yes ☐ No ➔ SKIP to Item 5.21 (Part 2, Section 5) below.	
5.20	Identify the type of incinerator used as the basis. ☐ Fluidized bed with wet scrubber ☐ Other types with wet scrubber ☐ Fluidized bed with wet scrubber and wet electrostatic precipitator ☐ Other types with wet scrubber and wet electrostatic precipitator	
5.21	Was the RSC determined via Table 6 in 40 CFR 503.43 (site-specific determination)? ☐ Yes ☐ No ➔ SKIP to Item 5.23 (Part 2, Section 5) below.	
5.22	Provide the decimal fraction of hexavalent chromium concentration to total chromium concentration in stack exit gas:	
5.23	Attach the results of incinerator stack tests for hexavalent and total chromium concentrations, including the date(s) of any test(s), with this application. ☐ Check here to indicate that you have attached this information. ☐ Not applicable	

Incinerator Parameters

5.24	Do you monitor total hydrocarbons (THC) in the exit gas of the sewage sludge incinerator? ☐ Yes ☐ No	
5.25	Do you monitor carbon monoxide (CO) in the exit gas of the sewage sludge incinerator? ☐ Yes ☐ No	
5.26	Indicate the type of sewage sludge incinerator.	
5.27	Incinerator stack height in meters:	
5.28	Indicate whether the value submitted in Item 5.27 is (check only one response): ☐ Actual stack height ☐ Creditable stack height	

Incineration Continued

Performance Test Operating Parameters

5.29	Maximum performance test combustion temperature:	
5.30	Performance test sewage sludge feed rate, in dry metric tons/day	
5.31	Indicate whether value submitted in item 5.30 is (check only one response): ☐ Average use ☐ Maximum design	
5.32	Attach supporting documents describing how the feed rate was calculated. ☐ Check here to indicate that you have attached this information.	
5.33	Submit information documenting the performance test operating parameters for the air pollution control device(s) used for this sewage sludge incinerator. ☐ Check here to indicate that you have attached this information.	

Monitoring Equipment

5.34 List the equipment in place to monitor the listed parameters.

Parameter	Equipment in Place for Monitoring
Total hydrocarbons or carbon monoxide	
Percent oxygen	
Percent moisture	
Combustion temperature	
Other (describe)	

Air Pollution Control Equipment

5.35 List all air pollution control equipment used with this sewage sludge incinerator.

☐ Check here if you have attached the list to the application package for the noted incinerator.

END of PART 2

Submit completed application package to your NPDES permitting authority.

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

Form 2F NPDES

EPA

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

STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

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

Outfall Location

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

Outfall Number	Receiving Water Name	Latitude	Longitude
OF003S	Fish River	30° 37′ 59.1″ N	87° 48′ 39.6″ W
OF004S	Fish River	30° 37′ 51.9″ N	87° 48′ 50.3″ W
OF005S	Bay Branch	30° 37′ 58.9″ N	87° 49′ 7.4″ W
OF006S	Bay Branch	30° 37′ 59.4″ N	87° 49′ 7.6″ W
OF007S	Bay Branch	30° 38′ 8.5″ N	87° 48′ 58.3″ W
OF008S	Fish River	30° 38′ 4.6″ N	87° 48′ 56.4″ W

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

Improvements

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

☐ Yes ☑ No → SKIP to Section 3.

2.2 Briefly identify each applicable project in the table below.

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

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

☐ Yes ☐ No

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EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

Site Drainage Map

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

☑ Yes ☐ No

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

Pollutant Sources

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

Outfall Number	Impervious Surface Area (within a mile radius of the facility)		Total Surface Area Drained (within a mile radius of the facility)	
OF003S	0.6	*specify units* ACRES	38	*specify units* ACRES
OF004S	0.46	*specify units* ACRES	25	*specify units* ACRES
OF005S	1	*specify units* ACRES	37	*specify units* ACRES
OF006S	0.25	*specify units* ACRES	12	*specify units* ACRES
OF007S	0.1	*specify units* ACRES	17.8	*specify units* ACRES
OF008S	0.3	*specify units* ACRES	3.1	*specify units* ACRES

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

There are no significant materials treated, stored or disposed in a manner to allow exposure to storm water. Any sludge application is immediately furrowed under and no pesticides, herbicides or fertilizers are used in the operations.

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

Stormwater Treatment		
Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)
ALL	There are no pollutants allowed to discharge with the storm water. The wastewater	
	treatment from the collection system does not come in contact with the storm water.	
	Therefore, no pollutants will be allowed to flow into the storm water runoff. Employee	
	training on the prohibition of wastewater and wastewater byproducts co-mingling with	
	the storm water is performed annually.	

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EPA Identification Number	NPDES Permit Number	Facility Name
110010074560	AL0042234	Spanish Fort Sewer WWTP

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OMB No. 2040-0004

Form 2F NPDES

EPA

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

STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

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

Outfall Location

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

Outfall Number	Receiving Water Name	Latitude	Longitude
OF009S	Bay Branch	30° 38′ 0.5″ N	87° 49′ 13.0″ W
OF010S	Bay Branch	30° 38′ 0.4″ N	87° 49′ 11.9″ W
		° ′ ″ N	° ′ ″ W
		° ′ ″ N	° ′ ″ W
		° ′ ″ N	° ′ ″ W
		° ′ ″ N	° ′ ″ W

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

Improvements

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

☐ Yes ☑ No ➔ SKIP to Section 3.

2.2 Briefly identify each applicable project in the table below.

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

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

☐ Yes ☐ No

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EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

Site Drainage Map

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

☑ Yes ☐ No

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

Pollutant Sources

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

Outfall Number	Impervious Surface Area (within a mile radius of the facility)		Total Surface Area Drained (within a mile radius of the facility)	
OF009S	0.6	*specify units* ACRES	38	*specify units* ACRES
OF010S	0.46	*specify units* ACRES	25	*specify units* ACRES
		specify units ACRES		*specify units* ACRES
		specify units ACRES		*specify units* ACRES
		specify units ACRES		*specify units* ACRES
		specify units ACRES		*specify units* ACRES

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

There are no significant materials treated, stored or disposed in a manner to allow exposure to storm water. Any sludge application is immediately furrowed under and no pesticides, herbicides or fertilizers are used in the operations.

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

Stormwater Treatment		
Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F–1 (list)
ALL	There are no pollutants allowed to discharge with the storm water. The wastewater	
	treatment from the collection system does not come in contact with the storm water.	
	Therefore, no pollutants will be allowed to flow into the storm water runoff. Employee	
	training on the prohibition of wastewater and wastewater byproducts co-mingling with	
	the storm water is performed annually.	

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EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

Site Drainage Map

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

☑ Yes ☐ No

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

Pollutant Sources

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

Outfall Number	Impervious Surface Area (within a mile radius of the facility)		Total Surface Area Drained (within a mile radius of the facility)	
DP-7	0.2	*specify units* ACRES	11.7	*specify units* ACRES
DP-8	0.1	*specify units* ACRES	1.8	*specify units* ACRES
		specify units		*specify units*
		specify units		*specify units*
		specify units		*specify units*
		specify units		*specify units*

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

There are no significant materials treated, stored or disposed in a manner to allow exposure to storm water. Any sludge application is immediately furrowed under and no pesticides, herbicides or fertilizers are used in the operations.

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

Stormwater Treatment		
Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)
ALL	There are no pollutants allowed to discharge with the storm water. The wastewater	
	treatment from the collection system does not come in contact with the storm water.	
	Therefore, no pollutants will be allowed to flow into the storm water runoff. Employee	
	training on the prohibition of wastewater and wastewater byproducts co-mingling with	
	the storm water is performed annually.	

EPA Identification Number	NPDES Permit Number	Facility Name
110010074560	AL0042234	Spanish Fort Sewer WWTP

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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
Clarence E. Burke, Jr.	Owner
Signature	**Date signed**

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
	N/A		

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.

To date, no significant leaks or spill have occurred that would impact stormwater runoff.

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

Discharge Information

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

7.1 Is this a new source or new discharge?

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

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

Tables A, B, C, and D

7.2 Have you completed Table A for each outfall?

☑ Yes ☐ No

Discharge Information Continued

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

Discharge Information Continued

Used or Manufactured Toxics

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

☐ Yes ☑ No ➔ SKIP to Section 8.

7.19 List the pollutants below, including TCDD if applicable.

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

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

Biological Toxicity Testing Data

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

☐ Yes ☑ No ➔ SKIP to Section 9.

8.2 Identify the tests and their purposes below.

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

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

Contract Analysis Information

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

☑ Yes ☐ No ➔ SKIP to Section 10.

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

	Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
Name of laboratory/firm	Pace Analytical		
Laboratory address	4320 Midmost Drive Mobile, AL 36609		
Phone number	(251) 344-9106		
Pollutant(s) analyzed	E.coli; Oil and Grease; Total Suspended Solids (TSS); pH at 25ºC; CBOD; 5-day Total Nitrogen Kjeldahl; Phosphorus; Nitrogen; Ammonia; Nitrogen; NO2+NO3		

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
110010074560	AL0042234	Spanish Fort Sewer WWTP	

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

Checklist and Certification Statement

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

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

10.2 **Certification Statement**

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

Name (print or type first and last name)	Official title
Clarence E. Burke, Jr.	owner manager
Signature	Date signed
	12-21-23

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	OF008S

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	5.0 mg/L		5.0 mg/L		1	DMR Data
2.	Biochemical oxygen demand (BOD_5)	3.7 mg/L	N/A	3.7 mg/L	N/A	1	DMR Data
3.	Chemical oxygen demand (COD)	N/A	N/A	N/A	N/A	1	DMR Data
4.	Total suspended solids (TSS)	9.0 mg/L	N/A	9.0 mg/L	N/A	1	DMR Data
5.	Total phosphorus	0.15 mg/L	N/A	0.15 mg/L	N/A	1	DMR Data
6.	Total Kjeldahl nitrogen (TKN)	2.2 mg/L	N/A	2.2 mg/L	N/A	1	DMR Data
7.	Total nitrogen (as N)	1.0 mg/L	N/A	1.0 mg/L	N/A	1	DMR Data
8.	pH (minimum)	5.8		5.8		1	DMR Data
	pH (maximum)	5.8		5.8		1	DMR Data

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

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	OF009S

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	5.1 mg/L		5.1 mg/L		1	DMR Data
2.	Biochemical oxygen demand (BOD_5)	1.3 mg/L	N/A	1.3 mg/L	N/A	1	DMR Data
3.	Chemical oxygen demand (COD)	N/A	N/A	N/A	N/A	1	DMR Data
4.	Total suspended solids (TSS)	14.0 mg/L	N/A	14.0 mg/L	N/A	1	DMR Data
5.	Total phosphorus	0.34 mg/L	N/A	0.34 mg/L	N/A	1	DMR Data
6.	Total Kjeldahl nitrogen (TKN)	0.86 mg/L	N/A	0.86 mg/L	N/A	1	DMR Data
7.	Total nitrogen (as N)	0.10 mg/L	N/A	0.10 mg/L	N/A	1	DMR Data
8.	pH (minimum)	7.17		7.17		1	DMR Data
	pH (maximum)	7.17		7.17		1	DMR Data

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

EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	OF010S

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	5.1 mg/L		5.1 mg/L		1	DMR Data
2.	Biochemical oxygen demand (BOD_5)	1.2 mg/L	N/A	1.2 mg/L	N/A	1	DMR Data
3.	Chemical oxygen demand (COD)	N/A	N/A	N/A	N/A	1	DMR Data
4.	Total suspended solids (TSS)	28.0 mg/L	N/A	28.0 mg/L	N/A	1	DMR Data
5.	Total phosphorus	0.11 mg/L	N/A	0.11 mg/L	N/A	1	DMR Data
6.	Total Kjeldahl nitrogen (TKN)	0.68 mg/L	N/A	0.68 mg/L	N/A	1	DMR Data
7.	Total nitrogen (as N)	0.10 mg/L	N/A	0.10 mg/L	N/A	1	DMR Data
8.	pH (minimum)	8.03		8.03		1	DMR Data
	pH (maximum)	8.03		8.03		1	DMR Data

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

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	DP-7

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

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

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

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

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	DP-7

Form Approved 03/05/19
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TABLE C. TOXIC POLLUTANTS, CERTAIN HAZARDOUS SUBSTANCES, AND ASBESTOS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(B) and (vii))[1]

List each pollutant shown in Exhibits 2F–2, 2F–3, and 2F–4 that you know or have reason to believe is present. Complete one table for each outfall. See the instructions for additional details and requirements.

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

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

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EPA Identification Number	NPDES Permit Number	Facility name	Outfall Number
110010074560	AL0042234	Spanish Fort Sewer WWTP	OF009S

Form Approved 03/05/19
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TABLE D. STORM EVENT INFORMATION (40 CFR 122.26(c)(1)(i)(E)(6))

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

Date of Storm Event	Duration of Storm Event (in hours)	Total Rainfall During Storm Event (in inches)	Number of Hours Between Beginning of Storm Measured and End of Previous Measurable Rain Event	Maximum Flow Rate During Rain Event (in gpm or specify units)	Total Flow from Rain Event (in gallons or specify units)
04/27/2023	6.0	1.35	> 24 hours	1.511 MGD	1511000 gallons

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

Rational Method

REPRESENTATIVE STORM WATER OUTFALL CERTIFICATION
ADEM Form 450

This is to certify that the **storm water** outfalls located at:

DSN DP-1 Latitude (30)° (37)' (59.1)" N and Longitude (87)° (48)' (39.6)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

are associated with similar industrial activities such that the characteristics of storm water runoff are essentially the same. Therefore, Spanish Fort Sewer WWTP AL0042234 (Facility Name) requests that it be allowed to sample the outfall(s) located at:

DSN DP-5 Latitude (30)° (38)' (8.5)" N and Longitude (87)° (48)' (58.3)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

as the representative outfall(s).

This form must be signed by the official representative of the facility who is: the owner, the sole proprietor of a sole proprietorship, a general partner for a partnership, or by a ranking elected official or other duly authorized representative for a unit of government or an executive officer of **at least the level of vice president** for a corporation, having overall responsibility for the operation of the facility.

CERTIFICATION: I certify that I have chosen the point(s) that is/are most likely or as likely to contain potential pollutants from the area. 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 or imprisonment for knowing violations.

Permit Number (*if already a permitted facility): AL0042234

Name and Official title (type or print): Gerry McManus- Responsible Official, Baldwin County Sewer Service

Address: 14747 Underwood Road, Summerdale, AL 36580

Phone Number: (251) 971-3022

Signature: G McManus

Please print name: Gerry McManus

Date signed: 2.12.26

Email address: gerry@baldwincountysewer.com

***If this is a modification to an existing permit, then a modification fee must also be included.**

INSTRUCTIONS

One certification should be submitted for each set of points from the same drainage area for which you want to designate a representative sampling point or points.

If you have more than one drainage area, you must submit a site drawing designating the drainage areas and all points of discharge with the chosen representative sampling points designated in each area.

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REPRESENTATIVE STORM WATER OUTFALL CERTIFICATION
ADEM Form 450

This is to certify that the **storm water** outfalls located at:

DSN DP-2 Latitude (30)° (37)' (51.9)" N and Longitude (87)° (48)' (50.3)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

are associated with similar industrial activities such that the characteristics of storm water runoff are essentially the same. Therefore, Spanish Fort Sewer WWTP AL0042234 (Facility Name) requests that it be allowed to sample the outfall(s) located at:

DSN DP-6 Latitude (30)° (38)' (4.8)" N and Longitude (87)° (48)' (56.4)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

as the representative outfall(s).

This form must be signed by the official representative of the facility who is: the owner, the sole proprietor of a sole proprietorship, a general partner for a partnership, or by a ranking elected official or other duly authorized representative for a unit of government or an executive officer of **at least the level of vice president** for a corporation, having overall responsibility for the operation of the facility.

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Name and Official title (type or print): Gerry McManus- Responsible Official, Baldwin County Sewer Service

Address: 14747 Underwood Road, Summerdale, AL 36580

Phone Number: (251) 971-3022

Signature: [signature]

Please print name: Gerry McManus

Date signed: 2.12.26

Email address: gerry@baldwincountysewer.com

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REPRESENTATIVE STORM WATER OUTFALL CERTIFICATION
ADEM Form 450

This is to certify that the **storm water** outfalls located at:

DSN DP-3 Latitude (30) ° (37) ' (58.9) " N and Longitude (87) ° (49) ' (7.4) " W

DSN _____ Latitude (_____) ° (_____) ' (_____) " N and Longitude (_____) ° (_____) ' (_____) " W

DSN _____ Latitude (_____) ° (_____) ' (_____) " N and Longitude (_____) ° (_____) ' (_____) " W

DSN _____ Latitude (_____) ° (_____) ' (_____) " N and Longitude (_____) ° (_____) ' (_____) " W

are associated with similar industrial activities such that the characteristics of storm water runoff are essentially the same. Therefore, Spanish Fort Sewer WWTP AL0042234 (Facility Name) requests that it be allowed to sample the outfall(s) located at:

DSN DP-7 Latitude (30) ° (38) ' (0.5) " N and Longitude (87) ° (49) ' (13.0) " W

DSN _____ Latitude (_____) ° (_____) ' (_____) " N and Longitude (_____) ° (_____) ' (_____) " W

DSN _____ Latitude (_____) ° (_____) ' (_____) " N and Longitude (_____) ° (_____) ' (_____) " W

as the representative outfall(s).

This form must be signed by the official representative of the facility who is: the owner, the sole proprietor of a sole proprietorship, a general partner for a partnership, or by a ranking elected official or other duly authorized representative for a unit of government or an executive officer of **at least the level of vice president** for a corporation, having overall responsibility for the operation of the facility.

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Permit Number (*if already a permitted facility): AL0042234

Name and Official title (type or print): Gerry McManus, Responsible Official- Baldwin County Sewer Service

Address: 14747 Underwood Road, Summerdale, AL 36580

Phone Number: (251) 971-3022

Signature: [signature]

Please print name: Gerry McManus

Date signed: 2.12.26

Email address: gerry@baldwincountysewer.com

***If this is a modification to an existing permit, then a modification fee must also be included.**

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REPRESENTATIVE STORM WATER OUTFALL CERTIFICATION
ADEM Form 450

This is to certify that the **storm water** outfalls located at:

DSN DP-4 Latitude (30)° (37)' (59.4)" N and Longitude (87)° (49)' (7.6)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

are associated with similar industrial activities such that the characteristics of storm water runoff are essentially the same. Therefore, Spanish Fort Sewer WWTP AL0042234 (Facility Name) requests that it be allowed to sample the outfall(s) located at:

DSN DP-8 Latitude (30)° (38)' (0.4)" N and Longitude (87)° (49)' (11.9)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

DSN _____ Latitude (_____)° (_____)' (_____)" N and Longitude (_____)° (_____)' (_____)" W

as the representative outfall(s).

This form must be signed by the official representative of the facility who is: the owner, the sole proprietor of a sole proprietorship, a general partner for a partnership, or by a ranking elected official or other duly authorized representative for a unit of government or an executive officer of **at least the level of vice president** for a corporation, having overall responsibility for the operation of the facility.

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Name and Official title (type or print): Gerry McManus, Responsible Official- Baldwin County Sewer Service

Address: 14747 Underwood Road, Summerdale, AL 36580

Phone Number: (251) 971-3022

Signature: _____

Please print name: Gerry McManus

Date signed: 2.12.26

Email address: gerry@baldwincountysewer.com

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Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 06/29/2021
Date Received: 06/22/2021

Project: Spanish Fort 0022- Form 2A
Pace Project No.: 20212371

Sample: Spanish Fort 0022-Comp **Lab ID: 20212371001** Collected: 06/22/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	10.0	06/24/21 18:48	
EPA 200.7	Beryllium	ND	ug/L	5.0	06/24/21 18:48	
EPA 200.7	Cadmium	ND	ug/L	5.0	06/24/21 18:48	
EPA 200.7	Chromium	ND	ug/L	10.0	06/24/21 18:48	
EPA 200.7	Copper	ND	ug/L	10.0	06/24/21 18:48	
EPA 200.7	Iron	**218**	ug/L	50.0	06/24/21 18:48	
EPA 200.7	Lead	ND	ug/L	5.0	06/24/21 18:48	
EPA 200.7	Nickel	ND	ug/L	40.0	06/24/21 18:48	
EPA 200.7	Selenium	ND	ug/L	20.0	06/24/21 18:48	
EPA 200.7	Silver	ND	ug/L	10.0	06/24/21 18:48	
EPA 200.7	Thallium	ND	ug/L	10.0	06/24/21 18:48	
EPA 200.7	Total Hardness	**46700**	ug/L	2000	06/24/21 18:48	
EPA 200.7	Zinc	**116**	ug/L	20.0	06/24/21 18:48	
EPA 625	Acenaphthene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Acenaphthylene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Anthracene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Benzidine	ND	ug/L	30.5	06/28/21 11:06	
EPA 625	Benzo(a)anthracene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Benzo(a)pyrene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Benzo(b)fluoranthene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Benzo(g,h,i)perylene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Benzo(k)fluoranthene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	4-Bromophenylphenyl ether	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Butylbenzylphthalate	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	4-Chloro-3-methylphenol	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	3&4-Chloroaniline	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	bis(2-Chloroethoxy)methane	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	bis(2-Chloroethyl) ether	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2-Chloronaphthalene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2-Chlorophenol	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	4-Chlorophenylphenyl ether	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Chrysene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Dibenz(a,h)anthracene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	1,2-Dichlorobenzene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	1,3-Dichlorobenzene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	1,4-Dichlorobenzene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	3,3'-Dichlorobenzidine	ND	ug/L	20.3	06/28/21 11:06	
EPA 625	2,4-Dichlorophenol	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Diethylphthalate	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2,4-Dimethylphenol	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Dimethylphthalate	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Di-n-butylphthalate	ND	ug/L	10.2	06/28/21 11:06	

Pace Analytical®
www.pacelabs.com

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0022-Comp **Lab ID: 20212371001** Collected: 06/22/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 625	4,6-Dinitro-2-methylphenol	ND	ug/L	25.4	06/28/21 11:06	
EPA 625	2,4-Dinitrophenol	ND	ug/L	40.6	06/28/21 11:06	
EPA 625	2,4-Dinitrotoluene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2,6-Dinitrotoluene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Di-n-octylphthalate	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	1,2-Diphenylhydrazine	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	bis(2-Ethylhexyl)phthalate	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Fluoranthene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Fluorene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Hexachloro-1,3-butadiene	ND	ug/L	20.3	06/28/21 11:06	
EPA 625	Hexachlorobenzene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Hexachlorocyclopentadiene	ND	ug/L	40.6	06/28/21 11:06	
EPA 625	Hexachloroethane	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Indeno(1,2,3-cd)pyrene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Isophorone	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Naphthalene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Nitrobenzene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2-Nitrophenol	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	4-Nitrophenol	ND	ug/L	40.6	06/28/21 11:06	
EPA 625	N-Nitrosodimethylamine	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	N-Nitroso-di-n-propylamine	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	N-Nitrosodiphenylamine	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2,2'-Oxybis(1-chloropropane)	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Pentachlorophenol	ND	ug/L	40.6	06/28/21 11:06	
EPA 625	Phenanthrene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Phenol	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	Pyrene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	1,2,4-Trichlorobenzene	ND	ug/L	10.2	06/28/21 11:06	
EPA 625	2,4,6-Trichlorophenol	ND	ug/L	10.2	06/28/21 11:06	
SM 2540C	Total Dissolved Solids	**235**	mg/L	10.0	06/25/21 13:07	

Sample: Spanish Fort 0022-Grab **Lab ID: 20212371002** Collected: 06/22/21 05:35 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	Acrolein	ND	ug/L	20.0	06/26/21 00:44	AC
EPA 624.1	Acrylonitrile	ND	ug/L	20.0	06/26/21 00:44	AC
EPA 624.1	Benzene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Bromodichloromethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Bromoform	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Bromomethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Carbon tetrachloride	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Chlorobenzene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Chloroethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	2-Chloroethylvinyl ether	ND	ug/L	20.0	06/26/21 00:44	c3
EPA 624.1	Chloroform	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Chloromethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Dibromochloromethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,2-Dichlorobenzene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,3-Dichlorobenzene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,4-Dichlorobenzene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,1-Dichloroethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,2-Dichloroethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,1-Dichloroethene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	trans-1,2-Dichloroethene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,2-Dichloropropane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	cis-1,3-Dichloropropene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	trans-1,3-Dichloropropene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Ethylbenzene	ND	ug/L	5.0	06/26/21 00:44	L1
EPA 624.1	Methylene Chloride	ND	ug/L	5.0	06/26/21 00:44	

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0022-Grab **Lab ID: 20212371002** Collected: 06/22/21 05:35 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	1,1,2,2-Tetrachloroethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Tetrachloroethene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Toluene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,1,1-Trichloroethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	1,1,2-Trichloroethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Trichloroethene	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Trichlorofluoromethane	ND	ug/L	5.0	06/26/21 00:44	
EPA 624.1	Vinyl chloride	ND	ug/L	5.0	06/26/21 00:44	
EPA 1664B	Oil and Grease	ND	mg/L	5.0	06/28/21 11:39	
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.020	06/28/21 13:10	
SM 4500-CN-E	Cyanide	ND	mg/L	0.020	06/24/21 13:02	

BATCH QUALIFIERS

Batch: 229107

[M5] A matrix spike/matrix spike duplicate was not performed for this batch due to insufficient sample volume.

ANALYTE QUALIFIERS

AC Analysis of acrolein and/or acrylonitrile was performed from a sample that was field preserved to pH < 2, which is less than the pH range of 4-5 specified in the test method and required for NPDES compliance per 40CFR Part 136.

L1 Analyte recovery in the laboratory control sample (LCS) was above QC limits. Results for this analyte in associated samples may be biased high.

c3 Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by:

Savannah Wallace
251-344-9106
savannah.wallace@pacelabs.com

Pace Analytical Services New Orleans

California Env. Lab Accreditation Program Branch: 11277CA
Florida Department of Health (NELAC): E87595
Illinois Environmental Protection Agency: 0025721
Kansas Department of Health and Environment (NELAC): E-10266
Louisiana Dept. of Environmental Quality (NELAC/LELAP): 02006
Texas Commission on Env. Quality (NELAC): T104704405-09-TX
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-00119

Pace Analytical

CHAIN-OF-CUSTODY / Analytical Request I

WO# : 20212371

20212371

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields m

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at https://info.pa

Section A Required Client Information:	Section B Required Project Information:	Section C Invoice Information:	
Company: BCSS	Report To: David Flesch	Attention:	
Address: P.O. Box 1628	Copy To:	Company Name:	
Foley, AL 36536		Address:	Regulatory Agency
Email: david.flesch@baldwincountysewer.com	Purchase Order #:	Pace Quote:	
Phone: 251-964-7586 Fax:	Project Name: Spanish Fort 0022 - Form 2A Permit	Pace Project Manager: savannah.wallace@pacelabs.com	State / Location
Requested Due Date:	Project #:	Pace Profile #: 8947	AL

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Requested Analysis Filtered (Y/N) Y/N	Analyses Test: TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles	[redacted]	1402	Residual Chlorine (Y/N)
1	Spanish Fort 0022-Comp 22	WT	C	6/21	600	6/22	500	1	3										x	x	x						
2	Spanish Fort 0022-Grab 22	WT	G	—	—	6/22	535		6													x	x	x	x	[redacted]	X	
3																												
4																												
5																												
6																												
7																												
8																												
9																												
10																												
11																												
12																												

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS			
	[signature]	6/22	1434	[signature]	6/22/21	1434				
	[signature]	6/22/21	1523	[signature]	10/22/21	1523	1.9	Y	N	Y

SAMPLER NAME AND SIGNATURE			TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
PRINT Name of SAMPLER:	FLESCH					
SIGNATURE of SAMPLER:	[signature]	DATE Signed: 6/22				

Pace Analytical

4320 Midmost Dr Mobile AL 36609

Sample Condition Upon Receipt

WO#: 20212371

PM: SLW Due Date: 06/29/21

CLIENT: MO-BCSS

Project #:

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact. ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: MAS 10/22/21

Temp must be measured from temperature blank when present

			Comments:
Temperature Blank Present:	☐Yes	☑No ☐N/A	1
Chain of Custody Present:	☑Yes	☐No ☐N/A	2
Chain of Custody Complete:	☑Yes	☐No ☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No ☐N/A	4
Sampler Name on COC:	☑Yes	☐No ☐N/A	5
Short Hold Time Analyses (<72 hr):	☐Yes	☑No ☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No ☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No ☐N/A	8
Sufficient Volume:	☑Yes	☐No ☐N/A	9
Correct Containers Used:	☑Yes	☐No ☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No ☑N/A	11
Sample Labels match COC:	☑Yes	☐No ☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No ☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No ☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No ☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No ☐N/A	16
Trip Blank Present:	☐Yes	☑No	17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 01/19/2022
Date Received: 01/11/2022

Project: Spanish Fort 22 2A 1/11/22
Pace Project No.: 20231346

Sample: Spanish Fort 0022-Comp **Lab ID: 20231346001** Collected: 01/11/22 04:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	10.0	01/14/22 14:48	
EPA 200.7	Beryllium	ND	ug/L	5.0	01/14/22 14:48	
EPA 200.7	Cadmium	ND	ug/L	5.0	01/14/22 14:48	
EPA 200.7	Chromium	ND	ug/L	10.0	01/14/22 14:48	
EPA 200.7	Copper	ND	ug/L	10.0	01/14/22 14:48	
EPA 200.7	Lead	ND	ug/L	5.0	01/14/22 14:48	
EPA 200.7	Nickel	ND	ug/L	40.0	01/14/22 14:48	
EPA 200.7	Selenium	ND	ug/L	20.0	01/14/22 14:48	
EPA 200.7	Silver	ND	ug/L	10.0	01/14/22 14:48	
EPA 200.7	Thallium	ND	ug/L	10.0	01/14/22 14:48	
EPA 200.7	Total Hardness	**50900**	ug/L	2000	01/14/22 14:48	
EPA 200.7	Zinc	**111**	ug/L	20.0	01/14/22 14:48	
EPA 625.1	Acenaphthene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Acenaphthylene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Anthracene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Benzidine	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Benzo(a)anthracene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Benzo(b)fluoranthene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Benzo(k)fluoranthene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Benzo(g,h,i)perylene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Benzo(a)pyrene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	bis(2-Chloroethoxy)methane	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	bis(2-Chloroethyl) ether	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,2'-Oxybis(1-chloropropane)	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	4-Bromophenylphenyl ether	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2-Chloronaphthalene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	4-Chlorophenylphenyl ether	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Chrysene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Dibenz(a,h)anthracene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	1,2-Dichlorobenzene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	1,3-Dichlorobenzene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	1,4-Dichlorobenzene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	3,3'-Dichlorobenzidine	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,4-Dinitrotoluene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,6-Dinitrotoluene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Fluoranthene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Fluorene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Hexachlorobenzene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Hexachloro-1,3-butadiene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Hexachlorocyclopentadiene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Hexachloroethane	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Indeno(1,2,3-cd)pyrene	ND	ug/L	1.00	01/17/22 16:22	

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Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0022-Comp **Lab ID: 20231346001** Collected: 01/11/22 04:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 625.1	Isophorone	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Naphthalene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Nitrobenzene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	N-Nitrosodimethylamine	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	N-Nitrosodiphenylamine	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	N-Nitroso-di-n-propylamine	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Phenanthrene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	Butylbenzylphthalate	ND	ug/L	3.00	01/17/22 16:22	
EPA 625.1	bis(2-Ethylhexyl)phthalate	ND	ug/L	3.00	01/17/22 16:22	
EPA 625.1	Di-n-butylphthalate	ND	ug/L	3.00	01/17/22 16:22	
EPA 625.1	Diethylphthalate	ND	ug/L	3.00	01/17/22 16:22	
EPA 625.1	Dimethylphthalate	ND	ug/L	3.00	01/17/22 16:22	
EPA 625.1	Di-n-octylphthalate	ND	ug/L	3.00	01/17/22 16:22	
EPA 625.1	Pyrene	ND	ug/L	1.00	01/17/22 16:22	
EPA 625.1	1,2,4-Trichlorobenzene	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	1,2-Diphenylhydrazine	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	4-Chloro-3-methylphenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2-Chlorophenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,4-Dichlorophenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,4-Dimethylphenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	4,6-Dinitro-2-methylphenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,4-Dinitrophenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2-Nitrophenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	4-Nitrophenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	4-Chloroaniline	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Pentachlorophenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	Phenol	ND	ug/L	10.0	01/17/22 16:22	
EPA 625.1	2,4,6-Trichlorophenol	ND	ug/L	10.0	01/17/22 16:22	
SM 2540C 2011	Total Dissolved Solids	270	mg/L	10.0	01/13/22 07:11	

Sample: Spanish Fort 0022-Grab **Lab ID: 20231346002** Collected: 01/11/22 04:35 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	Acrolein	ND	ug/L	20.0	01/13/22 13:40	
EPA 624.1	Acrylonitrile	ND	ug/L	20.0	01/13/22 13:40	
EPA 624.1	Benzene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Bromodichloromethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Bromoform	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Bromomethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Carbon tetrachloride	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Chlorobenzene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Chloroethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	2-Chloroethylvinyl ether	ND	ug/L	20.0	01/13/22 13:40	c3
EPA 624.1	Chloroform	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Chloromethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Dibromochloromethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,2-Dichlorobenzene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,3-Dichlorobenzene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,4-Dichlorobenzene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,1-Dichloroethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,2-Dichloroethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,1-Dichloroethene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	trans-1,2-Dichloroethene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,2-Dichloropropane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	cis-1,3-Dichloropropene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	trans-1,3-Dichloropropene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Ethylbenzene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Methylene Chloride	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,1,2,2-Tetrachloroethane	ND	ug/L	5.0	01/13/22 13:40	

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0022-Grab **Lab ID: 20231346002** Collected: 01/11/22 04:35 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	Tetrachloroethene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Toluene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,1,1-Trichloroethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	1,1,2-Trichloroethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Trichloroethene	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Trichlorofluoromethane	ND	ug/L	5.0	01/13/22 13:40	
EPA 624.1	Vinyl chloride	ND	ug/L	5.0	01/13/22 13:40	
EPA 1664B, 2010	Oil and Grease	ND	mg/L	5.2	01/13/22 10:11	P1
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.020	01/17/22 13:54	
SM 4500-CN-E	Cyanide	ND	mg/L	0.020	01/18/22 10:51	

ANALYTE QUALIFIERS

P1	Routine initial sample volume or weight was not used for extraction, resulting in elevated reporting limits.
c3	Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by:

Savannah Wallace
251-344-9106
savannah.wallace@pacelabs.com

Pace Analytical Services New Orleans

Florida Department of Health (NELAC): E87595
Illinois Environmental Protection Agency: 0025721
Kansas Department of Health and Environment (NELAC): E-10266
Louisiana Dept. of Environmental Quality (NELAC/LELAP): 02006
Texas Commission on Env. Quality (NELAC): T104704405-09-TX
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-00119

Pace Analytical Services National

12065 Lebanon Road, Mt. Juliet, TN 37122
Alabama Certification #: 40660
Alaska Certification 17-026
Arizona Certification #: AZ0612
Arkansas Certification #: 88-0469
California Certification #: 2932
Canada Certification #: 1461.01
Colorado Certification #: TN00003
Connecticut Certification #: PH-0197
DOD Certification: #1461.01
EPA# TN00003
Florida Certification #: E87487
Georgia DW Certification #: 923
Georgia Certification: NELAP
Idaho Certification #: TN00003
Illinois Certification #: 200008
Indiana Certification #: C-TN-01
Iowa Certification #: 364
Kansas Certification #: E-10277
Kentucky UST Certification #: 16
Kentucky Certification #: 90010
Louisiana Certification #: AI30792
Louisiana DW Certification #: LA180010
Maine Certification #: TN0002
Maryland Certification #: 324
Massachusetts Certification #: M-TN003
Michigan Certification #: 9958
Minnesota Certification #: 047-999-395
Mississippi Certification #: TN00003
Missouri Certification #: 340
Montana Certification #: CERT0086
Nebraska Certification #: NE-OS-15-05
Nevada Certification #: TN-03-2002-34
New Hampshire Certification #: 2975
New Jersey Certification #: TN002
New Mexico DW Certification
New York Certification #: 11742
North Carolina Aquatic Toxicity Certification #: 41
North Carolina Drinking Water Certification #: 21704
North Carolina Environmental Certificate #: 375
North Dakota Certification #: R-140
Ohio VAP Certification #: CL0069
Oklahoma Certification #: 9915
Oregon Certification #: TN200002
Pennsylvania Certification #: 68-02979
Rhode Island Certification #: LAO00356
South Carolina Certification #: 84004
South Dakota Certification
Tennessee DW/Chem/Micro Certification #: 2006
Texas Certification #: T 104704245-17-14
Texas Mold Certification #: LAB0152
USDA Soil Permit #: P330-15-00234
Utah Certification #: TN00003
Vermont Dept. of Health: ID# VT-2006
Virginia Certification #: VT2006
Virginia Certification #: 460132
Washington Certification #: C847
West Virginia Certification #: 233
Wisconsin Certification #: 998093910
Wyoming UST Certification #: via A2LA 2926.01

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Pace Analytical Services National
A2LA-ISO 17025 Certification #: 1461.01
A2LA-ISO 17025 Certification #: 1461.02

AIHA-LAP/LLC EMLAP Certification #:100789

Pace Analytical

CHAIN-OF-CUSTODY / Analytical Requ

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fi

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at https://

WO# : 20231346

20231346

Section A	Section B	Section C	
Required Client Information:	**Required Project Information:**	**Invoice Information:**	
Company: BCSS	Report To: David Flesch	Attention:	
Address: P.O. Box 1628	Copy To:	Company Name:	
Foley, AL 36536		Address:	**Regulatory Agency**
Email: david.flesch@baldwincountysewer.com	Purchase Order #:	Pace Quote:	
Phone: (251)747-2977 Fax:	Project Name: Spanish Fort 0022 - Form 2A Permit	Pace Project Manager: savannah.wallace@pacelabs.com,	**State / Location**
Requested Due Date:	Project #:	Pace Profile #: 8947	AL

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique	MATRIX CODE Drinking Water DW Water WT Waste Water WW Product P Soil/Solid SL Oil OL Wipe WP Air AR Other OT Tissue TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB, C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Y/N	Analyses Test	TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles								Residual Chlorine (Y/N)	
1	Spanish Fort 0022-Comp	22	WT		1/10	500	1/11	400	1												X	X	X											
2	Spanish Fort 0022-Grab	22	WT		—	—	1/11	435	18															X	X	X	X							
3																																		
4																																		
5																																		10 BOTTLES
6																																		
7																																		
8																																		
9																																		
10																																		
11																																		
12																																		

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS			
	FLESCH	1/11	1435		1-11-22	1435				
		1-11-22	1524		1/11/22	1524	1.7	4	N	4

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER: FLESCH

SIGNATURE of SAMPLER: DATE Signed: 1/11

TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
1.7	4	N	4

Pace Analytical

Sample Condition Upon Receipt

4320 Midmost Dr Mobile, AL 36609

Project #

WO# : 20231346

PM: SLW Due Date: 01/18/22

CLIENT: MO-BCSS

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: MAS 1/11/22

Temp must be measured from temperature blank when present

				Comments:
Temperature Blank Present:	☐Yes	☑No	☐N/A	1
Chain of Custody Present:	☑Yes	☐No	☐N/A	2
Chain of Custody Complete:	☑Yes	☐No	☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No	☐N/A	4
Sampler Name on COC:	☑Yes	☐No	☐N/A	5
Short Hold Time Analyses (<72 hr):	☑Yes	☐No	☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No	☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No	☐N/A	8
Sufficient Volume:	☑Yes	☐No	☐N/A	9
Correct Containers Used:	☑Yes	☐No	☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No	☑N/A	11
Sample Labels match COC:	☑Yes	☐No	☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No	☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No	☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No	☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No	☐N/A	16
Trip Blank Present:	☐Yes	☑No		17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

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Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

Report Date: 03/15/2023
Date Received: 02/15/2023

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Project: Spanish Fort 22 2A 02/15/23
Pace Project No.: 20269929

Sample: Spanish Fort 22-Comp **Lab ID: 20269929001** Collected: 02/15/23 06:00 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	7.7	10.0	02/20/23 13:41	
EPA 200.7	Beryllium	ND	ug/L	0.49	5.0	02/20/23 13:41	
EPA 200.7	Cadmium	ND	ug/L	0.31	5.0	02/20/23 13:41	
EPA 200.7	Chromium	ND	ug/L	2.6	10.0	02/20/23 13:41	
EPA 200.7	Copper	ND	ug/L	1.1	10.0	02/20/23 13:41	
EPA 200.7	Lead	ND	ug/L	3.5	5.0	02/20/23 13:41	
EPA 200.7	Nickel	ND	ug/L	20.9	40.0	02/20/23 13:41	
EPA 200.7	Selenium	ND	ug/L	4.5	20.0	02/20/23 13:41	
EPA 200.7	Silver	ND	ug/L	3.3	10.0	02/20/23 13:41	
EPA 200.7	Thallium	ND	ug/L	3.3	10.0	02/20/23 13:41	
EPA 200.7	Total Hardness	**59400**	ug/L	10.0	2000	02/20/23 13:41	
EPA 200.7	Zinc	**68.2**	ug/L	15.7	20.0	02/20/23 13:41	
EPA 625.1	Acenaphthene	ND	ug/L	0.0886	1.00	02/23/23 14:47	
EPA 625.1	Acenaphthylene	ND	ug/L	0.0921	1.00	02/23/23 14:47	
EPA 625.1	Anthracene	ND	ug/L	0.0804	1.00	02/23/23 14:47	
EPA 625.1	Benzidine	ND	ug/L	3.74	10.0	02/26/23 00:33	L0
EPA 625.1	Benzo(a)anthracene	ND	ug/L	0.199	1.00	02/23/23 14:47	
EPA 625.1	Benzo(b)fluoranthene	ND	ug/L	0.130	1.00	02/23/23 14:47	
EPA 625.1	Benzo(k)fluoranthene	ND	ug/L	0.120	1.00	02/23/23 14:47	
EPA 625.1	Benzo(g,h,i)perylene	ND	ug/L	0.121	1.00	02/23/23 14:47	
EPA 625.1	Benzo(a)pyrene	ND	ug/L	0.0381	1.00	02/23/23 14:47	
EPA 625.1	bis(2-Chloroethoxy)methane	ND	ug/L	0.116	10.0	02/23/23 14:47	
EPA 625.1	bis(2-Chloroethyl) ether	ND	ug/L	0.137	10.0	02/23/23 14:47	
EPA 625.1	2,2'-Oxybis(1-chloropropane)	ND	ug/L	0.210	10.0	02/23/23 14:47	
EPA 625.1	4-Bromophenylphenyl ether	ND	ug/L	0.0877	10.0	02/23/23 14:47	
EPA 625.1	2-Chloronaphthalene	ND	ug/L	0.0648	1.00	02/23/23 14:47	
EPA 625.1	4-Chlorophenylphenyl ether	ND	ug/L	0.0926	10.0	02/23/23 14:47	
EPA 625.1	Chrysene	ND	ug/L	0.130	1.00	02/23/23 14:47	
EPA 625.1	Dibenz(a,h)anthracene	ND	ug/L	0.0644	1.00	02/23/23 14:47	
EPA 625.1	1,2-Dichlorobenzene	ND	ug/L	0.0713	10.0	02/23/23 14:47	
EPA 625.1	1,3-Dichlorobenzene	ND	ug/L	0.132	10.0	02/23/23 14:47	
EPA 625.1	1,4-Dichlorobenzene	ND	ug/L	0.0942	10.0	02/23/23 14:47	
EPA 625.1	3,3'-Dichlorobenzidine	ND	ug/L	0.212	10.0	02/23/23 14:47	
EPA 625.1	2,4-Dinitrotoluene	ND	ug/L	0.0983	10.0	02/23/23 14:47	
EPA 625.1	2,6-Dinitrotoluene	ND	ug/L	0.250	10.0	02/23/23 14:47	
EPA 625.1	Fluoranthene	ND	ug/L	0.102	1.00	02/23/23 14:47	
EPA 625.1	Fluorene	ND	ug/L	0.0844	1.00	02/23/23 14:47	
EPA 625.1	Hexachlorobenzene	ND	ug/L	0.0755	1.00	02/23/23 14:47	
EPA 625.1	Hexachloro-1,3-butadiene	ND	ug/L	0.0968	10.0	02/23/23 14:47	
EPA 625.1	Hexachlorocyclopentadiene	ND	ug/L	0.0598	10.0	02/23/23 14:47	
EPA 625.1	Hexachloroethane	ND	ug/L	0.127	10.0	02/23/23 14:47	
EPA 625.1	Indeno(1,2,3-cd)pyrene	ND	ug/L	0.279	1.00	02/23/23 14:47	

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Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 22-Comp **Lab ID: 20269929001** Collected: 02/15/23 06:00 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 625.1	Isophorone	ND	ug/L	0.143	10.0	02/23/23 14:47	
EPA 625.1	Naphthalene	ND	ug/L	0.159	1.00	02/23/23 14:47	
EPA 625.1	Nitrobenzene	ND	ug/L	0.297	10.0	02/23/23 14:47	
EPA 625.1	N-Nitrosodimethylamine	ND	ug/L	0.998	10.0	02/23/23 14:47	
EPA 625.1	N-Nitrosodiphenylamine	ND	ug/L	2.37	10.0	02/23/23 14:47	
EPA 625.1	N-Nitroso-di-n-propylamine	ND	ug/L	0.261	10.0	02/23/23 14:47	
EPA 625.1	Phenanthrene	ND	ug/L	0.112	1.00	02/23/23 14:47	
EPA 625.1	Butylbenzylphthalate	ND	ug/L	0.765	3.00	02/23/23 14:47	
EPA 625.1	bis(2-Ethylhexyl)phthalate	ND	ug/L	0.895	3.00	02/23/23 14:47	
EPA 625.1	Di-n-butylphthalate	ND	ug/L	0.453	3.00	02/23/23 14:47	
EPA 625.1	Diethylphthalate	ND	ug/L	0.287	3.00	02/23/23 14:47	
EPA 625.1	Dimethylphthalate	ND	ug/L	0.260	3.00	02/23/23 14:47	
EPA 625.1	Di-n-octylphthalate	ND	ug/L	0.932	3.00	02/23/23 14:47	
EPA 625.1	Pyrene	ND	ug/L	0.107	1.00	02/23/23 14:47	
EPA 625.1	1,2,4-Trichlorobenzene	ND	ug/L	0.0698	10.0	02/23/23 14:47	
EPA 625.1	1,2-Diphenylhydrazine	ND	ug/L	0.105	10.0	02/23/23 14:47	N2
EPA 625.1	4-Chloro-3-methylphenol	ND	ug/L	0.131	10.0	02/23/23 14:47	
EPA 625.1	2-Chlorophenol	ND	ug/L	0.133	10.0	02/23/23 14:47	
EPA 625.1	2,4-Dichlorophenol	ND	ug/L	0.102	10.0	02/23/23 14:47	
EPA 625.1	2,4-Dimethylphenol	ND	ug/L	0.0636	10.0	02/23/23 14:47	
EPA 625.1	4,6-Dinitro-2-methylphenol	ND	ug/L	1.12	10.0	02/23/23 14:47	
EPA 625.1	2,4-Dinitrophenol	ND	ug/L	5.93	10.0	02/23/23 14:47	
EPA 625.1	2-Nitrophenol	ND	ug/L	0.117	10.0	02/23/23 14:47	
EPA 625.1	4-Nitrophenol	ND	ug/L	0.143	10.0	02/23/23 14:47	
EPA 625.1	4-Chloroaniline	ND	ug/L	0.234	10.0	02/23/23 14:47	
EPA 625.1	Pentachlorophenol	ND	ug/L	0.313	10.0	02/23/23 14:47	
EPA 625.1	Phenol	ND	ug/L	4.33	10.0	02/23/23 14:47	
EPA 625.1	2,4,6-Trichlorophenol	ND	ug/L	0.100	10.0	02/23/23 14:47	
EPA 625.1	Nitrobenzene-d5 (S)	**34.0**	%		15.0-314	02/23/23 14:47	
EPA 625.1	Nitrobenzene-d5 (S)	**47.0**	%		15.0-314	02/26/23 00:33	
EPA 625.1	2-Fluorobiphenyl (S)	**41.5**	%		22.0-127	02/23/23 14:47	
EPA 625.1	2-Fluorobiphenyl (S)	**41.0**	%		22.0-127	02/26/23 00:33	
EPA 625.1	Terphenyl-d14 (S)	**30.4**	%		29.0-141	02/23/23 14:47	
EPA 625.1	Terphenyl-d14 (S)	**26.3**	%		29.0-141	02/26/23 00:33	SR
EPA 625.1	Phenol-d5 (S)	**11.1**	%		8.00-424	02/23/23 14:47	
EPA 625.1	Phenol-d5 (S)	**13.6**	%		8.00-424	02/26/23 00:33	
EPA 625.1	2-Fluorophenol (S)	**17.2**	%		10.0-120	02/23/23 14:47	
EPA 625.1	2-Fluorophenol (S)	**18.7**	%		10.0-120	02/26/23 00:33	
EPA 625.1	2,4,6-Tribromophenol (S)	**56.0**	%		10.0-153	02/23/23 14:47	
EPA 625.1	2,4,6-Tribromophenol (S)	**38.0**	%		10.0-153	02/26/23 00:33	
SM 2540C 2011	Total Dissolved Solids	**190**	mg/L	10.0	10.0	02/20/23 07:27	

Sample: Spanish Fort 22-Grab **Lab ID: 20269929002** Collected: 02/15/23 06:05 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 624.1	Acrolein	ND	ug/L	2.0	20.0	02/17/23 13:49	AC
EPA 624.1	Acrylonitrile	ND	ug/L	2.1	20.0	02/17/23 13:49	
EPA 624.1	Benzene	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	Bromodichloromethane	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	Bromoform	ND	ug/L	1.6	5.0	02/17/23 13:49	
EPA 624.1	Bromomethane	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	Carbon tetrachloride	ND	ug/L	1.1	5.0	02/17/23 13:49	
EPA 624.1	Chlorobenzene	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	Chloroethane	ND	ug/L	1.2	5.0	02/17/23 13:49	
EPA 624.1	2-Chloroethylvinyl ether	ND	ug/L	3.2	20.0	02/17/23 13:49	c3
EPA 624.1	Chloroform	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	Chloromethane	ND	ug/L	1.2	5.0	02/17/23 13:49	
EPA 624.1	Dibromochloromethane	ND	ug/L	1.6	5.0	02/17/23 13:49	
EPA 624.1	1,2-Dichlorobenzene	ND	ug/L	1.5	5.0	02/17/23 13:49	

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 22-Grab **Lab ID: 20269929002** Collected: 02/15/23 06:05 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 624.1	1,3-Dichlorobenzene	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	1,4-Dichlorobenzene	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	1,1-Dichloroethane	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	1,2-Dichloroethane	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	1,1-Dichloroethene	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	trans-1,2-Dichloroethene	ND	ug/L	1.3	5.0	02/17/23 13:49	
EPA 624.1	1,2-Dichloropropane	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	cis-1,3-Dichloropropene	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	trans-1,3-Dichloropropene	ND	ug/L	1.6	5.0	02/17/23 13:49	
EPA 624.1	Ethylbenzene	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	Methylene Chloride	ND	ug/L	4.6	5.0	02/17/23 13:49	
EPA 624.1	1,1,2,2-Tetrachloroethane	ND	ug/L	1.9	5.0	02/17/23 13:49	
EPA 624.1	Tetrachloroethene	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	Toluene	ND	ug/L	2.1	5.0	02/17/23 13:49	
EPA 624.1	1,1,1-Trichloroethane	ND	ug/L	1.2	5.0	02/17/23 13:49	
EPA 624.1	1,1,2-Trichloroethane	ND	ug/L	1.5	5.0	02/17/23 13:49	
EPA 624.1	Trichloroethene	ND	ug/L	1.4	5.0	02/17/23 13:49	
EPA 624.1	Trichlorofluoromethane	ND	ug/L	1.2	5.0	02/17/23 13:49	
EPA 624.1	Vinyl chloride	ND	ug/L	1.1	5.0	02/17/23 13:49	
EPA 624.1	4-Bromofluorobenzene (S)	**97**	%.		82-118	02/17/23 13:49	
EPA 624.1	Toluene-d8 (S)	**98**	%.		81-120	02/17/23 13:49	
EPA 624.1	Dibromofluoromethane (S)	**116**	%.		77-123	02/17/23 13:49	
EPA 1664B, 2010	Oil and Grease	ND	mg/L	2.2	5.0	02/17/23 07:14	
EPA 420.1	Phenolics, Total Recoverable	**0.036**	mg/L	0.0093	0.020	02/22/23 15:45	
SM 4500-CN-E	Cyanide	ND	mg/L	0.014	0.020	02/20/23 12:16	

ANALYTE QUALIFIERS

AC	Analysis of acrolein and/or acrylonitrile was performed from a sample that was field preserved to pH < 2, which is less than the pH range of 4-5 specified in the test method and required for NPDES compliance per 40CFR Part 136.
L0	Analyte recovery in the laboratory control sample (LCS) was outside QC limits.
M1	Matrix spike recovery exceeded QC limits. Batch accepted based on laboratory control sample (LCS) recovery.
ML	Matrix spike recovery and/or matrix spike duplicate recovery was below laboratory control limits. Result may be biased low.
N2	Analyte reported using a calibration and validation based on Azobenzene (CAS 103-33-3). 1,2-Diphenylhydrazine decomposes into Azobenzene during the analysis.
SR	Surrogate recovery was below laboratory control limits. Results may be biased low.
c3	Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by: Kyle A Williams

Kyle Williams
251-344-9106
kyle.williams@pacelabs.com

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Pace Analytical Services, LLC
4320 Midmost Dr
Mobile. AL 36609
251-344-9106

Pace Analytical Services National

Georgia DW Certification #: 923
Georgia Certification: NELAP
Idaho Certification #: TN00003
Illinois Certification #: 200008
Indiana Certification #: C-TN-01
Iowa Certification #: 364
Kansas Certification #: E-10277
Kentucky UST Certification #: 16
Kentucky Certification #: 90010
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Pennsylvania Certification #: 68-02979
Rhode Island Certification #: LAO00356
South Carolina Certification #: 84004
South Dakota Certification
Tennessee DW/Chem/Micro Certification #: 2006
Texas Certification #: T 104704245-17-14
Texas Mold Certification #: LAB0152
USDA Soil Permit #: P330-15-00234
Utah Certification #: TN00003
Vermont Dept. of Health: ID# VT-2006
Virginia Certification #: VT2006
Virginia Certification #: 460132
Washington Certification #: C847
West Virginia Certification #: 233
Wisconsin Certification #: 998093910
Wyoming UST Certification #: via A2LA 2926.01
A2LA-ISO 17025 Certification #: 1461.01
A2LA-ISO 17025 Certification #: 1461.02
AIHA-LAP/LLC EMLAP Certification #:100789

CHAIN-OF-CUSTODY / Analytical Request

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields m

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at https://info.pa

WO# : 20269929

20269929

Section A	Section B	Section C
Required Client Information:	**Required Project Information:**	**Invoice Information:**
Company: BCSS	Report To: David Flesch	Attention:
Address: P.O. Box 1628	Copy To:	Company Name:
Foley, AL 36536		Address:
Email: david.flesch@baldwincountysewer.com	Purchase Order #:	Pace Quote:
Phone: (251)747-2977 Fax:	Project Name: Spanish Fort 0022 - Form 2A Permi	Pace Project Manager: savannah.wallace@pacelabs.com
Requested Due Date:	Project #:	Pace Profile #: 8947

Regulatory Agency

State / Location
AL

Requested Analysis Filtered (Y/N)

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique MATRIX CODE: Drinking Water DW; Water WT; Waste Water WW; Product P; Soil Solid SL; Oil OL; Wipe WP; Air AR; Other OT; Tissue TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Y/N	Analyses Test: TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles	4							Residual Chlorine (Y/N)	
1	Spanish Fort 0022-Comp	WT	C	2/14	700	2/15	600	1	4	3		1							X	X	X											
2	Spanish Fort 0022-Grab 22	WT	G	—	—	2/15	605	18	6		1		4	1	1							X	X	X	X	4							
3																																				
4																																				
5																																				
6																																				
7																																				
8																																				
9																																				
10																																				
11																																				
12																																				

10

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS: TEMP in C	Received on ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
		2/15	922		2/15	922				
		2/15	1525		2/15	1525	1.3	U	N	U

SAMPLER NAME AND SIGNATURE	
PRINT Name of SAMPLER:	FLESCH
SIGNATURE of SAMPLER:	DATE Signed: 2/15

Pace Analytical

Sample Condition Upon Receipt

4320 Midmost Dr Mobile AL 36609

Project #:

WO# : 20269929

PM: KAW Due Date: 02/22/23

CLIENT: MO-BCSS

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and initials of person examining contents: 2/15/23 AJ

Temp must be measured from temperature blank when present

				Comments:
Temperature Blank Present:	☐Yes	☑No	☐N/A	1
Chain of Custody Present:	☑Yes	☐No	☐N/A	2
Chain of Custody Complete:	☑Yes	☐No	☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No	☐N/A	4
Sampler Name on COC:	☑Yes	☐No	☐N/A	5
Short Hold Time Analyses (<72 hr):	☐Yes	☑No	☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No	☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No	☐N/A	8
Sufficient Volume:	☑Yes	☐No	☐N/A	9
Correct Containers Used:	☑Yes	☐No	☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No	☑N/A	11
Sample Labels match COC:	☑Yes	☐No	☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No	☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No	☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No	☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No	☐N/A	16
Trip Blank Present:	☐Yes	☐No		17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 03/09/2021
Date Received: 03/02/2021

Project: Spanish Fort 0022 Form 2A
Pace Project No.: 20192186

Sample: Spanish Fort 0022 Comp **Lab ID: 20192186001** Collected: 03/02/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	10.0	03/04/21 11:00	
EPA 200.7	Beryllium	ND	ug/L	5.0	03/04/21 11:00	
EPA 200.7	Cadmium	ND	ug/L	5.0	03/04/21 11:00	
EPA 200.7	Chromium	ND	ug/L	10.0	03/04/21 11:00	
EPA 200.7	Copper	**322**	ug/L	10.0	03/04/21 11:00	
EPA 200.7	Lead	**6.8**	ug/L	5.0	03/04/21 11:00	
EPA 200.7	Nickel	ND	ug/L	40.0	03/04/21 11:00	
EPA 200.7	Selenium	ND	ug/L	20.0	03/04/21 11:00	
EPA 200.7	Silver	ND	ug/L	10.0	03/04/21 11:00	
EPA 200.7	Thallium	ND	ug/L	10.0	03/04/21 11:00	
EPA 200.7	Total Hardness	**37200**	ug/L	2000	03/04/21 11:00	
EPA 200.7	Zinc	**527**	ug/L	20.0	03/04/21 11:00	
EPA 625	Acenaphthene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Acenaphthylene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Anthracene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Benzidine	ND	ug/L	30.1	03/05/21 17:42	
EPA 625	Benzo(a)anthracene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Benzo(a)pyrene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Benzo(b)fluoranthene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Benzo(g,h,i)perylene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Benzo(k)fluoranthene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	4-Bromophenylphenyl ether	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Butylbenzylphthalate	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	4-Chloro-3-methylphenol	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	3&4-Chloroaniline	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	bis(2-Chloroethoxy)methane	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	bis(2-Chloroethyl) ether	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2-Chloronaphthalene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2-Chlorophenol	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	4-Chlorophenylphenyl ether	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Chrysene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Dibenz(a,h)anthracene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	1,2-Dichlorobenzene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	1,3-Dichlorobenzene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	1,4-Dichlorobenzene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	3,3'-Dichlorobenzidine	ND	ug/L	20.1	03/05/21 17:42	
EPA 625	2,4-Dichlorophenol	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Diethylphthalate	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2,4-Dimethylphenol	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Dimethylphthalate	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Di-n-butylphthalate	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	4,6-Dinitro-2-methylphenol	ND	ug/L	25.1	03/05/21 17:42	

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Sample: Spanish Fort 0022 Comp **Lab ID:** 20192186001 Collected: 03/02/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 625	2,4-Dinitrophenol	ND	ug/L	40.2	03/05/21 17:42	
EPA 625	2,4-Dinitrotoluene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2,6-Dinitrotoluene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Di-n-octylphthalate	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	1,2-Diphenylhydrazine	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	bis(2-Ethylhexyl)phthalate	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Fluoranthene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Fluorene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Hexachloro-1,3-butadiene	ND	ug/L	20.1	03/05/21 17:42	
EPA 625	Hexachlorobenzene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Hexachlorocyclopentadiene	ND	ug/L	40.2	03/05/21 17:42	
EPA 625	Hexachloroethane	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Indeno(1,2,3-cd)pyrene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Isophorone	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Naphthalene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Nitrobenzene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2-Nitrophenol	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	4-Nitrophenol	ND	ug/L	40.2	03/05/21 17:42	
EPA 625	N-Nitrosodimethylamine	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	N-Nitroso-di-n-propylamine	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	N-Nitrosodiphenylamine	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2,2'-Oxybis(1-chloropropane)	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Pentachlorophenol	ND	ug/L	40.2	03/05/21 17:42	
EPA 625	Phenanthrene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	Phenol	ND	ug/L	10.0	03/05/21 17:42	P1
EPA 625	Pyrene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	1,2,4-Trichlorobenzene	ND	ug/L	10.0	03/05/21 17:42	
EPA 625	2,4,6-Trichlorophenol	ND	ug/L	10.0	03/05/21 17:42	
SM 2540C	Total Dissolved Solids	200	mg/L	10.0	03/04/21 12:00	

Sample: Spanish Fort 0022 Grab **Lab ID:** 20192186002 Collected: 03/02/21 05:35 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624	Acrolein	ND	ug/L	20.0	03/04/21 05:08	AC
EPA 624	Acrylonitrile	ND	ug/L	20.0	03/04/21 05:08	AC
EPA 624	Benzene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Bromodichloromethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Bromoform	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Bromomethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Carbon tetrachloride	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Chlorobenzene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Chloroethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	2-Chloroethylvinyl ether	ND	ug/L	20.0	03/04/21 05:08	c3
EPA 624	Chloroform	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Chloromethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Dibromochloromethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,2-Dichlorobenzene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,3-Dichlorobenzene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,4-Dichlorobenzene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,1-Dichloroethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,2-Dichloroethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,1-Dichloroethene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	trans-1,2-Dichloroethene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,2-Dichloropropane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	cis-1,3-Dichloropropene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	trans-1,3-Dichloropropene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Ethylbenzene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Methylene Chloride	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,1,2,2-Tetrachloroethane	ND	ug/L	5.0	03/04/21 05:08	

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251-344-9106

Sample: Spanish Fort 0022 Grab **Lab ID: 20192186002** Collected: 03/02/21 05:35 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624	Tetrachloroethene	ND	ug/L	5.0	03/04/21 05:08	L1
EPA 624	Toluene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,1,1-Trichloroethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	1,1,2-Trichloroethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Trichloroethene	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Trichlorofluoromethane	ND	ug/L	5.0	03/04/21 05:08	
EPA 624	Vinyl chloride	ND	ug/L	5.0	03/04/21 05:08	
EPA 1664B	Oil and Grease	ND	mg/L	5.2	03/04/21 09:03	P1
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.020	03/04/21 12:54	
SM 4500-CN-E	Cyanide	ND	mg/L	0.020	03/05/21 13:52	

BATCH QUALIFIERS

Batch: 218216

[M5] A matrix spike/matrix spike duplicate was not performed for this batch due to insufficient sample volume.

ANALYTE QUALIFIERS

AC Analysis of acrolein and/or acrylonitrile was performed from a sample that was field preserved to pH < 2, which is less than the pH range of 4-5 specified in the test method and required for NPDES compliance per 40CFR Part 136.

L1 Analyte recovery in the laboratory control sample (LCS) was above QC limits. Results for this analyte in associated samples may be biased high.

P1 Routine initial sample volume or weight was not used for extraction, resulting in elevated reporting limits.

c3 Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by:

Savannah Wallace
251-344-9106
savannah.wallace@pacelabs.com

Pace Analytical Services New Orleans

California Env. Lab Accreditation Program Branch: 11277CA
Florida Department of Health (NELAC): E87595
Illinois Environmental Protection Agency: 0025721
Kansas Department of Health and Environment (NELAC): E-10266
Louisiana Dept. of Environmental Quality (NELAC/LELAP): 02006
Texas Commission on Env. Quality (NELAC): T104704405-09-TX
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-00119

Pace Analytical

CHAIN-OF-CUSTODY / Analytical Reques

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields

WO# : 20192186

20192186

Section A Required Client Information:	Section B Required Project Information:	Section C Invoice Information:	
Company: BCSS	Report To: David Flesch	Attention:	
Address: P.O. Box 1628	Copy To:	Company Name:	Regulatory Agency
Foley, AL 36536		Address:	
Email: david.flesch@baldwincountysewer.com	Purchase Order #	Pace Quote:	
Phone: 251-964-7586 Fax	Project Name: Spanish Fort 0022 - Form 2A Permit	Pace Project Manager: sevannah.wallace@pacelabs.com	State / Location
Requested Due Date:	Project #:	Pace Profile #: 8947	AL

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique MATRIX CODE: Drinking Water DW; Water WT; Waste Water WW; Product P; Soil/Solid SL; Oil OL; Wipe WP; Air AR; Other OT; Tissue TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Analyses Test Y/N	TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles	Residual Chlorine (Y/N)
1	Spanish Fort 0022 Comp	WT	C	3/1	600	3/2	500	3											X	X	X						TOTAL 9 BOTTLES
2	Spanish Fort 0022 Grab	WT	G	—	—	3/2	535	14														X	X	X	X		
3																											
4																											
5																											
6																											
7																											
8																											
9																											
10																											
11																											
12																											

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS			
		3/2	1503		3/2	1503				
		3/2	1610	SM	3/2/21	1610	2.3	Y	N	Y

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER: FLESCH

SIGNATURE of SAMPLER: [signature] DATE Signed: 3/2

TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)

WO#: 20192186

Pace Analytical

Sample Condition Upon Receipt

PM: SLW Due Date: 03/09/21
CLIENT: MO-BCSS

4320 Midmost Dr Mobile, AL 36609

Project #: _____

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: NAS 3/2/21

Temp must be measured from temperature blank when present

					Comments:
Temperature Blank Present:	☐Yes	☑No	☐N/A	1	
Chain of Custody Present:	☑Yes	☐No	☐N/A	2	
Chain of Custody Complete:	☑Yes	☐No	☐N/A	3	
Chain of Custody Relinquished:	☑Yes	☐No	☐N/A	4	
Sampler Name on COC:	☑Yes	☐No	☐N/A	5	
Short Hold Time Analyses (<72 hr):	☐Yes	☑No	☐N/A	6	
Rush Turn Around Requested:	☐Yes	☑No	☐N/A	7	
Samples Arrived within Hold Time:	☑Yes	☐No	☐N/A	8	
Sufficient Volume:	☑Yes	☐No	☐N/A	9	
Correct Containers Used:	☑Yes	☐No	☐N/A	10	
Filtered vol. Rec. for Diss. tests	☐Yes	☐No	☑N/A	11	
Sample Labels match COC:	☑Yes	☐No	☐N/A	12	
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No	☐N/A	13	
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No	☐N/A	14	
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No	☐N/A	15	If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No	☐N/A	16	
Trip Blank Present:	☐Yes	☑No		17	

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Pace Analytical Services, LLC
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Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 02/27/2023
Date Received: 02/15/2023

Project: Spanish Fort 11 2A 02/15/23
Pace Project No.: 20269930

Sample: Spanish Fort 11-Comp **Lab ID: 20269930001** Collected: 02/15/23 06:00 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	7.7	10.0	02/20/23 13:45	
EPA 200.7	Beryllium	ND	ug/L	0.49	5.0	02/20/23 13:45	
EPA 200.7	Cadmium	ND	ug/L	0.31	5.0	02/20/23 13:45	
EPA 200.7	Chromium	ND	ug/L	2.6	10.0	02/20/23 13:45	
EPA 200.7	Copper	ND	ug/L	1.1	10.0	02/20/23 13:45	
EPA 200.7	Lead	ND	ug/L	3.5	5.0	02/20/23 13:45	
EPA 200.7	Nickel	ND	ug/L	20.9	40.0	02/20/23 13:45	
EPA 200.7	Selenium	ND	ug/L	4.5	20.0	02/20/23 13:45	
EPA 200.7	Silver	ND	ug/L	3.3	10.0	02/20/23 13:45	
EPA 200.7	Thallium	ND	ug/L	3.3	10.0	02/20/23 13:45	
EPA 200.7	Total Hardness	**48600**	ug/L	10.0	2000	02/20/23 13:45	
EPA 200.7	Zinc	**71.4**	ug/L	15.7	20.0	02/20/23 13:45	
EPA 625.1	Acenaphthene	ND	ug/L	0.0886	1.00	02/20/23 15:44	
EPA 625.1	Acenaphthylene	ND	ug/L	0.0921	1.00	02/20/23 15:44	
EPA 625.1	Anthracene	ND	ug/L	0.0804	1.00	02/20/23 15:44	
EPA 625.1	Benzidine	ND	ug/L	3.74	10.0	02/20/23 15:44	
EPA 625.1	Benzo(a)anthracene	ND	ug/L	0.199	1.00	02/20/23 15:44	
EPA 625.1	Benzo(b)fluoranthene	ND	ug/L	0.130	1.00	02/20/23 15:44	
EPA 625.1	Benzo(k)fluoranthene	ND	ug/L	0.120	1.00	02/20/23 15:44	
EPA 625.1	Benzo(g,h,i)perylene	ND	ug/L	0.121	1.00	02/20/23 15:44	
EPA 625.1	Benzo(a)pyrene	ND	ug/L	0.0381	1.00	02/20/23 15:44	
EPA 625.1	bis(2-Chloroethoxy)methane	ND	ug/L	0.116	10.0	02/20/23 15:44	
EPA 625.1	bis(2-Chloroethyl) ether	ND	ug/L	0.137	10.0	02/20/23 15:44	
EPA 625.1	2,2'-Oxybis(1-chloropropane)	ND	ug/L	0.210	10.0	02/20/23 15:44	
EPA 625.1	4-Bromophenylphenyl ether	ND	ug/L	0.0877	10.0	02/20/23 15:44	
EPA 625.1	2-Chloronaphthalene	ND	ug/L	0.0648	1.00	02/20/23 15:44	L0
EPA 625.1	4-Chlorophenylphenyl ether	ND	ug/L	0.0926	10.0	02/20/23 15:44	
EPA 625.1	Chrysene	ND	ug/L	0.130	1.00	02/20/23 15:44	
EPA 625.1	Dibenz(a,h)anthracene	ND	ug/L	0.0644	1.00	02/20/23 15:44	
EPA 625.1	1,2-Dichlorobenzene	ND	ug/L	0.0713	10.0	02/20/23 15:44	
EPA 625.1	1,3-Dichlorobenzene	ND	ug/L	0.132	10.0	02/20/23 15:44	
EPA 625.1	1,4-Dichlorobenzene	ND	ug/L	0.0942	10.0	02/20/23 15:44	
EPA 625.1	3,3'-Dichlorobenzidine	ND	ug/L	0.212	10.0	02/20/23 15:44	
EPA 625.1	2,4-Dinitrotoluene	ND	ug/L	0.0983	10.0	02/20/23 15:44	
EPA 625.1	2,6-Dinitrotoluene	ND	ug/L	0.250	10.0	02/20/23 15:44	
EPA 625.1	Fluoranthene	ND	ug/L	0.102	1.00	02/20/23 15:44	
EPA 625.1	Fluorene	ND	ug/L	0.0844	1.00	02/20/23 15:44	
EPA 625.1	Hexachlorobenzene	ND	ug/L	0.0755	1.00	02/20/23 15:44	
EPA 625.1	Hexachloro-1,3-butadiene	ND	ug/L	0.0968	10.0	02/20/23 15:44	
EPA 625.1	Hexachlorocyclopentadiene	ND	ug/L	0.0598	10.0	02/20/23 15:44	
EPA 625.1	Hexachloroethane	ND	ug/L	0.127	10.0	02/20/23 15:44	
EPA 625.1	Indeno(1,2,3-cd)pyrene	ND	ug/L	0.279	1.00	02/20/23 15:44	

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 11-Comp **Lab ID:** 20269930001 Collected: 02/15/23 06:00 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 625.1	Isophorone	ND	ug/L	0.143	10.0	02/20/23 15:44	
EPA 625.1	Naphthalene	ND	ug/L	0.159	1.00	02/20/23 15:44	
EPA 625.1	Nitrobenzene	ND	ug/L	0.297	10.0	02/20/23 15:44	
EPA 625.1	N-Nitrosodimethylamine	ND	ug/L	0.998	10.0	02/20/23 15:44	
EPA 625.1	N-Nitrosodiphenylamine	ND	ug/L	2.37	10.0	02/20/23 15:44	
EPA 625.1	N-Nitroso-di-n-propylamine	ND	ug/L	0.261	10.0	02/20/23 15:44	
EPA 625.1	Phenanthrene	ND	ug/L	0.112	1.00	02/20/23 15:44	
EPA 625.1	Butylbenzylphthalate	ND	ug/L	0.765	3.00	02/20/23 15:44	
EPA 625.1	bis(2-Ethylhexyl)phthalate	ND	ug/L	0.895	3.00	02/20/23 15:44	
EPA 625.1	Di-n-butylphthalate	ND	ug/L	0.453	3.00	02/20/23 15:44	
EPA 625.1	Diethylphthalate	ND	ug/L	0.287	3.00	02/20/23 15:44	
EPA 625.1	Dimethylphthalate	ND	ug/L	0.260	3.00	02/20/23 15:44	
EPA 625.1	Di-n-octylphthalate	ND	ug/L	0.932	3.00	02/20/23 15:44	
EPA 625.1	Pyrene	ND	ug/L	0.107	1.00	02/20/23 15:44	
EPA 625.1	1,2,4-Trichlorobenzene	ND	ug/L	0.0698	10.0	02/20/23 15:44	
EPA 625.1	1,2-Diphenylhydrazine	ND	ug/L	0.105	10.0	02/20/23 15:44	N2
EPA 625.1	4-Chloro-3-methylphenol	ND	ug/L	0.131	10.0	02/20/23 15:44	
EPA 625.1	2-Chlorophenol	ND	ug/L	0.133	10.0	02/20/23 15:44	
EPA 625.1	2,4-Dichlorophenol	ND	ug/L	0.102	10.0	02/20/23 15:44	
EPA 625.1	2,4-Dimethylphenol	ND	ug/L	0.0636	10.0	02/20/23 15:44	
EPA 625.1	4,6-Dinitro-2-methylphenol	ND	ug/L	1.12	10.0	02/20/23 15:44	
EPA 625.1	2,4-Dinitrophenol	ND	ug/L	5.93	10.0	02/20/23 15:44	
EPA 625.1	2-Nitrophenol	ND	ug/L	0.117	10.0	02/20/23 15:44	
EPA 625.1	4-Nitrophenol	ND	ug/L	0.143	10.0	02/20/23 15:44	
EPA 625.1	4-Chloroaniline	ND	ug/L	0.234	10.0	02/20/23 15:44	
EPA 625.1	Pentachlorophenol	ND	ug/L	0.313	10.0	02/20/23 15:44	
EPA 625.1	Phenol	ND	ug/L	4.33	10.0	02/20/23 15:44	
EPA 625.1	2,4,6-Trichlorophenol	ND	ug/L	0.100	10.0	02/20/23 15:44	
EPA 625.1	Nitrobenzene-d5 (S)	**30.7**	%		15.0-314	02/20/23 15:44	
EPA 625.1	2-Fluorobiphenyl (S)	**43.1**	%		22.0-127	02/20/23 15:44	
EPA 625.1	Terphenyl-d14 (S)	**31.8**	%		29.0-141	02/20/23 15:44	
EPA 625.1	Phenol-d5 (S)	**8.24**	%		8.00-424	02/20/23 15:44	
EPA 625.1	2-Fluorophenol (S)	**12.9**	%		10.0-120	02/20/23 15:44	
EPA 625.1	2,4,6-Tribromophenol (S)	**35.2**	%		10.0-153	02/20/23 15:44	
SM 2540C 2011	Total Dissolved Solids	**145**	mg/L	10.0	10.0	02/20/23 07:27	

Sample: Spanish Fort 11-Grab **Lab ID:** 20269930002 Collected: 02/15/23 06:30 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 624.1	Acrolein	ND	ug/L	2.3	20.0	02/17/23 14:06	AC
EPA 624.1	Acrylonitrile	ND	ug/L	2.1	20.0	02/17/23 14:06	
EPA 624.1	Benzene	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	Bromodichloromethane	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	Bromoform	ND	ug/L	1.6	5.0	02/17/23 14:06	
EPA 624.1	Bromomethane	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	Carbon tetrachloride	ND	ug/L	1.1	5.0	02/17/23 14:06	
EPA 624.1	Chlorobenzene	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	Chloroethane	ND	ug/L	1.2	5.0	02/17/23 14:06	
EPA 624.1	2-Chloroethylvinyl ether	ND	ug/L	3.2	20.0	02/17/23 14:06	c3
EPA 624.1	Chloroform	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	Chloromethane	ND	ug/L	1.2	5.0	02/17/23 14:06	
EPA 624.1	Dibromochloromethane	ND	ug/L	1.6	5.0	02/17/23 14:06	
EPA 624.1	1,2-Dichlorobenzene	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	1,3-Dichlorobenzene	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	1,4-Dichlorobenzene	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	1,1-Dichloroethane	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	1,2-Dichloroethane	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	1,1-Dichloroethene	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	trans-1,2-Dichloroethene	ND	ug/L	1.3	5.0	02/17/23 14:06	

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Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 11-Grab **Lab ID: 20269930002** Collected: 02/15/23 06:56 Matrix: Water

Method	Parameters	Results	Units	MDL	Report Limit	Analyzed	Qualifiers
EPA 624.1	1,2-Dichloropropane	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	cis-1,3-Dichloropropene	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	trans-1,3-Dichloropropene	ND	ug/L	1.6	5.0	02/17/23 14:06	
EPA 624.1	Ethylbenzene	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	Methylene Chloride	ND	ug/L	4.6	5.0	02/17/23 14:06	
EPA 624.1	1,1,2,2-Tetrachloroethane	ND	ug/L	1.9	5.0	02/17/23 14:06	
EPA 624.1	Tetrachloroethene	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	Toluene	ND	ug/L	2.1	5.0	02/17/23 14:06	
EPA 624.1	1,1,1-Trichloroethane	ND	ug/L	1.2	5.0	02/17/23 14:06	
EPA 624.1	1,1,2-Trichloroethane	ND	ug/L	1.5	5.0	02/17/23 14:06	
EPA 624.1	Trichloroethene	ND	ug/L	1.4	5.0	02/17/23 14:06	
EPA 624.1	Trichlorofluoromethane	ND	ug/L	1.2	5.0	02/17/23 14:06	
EPA 624.1	Vinyl chloride	ND	ug/L	1.1	5.0	02/17/23 14:06	
EPA 624.1	4-Bromofluorobenzene (S)	**95**	%.		82-118	02/17/23 14:06	
EPA 624.1	Toluene-d8 (S)	**95**	%.		81-120	02/17/23 14:06	
EPA 624.1	Dibromofluoromethane (S)	**120**	%.		77-123	02/17/23 14:06	
EPA 1664B, 2010	Oil and Grease	ND	mg/L	2.2	5.0	02/17/23 07:14	
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.0093	0.020	02/22/23 15:45	
SM 4500-CN-E	Cyanide	ND	mg/L	0.014	0.020	02/20/23 12:16	

ANALYTE QUALIFIERS

AC	Analysis of acrolein and/or acrylonitrile was performed from a sample that was field preserved to pH < 2, which is less than the pH range of 4-5 specified in the test method and required for NPDES compliance per 40CFR Part 136.
L0	Analyte recovery in the laboratory control sample (LCS) was outside QC limits.
M1	Matrix spike recovery exceeded QC limits. Batch accepted based on laboratory control sample (LCS) recovery.
N2	Analyte reported using a calibration and validation based on Azobenzene (CAS 103-33-3). 1,2-Diphenylhydrazine decomposes into Azobenzene during the analysis.
c3	Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by: Kyle A Williams

Kyle Williams
251-344-9106
kyle.williams@pacelabs.com

Pace Analytical Services New Orleans

Florida Department of Health (NELAC): E87595
Illinois Environmental Protection Agency: 0025721
Kansas Department of Health and Environment (NELAC): E-10266
Louisiana Dept. of Environmental Quality (NELAC/LELAP): 02006
Texas Commission on Env. Quality (NELAC): T104704405-09-TX
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-00119

Pace Analytical Services National

12065 Lebanon Road, Mt. Juliet, TN 37122
Alabama Certification #: 40660
Alaska Certification 17-026
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Arkansas Certification #: 88-0469
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DOD Certification: #1461.01
EPA# TN00003
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Georgia Certification: NELAP
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Kentucky Certification #: 90010
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Massachusetts Certification #: M-TN003
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Mississippi Certification #: TN00003
Missouri Certification #: 340
Montana Certification #: CERT0086
Nebraska Certification #: NE-OS-15-05

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Mobile. AL 36609
251-344-9106

Pace Analytical Services National

Nevada Certification #: TN-03-2002-34
New Hampshire Certification #: 2975
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North Carolina Drinking Water Certification #: 21704
North Carolina Environmental Certificate #: 375
North Dakota Certification #: R-140
Ohio VAP Certification #: CL0069
Oklahoma Certification #: 9915
Oregon Certification #: TN200002
Pennsylvania Certification #: 68-02979
Rhode Island Certification #: LAO00356
South Carolina Certification #: 84004
South Dakota Certification
Tennessee DW/Chem/Micro Certification #: 2006
Texas Certification #: T 104704245-17-14
Texas Mold Certification #: LAB0152
USDA Soil Permit #: P330-15-00234
Utah Certification #: TN00003
Vermont Dept. of Health: ID# VT-2006
Virginia Certification #: VT2006
Virginia Certification #: 460132
Washington Certification #: C847
West Virginia Certification #: 233
Wisconsin Certification #: 998093910
Wyoming UST Certification #: via A2LA 2926.01
A2LA-ISO 17025 Certification #: 1461.01
A2LA-ISO 17025 Certification #: 1461.02
AIHA-LAP/LLC EMLAP Certification #:100789

Pace

CHAIN-OF-CUSTODY / Analytical Request Dc

WO# : 20269930

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields mus

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at https://info.paceta

Section A Required Client Information:	Section B Required Project Information:	Section C Invoice Information:	
Company: BCSS	Report To: David Flesch	Attention:	
Address: P.O. Box 1628	Copy To:	Company Name:	
Foley, AL 36536		Address:	Regulatory Agency
Email: david.flesch@baldwincountysewer.com	Purchase Order #:	Pace Quote:	
Phone: (251)747-2977 Fax:	Project Name: Spanish Fort 0011 - Form 2A Permit	Pace Project Manager: savannah.wallace@pacelabs.com,	State / Location
Requested Due Date:	Project #:	Pace Profile #: 6947	AL

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique MATRIX: Drinking Water DW, Water WT, Waste Water WW, Product P, Soil/Solid SL, Oil OL, Wipe WP, Air AR, Other OT, Tissue TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Requested Analysis Filtered (Y/N) Y/N	Analyses Test	TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles	[illegible]	Residual Chlorine (Y/N)
1	Spanish Fort 0011-Comp 11	WT	C	2-14	700	2-15	600	1	4	3		1							X	X	X					
2	Spanish Fort 0011- Grab 11	WT	G	—	—	2-15	656	18	#6		1		4	1	1							X	X	X	X	
3																										
4																										
5																										
6																										
7																										
8																										
9																										
10																										
11																										
12																										

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS			
	Wayne Nicl	2-15	922		2/16	922				
		2/15	1525		2/15	1525	1.3	4	N	4

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER: WAYNE Nicl

SIGNATURE of SAMPLER: Wayne Nicl DATE Signed: 2-15

TEMP in C	Received on ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)

Pace Analytical

Sample Condition Upon Receipt

4320 Midmost Dr Mobile, AL 36609

Project #:

WO#: 20269930

PM: KAW Due Date: 02/22/2

CLIENT: MO-BCSS

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: 2/15/23 MT

Temp must be measured from temperature blank when present

			Comments:
Temperature Blank Present:	☐Yes	☑No ☐N/A	1
Chain of Custody Present:	☑Yes	☐No ☐N/A	2
Chain of Custody Complete:	☑Yes	☐No ☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No ☐N/A	4
Sampler Name on COC:	☑Yes	☐No ☐N/A	5
Short Hold Time Analyses (<72 hr):	☐Yes	☑No ☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No ☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No ☐N/A	8
Sufficient Volume:	☑Yes	☐No ☐N/A	9
Correct Containers Used:	☑Yes	☐No ☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No ☑N/A	11
Sample Labels match COC:	☑Yes	☐No ☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No ☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No ☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No ☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No ☐N/A	16
Trip Blank Present:	☐Yes	☑No	17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 06/29/2021
Date Received: 06/22/2021

Project: Spanish Fort 0011- Form 2A
Pace Project No.: 20212370

Sample: Spanish Fort 0011- Comp **Lab ID: 20212370001** Collected: 06/22/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	10.0	06/24/21 18:40	
EPA 200.7	Beryllium	ND	ug/L	5.0	06/24/21 18:40	
EPA 200.7	Cadmium	ND	ug/L	5.0	06/24/21 18:40	
EPA 200.7	Chromium	ND	ug/L	10.0	06/24/21 18:40	
EPA 200.7	Copper	**20.4**	ug/L	10.0	06/24/21 18:40	
EPA 200.7	Iron	**273**	ug/L	50.0	06/24/21 18:40	
EPA 200.7	Lead	ND	ug/L	5.0	06/24/21 18:40	
EPA 200.7	Nickel	ND	ug/L	40.0	06/24/21 18:40	
EPA 200.7	Selenium	ND	ug/L	20.0	06/24/21 18:40	
EPA 200.7	Silver	ND	ug/L	10.0	06/24/21 18:40	
EPA 200.7	Thallium	ND	ug/L	10.0	06/24/21 18:40	
EPA 200.7	Total Hardness	**57600**	ug/L	2000	06/24/21 18:40	
EPA 200.7	Zinc	**366**	ug/L	20.0	06/24/21 18:40	
EPA 625	Acenaphthene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Acenaphthylene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Anthracene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Benzidine	ND	ug/L	30.3	06/28/21 10:38	
EPA 625	Benzo(a)anthracene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Benzo(a)pyrene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Benzo(b)fluoranthene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Benzo(g,h,i)perylene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Benzo(k)fluoranthene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	4-Bromophenylphenyl ether	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Butylbenzylphthalate	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	4-Chloro-3-methylphenol	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	3&4-Chloroaniline	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	bis(2-Chloroethoxy)methane	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	bis(2-Chloroethyl) ether	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2-Chloronaphthalene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2-Chlorophenol	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	4-Chlorophenylphenyl ether	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Chrysene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Dibenz(a,h)anthracene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	1,2-Dichlorobenzene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	1,3-Dichlorobenzene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	1,4-Dichlorobenzene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	3,3'-Dichlorobenzidine	ND	ug/L	20.2	06/28/21 10:38	
EPA 625	2,4-Dichlorophenol	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Diethylphthalate	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2,4-Dimethylphenol	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Dimethylphthalate	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Di-n-butylphthalate	ND	ug/L	10.1	06/28/21 10:38	

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Sample: Spanish Fort 0011- Comp **Lab ID: 20212370001** Collected: 06/22/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 625	4,6-Dinitro-2-methylphenol	ND	ug/L	25.3	06/28/21 10:38	
EPA 625	2,4-Dinitrophenol	ND	ug/L	40.4	06/28/21 10:38	
EPA 625	2,4-Dinitrotoluene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2,6-Dinitrotoluene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Di-n-octylphthalate	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	1,2-Diphenylhydrazine	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	bis(2-Ethylhexyl)phthalate	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Fluoranthene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Fluorene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Hexachloro-1,3-butadiene	ND	ug/L	20.2	06/28/21 10:38	
EPA 625	Hexachlorobenzene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Hexachlorocyclopentadiene	ND	ug/L	40.4	06/28/21 10:38	
EPA 625	Hexachloroethane	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Indeno(1,2,3-cd)pyrene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Isophorone	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Naphthalene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Nitrobenzene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2-Nitrophenol	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	4-Nitrophenol	ND	ug/L	40.4	06/28/21 10:38	
EPA 625	N-Nitrosodimethylamine	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	N-Nitroso-di-n-propylamine	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	N-Nitrosodiphenylamine	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2,2'-Oxybis(1-chloropropane)	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Pentachlorophenol	ND	ug/L	40.4	06/28/21 10:38	
EPA 625	Phenanthrene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Phenol	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	Pyrene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	1,2,4-Trichlorobenzene	ND	ug/L	10.1	06/28/21 10:38	
EPA 625	2,4,6-Trichlorophenol	ND	ug/L	10.1	06/28/21 10:38	
SM 2540C	Total Dissolved Solids	355	mg/L	10.0	06/25/21 13:07	

Sample: Spanish Fort 0011- Grab **Lab ID: 20212370002** Collected: 06/22/21 05:15 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	Acrolein	ND	ug/L	20.0	06/26/21 00:26	AC
EPA 624.1	Acrylonitrile	ND	ug/L	20.0	06/26/21 00:26	AC
EPA 624.1	Benzene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Bromodichloromethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Bromoform	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Bromomethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Carbon tetrachloride	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Chlorobenzene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Chloroethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	2-Chloroethylvinyl ether	ND	ug/L	20.0	06/26/21 00:26	c3
EPA 624.1	Chloroform	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Chloromethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Dibromochloromethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,2-Dichlorobenzene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,3-Dichlorobenzene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,4-Dichlorobenzene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,1-Dichloroethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,2-Dichloroethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,1-Dichloroethene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	trans-1,2-Dichloroethene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,2-Dichloropropane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	cis-1,3-Dichloropropene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	trans-1,3-Dichloropropene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Ethylbenzene	ND	ug/L	5.0	06/26/21 00:26	L1
EPA 624.1	Methylene Chloride	ND	ug/L	5.0	06/26/21 00:26	

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0011- Grab **Lab ID: 20212370002** Collected: 06/22/21 05:15 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	1,1,2,2-Tetrachloroethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Tetrachloroethene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Toluene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,1,1-Trichloroethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	1,1,2-Trichloroethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Trichloroethene	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Trichlorofluoromethane	ND	ug/L	5.0	06/26/21 00:26	
EPA 624.1	Vinyl chloride	ND	ug/L	5.0	06/26/21 00:26	
EPA 1664B	Oil and Grease	ND	mg/L	5.3	06/28/21 11:39	P1
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.020	06/28/21 13:10	
SM 4500-CN-E	Cyanide	ND	mg/L	0.020	06/24/21 13:02	

BATCH QUALIFIERS

Batch: 229107

[M5] A matrix spike/matrix spike duplicate was not performed for this batch due to insufficient sample volume.

ANALYTE QUALIFIERS

AC Analysis of acrolein and/or acrylonitrile was performed from a sample that was field preserved to pH < 2, which is less than the pH range of 4-5 specified in the test method and required for NPDES compliance per 40CFR Part 136.

L1 Analyte recovery in the laboratory control sample (LCS) was above QC limits. Results for this analyte in associated samples may be biased high.

P1 Routine initial sample volume or weight was not used for extraction, resulting in elevated reporting limits.

c3 Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by:

Savannah Wallace
251-344-9106
savannah.wallace@pacelabs.com

Pace Analytical

CHAIN-OF-CUSTODY / Analytical Req

WO# : 20212370

The Chain-of-Custody is a LEGAL DOCUMENT. All relevan

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at http:

Section A	Section B	Section C
Required Client Information:	**Required Project Information:**	**Invoice Information:**
Company: BCSS	Report To: David Flesch	Attention:
Address: P.O. Box 1628	Copy To:	Company Name:
Foley, AL 36535		Address:
Email: david.flesch@baldwincountysewer.com	Purchase Order #:	Pace Quote:
Phone: 251-964-7586 Fax:	Project Name: Spanish Fort 0011 - Form 2A Permit	Pace Project Manager: savannah.wallace@pacelabs.com
Requested Due Date:	Project #:	Pace Profile #: 8947

Regulatory Agency	State / Location
	AL

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Y/N	Analyses Test: TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles	[redacted]	TRO				Residual Chlorine (Y/N)
1	Spanish Fort 0011-Comp	WT	C	6/21	600	6/22	500	1	3										x	x	x								
2	Spanish Fort 0011- Grab	WT	G	—	—	6/22	515		6													x	x	x	x		X			
3																														
4																														
5																														
6																														
7																														
8																														
9																														
10																														
11																														
12																														

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS			
	David Flesch	6/22	1434	David Flesch	6/22/21	1434				
	David Flesch	6/22/21	1523	DM	6/22/21	1523	19	4	N	4

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER: FLESCH

SIGNATURE of SAMPLER: David Flesch

DATE Signed: 6/22

TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)

Pace Analytical

Sample Condition Upon Receipt

4320 Midmost Dr Mobile AL 36609

WO#: 20212370

PM: SLW Due Date: 06/29/21

CLIENT: MO-BCSS

Project #:

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None

Samples on ice: [see COC]

Date and Initials of person examining contents: NAS 01/22/21

Cooler Temperature: [see COC]

Temp must be measured from temperature blank when present

				Comments:
Temperature Blank Present:	☐Yes	☑No	☐N/A	1
Chain of Custody Present:	☑Yes	☐No	☐N/A	2
Chain of Custody Complete:	☑Yes	☐No	☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No	☐N/A	4
Sampler Name on COC:	☑Yes	☐No	☐N/A	5
Short Hold Time Analyses (<72 hr):	☐Yes	☑No	☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No	☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No	☐N/A	8
Sufficient Volume:	☑Yes	☐No	☐N/A	9
Correct Containers Used:	☑Yes	☐No	☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No	☑N/A	11
Sample Labels match COC:	☑Yes	☐No	☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No	☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No	☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No	☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No	☐N/A	16
Trip Blank Present:	☐Yes	☑No		17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 03/09/2021
Date Received: 03/02/2021

Project: Spanish Fort 0011 Form 2A
Pace Project No.: 20192187

Sample: Spanish Fort 0011 Comp **Lab ID: 20192187001** Collected: 03/02/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	10.0	03/04/21 11:04	
EPA 200.7	Beryllium	ND	ug/L	5.0	03/04/21 11:04	
EPA 200.7	Cadmium	ND	ug/L	5.0	03/04/21 11:04	
EPA 200.7	Chromium	ND	ug/L	10.0	03/04/21 11:04	
EPA 200.7	Copper	**15.8**	ug/L	10.0	03/04/21 11:04	
EPA 200.7	Lead	ND	ug/L	5.0	03/04/21 11:04	
EPA 200.7	Nickel	ND	ug/L	40.0	03/04/21 11:04	
EPA 200.7	Selenium	ND	ug/L	20.0	03/04/21 11:04	
EPA 200.7	Silver	ND	ug/L	10.0	03/04/21 11:04	
EPA 200.7	Thallium	ND	ug/L	10.0	03/04/21 11:04	
EPA 200.7	Total Hardness	**57000**	ug/L	2000	03/04/21 11:04	
EPA 200.7	Zinc	**331**	ug/L	20.0	03/04/21 11:04	
EPA 625	Acenaphthene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Acenaphthylene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Anthracene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Benzidine	ND	ug/L	29.6	03/05/21 18:11	
EPA 625	Benzo(a)anthracene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Benzo(a)pyrene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Benzo(b)fluoranthene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Benzo(g,h,i)perylene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Benzo(k)fluoranthene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	4-Bromophenylphenyl ether	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Butylbenzylphthalate	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	4-Chloro-3-methylphenol	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	3&4-Chloroaniline	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	bis(2-Chloroethoxy)methane	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	bis(2-Chloroethyl) ether	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2-Chloronaphthalene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2-Chlorophenol	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	4-Chlorophenylphenyl ether	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Chrysene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Dibenz(a,h)anthracene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	1,2-Dichlorobenzene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	1,3-Dichlorobenzene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	1,4-Dichlorobenzene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	3,3'-Dichlorobenzidine	ND	ug/L	19.8	03/05/21 18:11	
EPA 625	2,4-Dichlorophenol	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Diethylphthalate	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2,4-Dimethylphenol	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Dimethylphthalate	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Di-n-butylphthalate	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	4,6-Dinitro-2-methylphenol	ND	ug/L	24.7	03/05/21 18:11	

Pace Analytical®
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Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0011 Comp **Lab ID: 20192187001** Collected: 03/02/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 625	2,4-Dinitrophenol	ND	ug/L	39.5	03/05/21 18:11	
EPA 625	2,4-Dinitrotoluene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2,6-Dinitrotoluene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Di-n-octylphthalate	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	1,2-Diphenylhydrazine	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	bis(2-Ethylhexyl)phthalate	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Fluoranthene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Fluorene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Hexachloro-1,3-butadiene	ND	ug/L	19.8	03/05/21 18:11	
EPA 625	Hexachlorobenzene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Hexachlorocyclopentadiene	ND	ug/L	39.5	03/05/21 18:11	
EPA 625	Hexachloroethane	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Indeno(1,2,3-cd)pyrene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Isophorone	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Naphthalene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Nitrobenzene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2-Nitrophenol	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	4-Nitrophenol	ND	ug/L	39.5	03/05/21 18:11	
EPA 625	N-Nitrosodimethylamine	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	N-Nitroso-di-n-propylamine	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	N-Nitrosodiphenylamine	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2,2'-Oxybis(1-chloropropane)	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Pentachlorophenol	ND	ug/L	39.5	03/05/21 18:11	
EPA 625	Phenanthrene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Phenol	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	Pyrene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	1,2,4-Trichlorobenzene	ND	ug/L	9.9	03/05/21 18:11	
EPA 625	2,4,6-Trichlorophenol	ND	ug/L	9.9	03/05/21 18:11	
SM 2540C	Total Dissolved Solids	**415**	mg/L	10.0	03/04/21 12:01	

Sample: Spanish Fort 0011 Grab **Lab ID: 20192187002** Collected: 03/02/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624	Acrolein	ND	ug/L	20.0	03/04/21 05:26	AC
EPA 624	Acrylonitrile	ND	ug/L	20.0	03/04/21 05:26	AC
EPA 624	Benzene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Bromodichloromethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Bromoform	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Bromomethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Carbon tetrachloride	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Chlorobenzene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Chloroethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	2-Chloroethylvinyl ether	ND	ug/L	20.0	03/04/21 05:26	c3
EPA 624	Chloroform	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Chloromethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Dibromochloromethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,2-Dichlorobenzene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,3-Dichlorobenzene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,4-Dichlorobenzene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,1-Dichloroethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,2-Dichloroethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,1-Dichloroethene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	trans-1,2-Dichloroethene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,2-Dichloropropane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	cis-1,3-Dichloropropene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	trans-1,3-Dichloropropene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Ethylbenzene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Methylene Chloride	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,1,2,2-Tetrachloroethane	ND	ug/L	5.0	03/04/21 05:26	

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0011 Grab **Lab ID: 20192187002** Collected: 03/02/21 05:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624	Tetrachloroethene	ND	ug/L	5.0	03/04/21 05:26	L1
EPA 624	Toluene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,1,1-Trichloroethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	1,1,2-Trichloroethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Trichloroethene	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Trichlorofluoromethane	ND	ug/L	5.0	03/04/21 05:26	
EPA 624	Vinyl chloride	ND	ug/L	5.0	03/04/21 05:26	
EPA 1664B	Oil and Grease	ND	mg/L	5.2	03/04/21 09:03	P1
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.020	03/04/21 12:59	
SM 4500-CN-E	Cyanide	ND	mg/L	0.020	03/05/21 13:52	

BATCH QUALIFIERS

Batch: 218216

[M5] A matrix spike/matrix spike duplicate was not performed for this batch due to insufficient sample volume.

ANALYTE QUALIFIERS

AC Analysis of acrolein and/or acrylonitrile was performed from a sample that was field preserved to pH < 2, which is less than the pH range of 4-5 specified in the test method and required for NPDES compliance per 40CFR Part 136.

L1 Analyte recovery in the laboratory control sample (LCS) was above QC limits. Results for this analyte in associated samples may be biased high.

P1 Routine initial sample volume or weight was not used for extraction, resulting in elevated reporting limits.

c3 Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by:

Savannah Wallace
251-344-9106
savannah.wallace@pacelabs.com

Pace Analytical Services New Orleans

California Env. Lab Accreditation Program Branch: 11277CA
Florida Department of Health (NELAC): E87595
Illinois Environmental Protection Agency: 0025721
Kansas Department of Health and Environment (NELAC): E-10266
Louisiana Dept. of Environmental Quality (NELAC/LELAP): 02006
Texas Commission on Env. Quality (NELAC): T104704405-09-TX
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-00119

Pace Analytical

CHAIN-OF-CUSTODY / Analytical Request Do

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must

WO# : 20192187

20192187

Section A Required Client Information:		Section B Required Project Information:		Section C Invoice Information:	
Company:	BCSS	Report To:	David Flesch	Attention:	
Address:	P.O. Box 1628	Copy To:		Company Name:	
Foley, AL 36536				Address	
Email:	david.flesch@baldwincountysewer.com	Purchase Order #:		Pace Quote:	
Phone:	251-964-7586 Fax	Project Name:	Spanish Fort 0011 - Form 2A Permit	Pace Project Manager:	savannah.wallace@pacelabs.com
Requested Due Date:		Project #:		Pace Profile #:	8947

Regulatory Agency	
State / Location	AL

Requested Analysis Filtered (Y/N)

ITEM #	SAMPLE ID (One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique)	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Y/N	Analyses Test: TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 Volatiles			Residual Chlorine (Y/N)	
1	Spanish Fort 0011-Comp	WT	C	3/1	600	3/2	500	3											x	x	x						TOTAL 9 BOTTLES
2	Spanish Fort 0011- Grab	WT	G	—	—	3/2	500	19														x	x	x	x		
3																											
4																											
5																											
6																											
7																											
8																											
9																											
10																											
11																											
12																											

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS: TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
		3/2	1500		3/2	1500				
		3/2	1610		3/2	1610	2.3	Y	N	Y

SAMPLER NAME AND SIGNATURE		
PRINT Name of SAMPLER:	FLESCH	
SIGNATURE of SAMPLER:		DATE Signed: 3/2

Face Analytical

Sample Condition Upon Receipt

WO#: 20192187

PM: SLW Due Date: 03/09/21

CLIENT: MO-BCSS

4320 Mikmosi Dr Mobile, AL 36609

Project #:

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: Wet Blue None Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: MAS 3/2/21

Temp must be measured from temperature blank when present

			Comments:
Temperature Blank Present:	☐Yes	☐No ☐N/A	1
Chain of Custody Present:	☑Yes	☐No ☐N/A	2
Chain of Custody Complete:	☑Yes	☐No ☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No ☐N/A	4
Sampler Name on COC:	☑Yes	☐No ☐N/A	5
Short Hold Time Analyses (<72 hr):	☐Yes	☑No ☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No ☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No ☐N/A	8
Sufficient Volume:	☑Yes	☐No ☐N/A	9
Correct Containers Used:	☑Yes	☐No ☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No ☑N/A	11
Sample Labels match COC:	☑Yes	☐No ☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No ☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No ☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No ☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No ☐N/A	16
Trip Blank Present:	☐Yes	☑No	17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Pace Analytical Services, LLC
4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Laboratory Report

David Flesch
BCSS
P.O. Box 1628
Foley, AL 36536

Report Date: 01/19/2022
Date Received: 01/11/2022

Project: Spanish Fort 11 2A 1/11/22
Pace Project No.: 20231344

Sample: Spanish Fort 0011-Comp **Lab ID: 20231344001** Collected: 01/11/22 04:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 200.7	Arsenic	ND	ug/L	10.0	01/14/22 14:24	
EPA 200.7	Beryllium	ND	ug/L	5.0	01/14/22 14:24	
EPA 200.7	Cadmium	ND	ug/L	5.0	01/14/22 14:24	
EPA 200.7	Chromium	ND	ug/L	10.0	01/14/22 14:24	
EPA 200.7	Copper	**20.2**	ug/L	10.0	01/14/22 14:24	
EPA 200.7	Lead	ND	ug/L	5.0	01/14/22 14:24	
EPA 200.7	Nickel	ND	ug/L	40.0	01/14/22 14:24	
EPA 200.7	Selenium	ND	ug/L	20.0	01/14/22 14:24	
EPA 200.7	Silver	ND	ug/L	10.0	01/14/22 14:24	
EPA 200.7	Thallium	ND	ug/L	10.0	01/14/22 14:24	
EPA 200.7	Total Hardness	**44100**	ug/L	2000	01/14/22 14:24	
EPA 200.7	Zinc	**123**	ug/L	20.0	01/14/22 14:24	
EPA 625.1	Acenaphthene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Acenaphthylene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Anthracene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Benzidine	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Benzo(a)anthracene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Benzo(b)fluoranthene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Benzo(k)fluoranthene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Benzo(g,h,i)perylene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Benzo(a)pyrene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	bis(2-Chloroethoxy)methane	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	bis(2-Chloroethyl) ether	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,2'-Oxybis(1-chloropropane)	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	4-Bromophenylphenyl ether	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2-Chloronaphthalene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	4-Chlorophenylphenyl ether	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Chrysene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Dibenz(a,h)anthracene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	1,2-Dichlorobenzene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	1,3-Dichlorobenzene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	1,4-Dichlorobenzene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	3,3'-Dichlorobenzidine	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,4-Dinitrotoluene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,6-Dinitrotoluene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Fluoranthene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Fluorene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Hexachlorobenzene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Hexachloro-1,3-butadiene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Hexachlorocyclopentadiene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Hexachloroethane	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Indeno(1,2,3-cd)pyrene	ND	ug/L	1.00	01/17/22 16:00	

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4320 Midmost Dr
Mobile, AL 36609
251-344-9106

Sample: Spanish Fort 0011-Comp **Lab ID: 20231344001** Collected: 01/11/22 04:00 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 625.1	Isophorone	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Naphthalene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Nitrobenzene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	N-Nitrosodimethylamine	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	N-Nitrosodiphenylamine	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	N-Nitroso-di-n-propylamine	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Phenanthrene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	Butylbenzylphthalate	ND	ug/L	3.00	01/17/22 16:00	
EPA 625.1	bis(2-Ethylhexyl)phthalate	ND	ug/L	3.00	01/17/22 16:00	
EPA 625.1	Di-n-butylphthalate	ND	ug/L	3.00	01/17/22 16:00	
EPA 625.1	Diethylphthalate	ND	ug/L	3.00	01/17/22 16:00	
EPA 625.1	Dimethylphthalate	ND	ug/L	3.00	01/17/22 16:00	
EPA 625.1	Di-n-octylphthalate	ND	ug/L	3.00	01/17/22 16:00	
EPA 625.1	Pyrene	ND	ug/L	1.00	01/17/22 16:00	
EPA 625.1	1,2,4-Trichlorobenzene	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	1,2-Diphenylhydrazine	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	4-Chloro-3-methylphenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2-Chlorophenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,4-Dichlorophenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,4-Dimethylphenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	4,6-Dinitro-2-methylphenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,4-Dinitrophenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2-Nitrophenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	4-Nitrophenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	4-Chloroaniline	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Pentachlorophenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	Phenol	ND	ug/L	10.0	01/17/22 16:00	
EPA 625.1	2,4,6-Trichlorophenol	ND	ug/L	10.0	01/17/22 16:00	
SM 2540C 2011	Total Dissolved Solids	**480**	mg/L	10.0	01/13/22 07:11	

Sample: Spanish Fort 0011-Grab **Lab ID: 20231344002** Collected: 01/11/22 04:15 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	Acrolein	ND	ug/L	20.0	01/13/22 13:22	
EPA 624.1	Acrylonitrile	ND	ug/L	20.0	01/13/22 13:22	
EPA 624.1	Benzene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Bromodichloromethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Bromoform	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Bromomethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Carbon tetrachloride	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Chlorobenzene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Chloroethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	2-Chloroethylvinyl ether	ND	ug/L	20.0	01/13/22 13:22	c3
EPA 624.1	Chloroform	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Chloromethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Dibromochloromethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,2-Dichlorobenzene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,3-Dichlorobenzene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,4-Dichlorobenzene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,1-Dichloroethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,2-Dichloroethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,1-Dichloroethene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	trans-1,2-Dichloroethene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,2-Dichloropropane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	cis-1,3-Dichloropropene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	trans-1,3-Dichloropropene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Ethylbenzene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Methylene Chloride	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,1,2,2-Tetrachloroethane	ND	ug/L	5.0	01/13/22 13:22	

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Sample: Spanish Fort 0011-Grab **Lab ID: 20231344002** Collected: 01/11/22 04:15 Matrix: Water

Method	Parameters	Results	Units	Report Limit	Analyzed	Qualifiers
EPA 624.1	Tetrachloroethene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Toluene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,1,1-Trichloroethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	1,1,2-Trichloroethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Trichloroethene	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Trichlorofluoromethane	ND	ug/L	5.0	01/13/22 13:22	
EPA 624.1	Vinyl chloride	ND	ug/L	5.0	01/13/22 13:22	
EPA 1664B, 2010	Oil and Grease	ND	mg/L	6.0	01/13/22 10:11	P1
EPA 420.1	Phenolics, Total Recoverable	ND	mg/L	0.020	01/17/22 13:54	
SM 4500-CN-E	Cyanide	**0.020**	mg/L	0.020	01/18/22 10:51	

ANALYTE QUALIFIERS

P1	Routine initial sample volume or weight was not used for extraction, resulting in elevated reporting limits.
c3	Analysis of 2-chloroethyl vinyl ether was performed from a sample that was field preserved to pH < 2 with HCl. Acid preservation is not allowed for this parameter by the test method or for NPDES compliance per 40CFR Part 136.

Reviewed by:

Savannah Wallace
251-344-9106
savannah.wallace@pacelabs.com

Pace Analytical Services New Orleans

Florida Department of Health (NELAC): E87595
Illinois Environmental Protection Agency: 0025721
Kansas Department of Health and Environment (NELAC): E-10266
Louisiana Dept. of Environmental Quality (NELAC/LELAP): 02006
Texas Commission on Env. Quality (NELAC): T104704405-09-TX
U.S. Dept. of Agriculture Foreign Soil Import: P330-10-00119

Pace Analytical Services National

12065 Lebanon Road, Mt. Juliet, TN 37122
Alabama Certification #: 40660
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Arizona Certification #: AZ0612
Arkansas Certification #: 88-0469
California Certification #: 2932
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Connecticut Certification #: PH-0197
DOD Certification: #1461.01
EPA# TN00003
Florida Certification #: E87487
Georgia DW Certification #: 923
Georgia Certification: NELAP
Idaho Certification #: TN00003
Illinois Certification #: 200008
Indiana Certification #: C-TN-01
Iowa Certification #: 364
Kansas Certification #: E-10277
Kentucky UST Certification #: 16
Kentucky Certification #: 90010
Louisiana Certification #: AI30792
Louisiana DW Certification #: LA180010
Maine Certification #: TN0002
Maryland Certification #: 324
Massachusetts Certification #: M-TN003
Michigan Certification #: 9958
Minnesota Certification #: 047-999-395
Mississippi Certification #: TN00003
Missouri Certification #: 340
Montana Certification #: CERT0086
Nebraska Certification #: NE-OS-15-05
Nevada Certification #: TN-03-2002-34
New Hampshire Certification #: 2975
New Jersey Certification #: TN002
New Mexico DW Certification
New York Certification #: 11742
North Carolina Aquatic Toxicity Certification #: 41
North Carolina Drinking Water Certification #: 21704
North Carolina Environmental Certificate #: 375
North Dakota Certification #: R-140
Ohio VAP Certification #: CL0069
Oklahoma Certification #: 9915
Oregon Certification #: TN200002
Pennsylvania Certification #: 68-02979
Rhode Island Certification #: LAO00356
South Carolina Certification #: 84004
South Dakota Certification
Tennessee DW/Chem/Micro Certification #: 2006
Texas Certification #: T 104704245-17-14
Texas Mold Certification #: LAB0152
USDA Soil Permit #: P330-15-00234
Utah Certification #: TN00003
Vermont Dept. of Health: ID# VT-2006
Virginia Certification #: VT2006
Virginia Certification #: 460132
Washington Certification #: C847
West Virginia Certification #: 233
Wisconsin Certification #: 998093910
Wyoming UST Certification #: via A2LA 2926.01

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A2LA-ISO 17025 Certification #: 1461.01
A2LA-ISO 17025 Certification #: 1461.02

AIHA-LAP/LLC EMLAP Certification #:100789

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CHAIN-OF-CUSTODY / Analytical Request D

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields mu

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at https://info.pace

WO# : 20231344

20231344

Section A	Section B	Section C
Required Client Information:	**Required Project Information:**	**Invoice Information:**
Company: BCSS	Report To: David Flesch	Attention:
Address: P.O. Box 1628	Copy To:	Company Name:
Foley, AL 36536		Address:
Email: david.flesch@baldwincountysewer.com	Purchase Order #:	Pace Quote:
Phone: (251)747-2977 Fax:	Project Name: Spanish Fort 0011 - Form 2A Permit	Pace Project Manager: savannah.wallace@pacelabs.com,
Requested Due Date:	Project #:	Pace Profile #: 8947

Regulatory Agency: | State / Location: AL

ITEM #	SAMPLE ID (One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique)	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED START DATE	COLLECTED START TIME	COLLECTED END DATE	COLLECTED END TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Requested Analysis Filtered (Y/N) Y/N	Analyses Test: TDS	Zn	EPA 625 - Semi Volatiles	Total Cyanide	Phenols	O&G	EPA 624 - Volatiles	[illegible]	Residual Chlorine (Y/N)
1	Spanish Fort 0011-Comp 11	WT	C	1/10	500	1/11	400	1											X	X	X						
2	Spanish Fort 0011- Grab 11	WT	G	—	—	1/11	415	18														X	X	X	X	X	
3																											
4																											
5																											10 BOTTLES
6																											
7																											
8																											
9																											
10																											
11																											
12																											

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS: TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
	[illegible]	1/11	1425	[illegible]	1-11-22	1425				
	[illegible]	1-11-22	1524	[illegible]	1/11/22	1524	1.7	Y	N	Y

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER: FLESCH

SIGNATURE of SAMPLER: [signature] DATE Signed: 1/11

Pace Analytical

4320 Midmost Dr Mobile, AL 36609

Sample Condition Upon Receipt

WO#: 20231344

PM: SLW Due Date: 01/18/22

CLIENT: MO-BCSS

Project:

Courier: ☑ Pace ☐ Client ☐ FedEx ☐ UPS ☐ Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact: ☐Yes ☐No

Thermometer Used: ☑ Therm Fisher IR 001 ☐ Other:

Type of Ice: (Wet) Blue None Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: MAS 11/11/22

Temp must be measured from temperature blank when present

				Comments:
Temperature Blank Present:	☐Yes	☑No	☐N/A	1
Chain of Custody Present:	☑Yes	☐No	☐N/A	2
Chain of Custody Complete:	☑Yes	☐No	☐N/A	3
Chain of Custody Relinquished:	☑Yes	☐No	☐N/A	4
Sampler Name on COC:	☑Yes	☐No	☐N/A	5
Short Hold Time Analyses (<72 hr):	☑Yes	☐No	☐N/A	6
Rush Turn Around Requested:	☐Yes	☑No	☐N/A	7
Samples Arrived within Hold Time:	☑Yes	☐No	☐N/A	8
Sufficient Volume:	☑Yes	☐No	☐N/A	9
Correct Containers Used:	☑Yes	☐No	☐N/A	10
Filtered vol. Rec. for Diss. tests	☐Yes	☐No	☑N/A	11
Sample Labels match COC:	☑Yes	☐No	☐N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	☑Yes	☐No	☐N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	☑Yes	☐No	☐N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	☑Yes	☐No	☐N/A	15 If No, was preserative added? ☐Yes ☐No If added record lot no.: HNO3 _____ H2SO4 _____
Headspace in VOA Vials (>6mm):	☐Yes	☑No	☐N/A	16
Trip Blank Present:	☐Yes	☑No		17

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____