

NPDES Permit No. IL0045373

Notice No. IL0045373-11.TTL

Public Notice Beginning Date: **December 9, 2011**

Public Notice Ending Date: **January 9, 2012**

National Pollutant Discharge Elimination System (NPDES)
Permit Program

PUBLIC NOTICE/FACT SHEET
of
Draft Reissued NPDES Permit to Discharge into Waters of the State

Public Notice/Fact Sheet Issued By:

Illinois EPA
Division of Water Pollution Control
Permit Section
1021 North Grand Avenue East
Post Office Box 19276
Springfield, Illinois 62794-9276
217/782-0610

Name and Address of Discharger:

Lake Williamson Christian Center
P.O. Box 620
Carlinville, Illinois 62626

Name and Address of Facility:

Lake Williamson Christian Center-STP
Parkside Drive
Carlinville, Illinois 62626
(Macoupin County)

The Illinois Environmental Protection Agency (IEPA) has made a tentative determination to issue a NPDES Permit to discharge into the waters of the state and has prepared a draft Permit and associated fact sheet for the above named discharger. The Public Notice period will begin and end on the dates indicated in the heading of this Public Notice/Fact Sheet. All comments on the draft Permit and requests for hearing must be received by the IEPA by U.S. Mail, carrier mail or hand delivered by the Public Notice Ending Date. Interested persons are invited to submit written comments on the draft Permit to the IEPA at the above address. Commentors shall provide his or her name and address and the nature of the issues proposed to be raised and the evidence proposed to be presented with regards to those issues. Commentors may include a request for public hearing. Persons submitting comments and/or requests for public hearing shall also send a copy of such comments or requests to the Permit applicant. The NPDES Permit and notice numbers must appear on each comment page.

The application, engineer's review notes including load limit calculations, Public Notice/Fact Sheet, draft Permit, comments received, and other documents are available for inspection and may be copied at the IEPA between 9:30 a.m. and 3:30 p.m. Monday through Friday when scheduled by the interested person.

If written comments or requests indicate a significant degree of public interest in the draft Permit, the permitting authority may, at its discretion, hold a public hearing. Public notice will be given 45 days before any public hearing. Response to comments will be provided when the final Permit is issued. For further information, please call Todd Lamm at 217/782-0610.

The following water quality and effluent standards and limitations were applied to the discharge:

Title 35: Environmental Protection, Subtitle C: Water Pollution, Chapter I: Pollution Control Board and the Clean Water Act were applied in determining the applicable standards, limitations and conditions contained in the draft Permit.

The applicant is engaged in treating domestic wastewater for the Lake Williamson Christian Center.

The length of the Permit is approximately 5 years.

The main discharge number is 001. The seven day once in ten year low flow (7Q10) of the receiving stream, unnamed tributary to Lake Williamson is 0 cfs.

The design average flow (DAF) for the facility is 0.032 million gallons per day (MGD) and the design maximum flow (DMF) for the facility is 0.08 MGD. Treatment consists of a three cell lagoon, sand filtration, subsurface seepage field, seasonal disinfection and intermittent discharge to surface water.

This reissued Permit does not increase the facility's DAF, DMF, concentration limits, and/or load limits.

Pursuant to the waiver provisions authorized by 40 CFR Section 123.24, this draft permit is within the class, type, and size for which the Regional Administrator, Region V, has waived his right to review, object, or comment on this draft permit action.

Application is made for the existing discharge which is located in Macoupin County, Illinois. The following information identifies the discharge point, receiving stream and stream classifications:

Discharge Number	Receiving Stream	Latitude	Longitude	Stream Classification	Integrity Rating
001	Unnamed tributary to Lake Williamson	39° 14' 34" North	89° 49' 34" West	General Use	Not Rated

To assist you further in identifying the location of the discharge(s) please see the attached map.

The stream segment, no segment designation, receiving the discharge from outfall 001 is not on the 303(d) list of impaired waters.

The discharge(s) from the facility is (are) proposed to be monitored and limited at all times as follows:

Discharge Number(s) and Name(s): STP Outfall 001

Load limits computed based on a design average flow (DAF) of 0.032 MGD (design maximum flow (DMF) of 0.08 MGD).

The effluent of the above discharge(s) shall be monitored and limited at all times as follows:

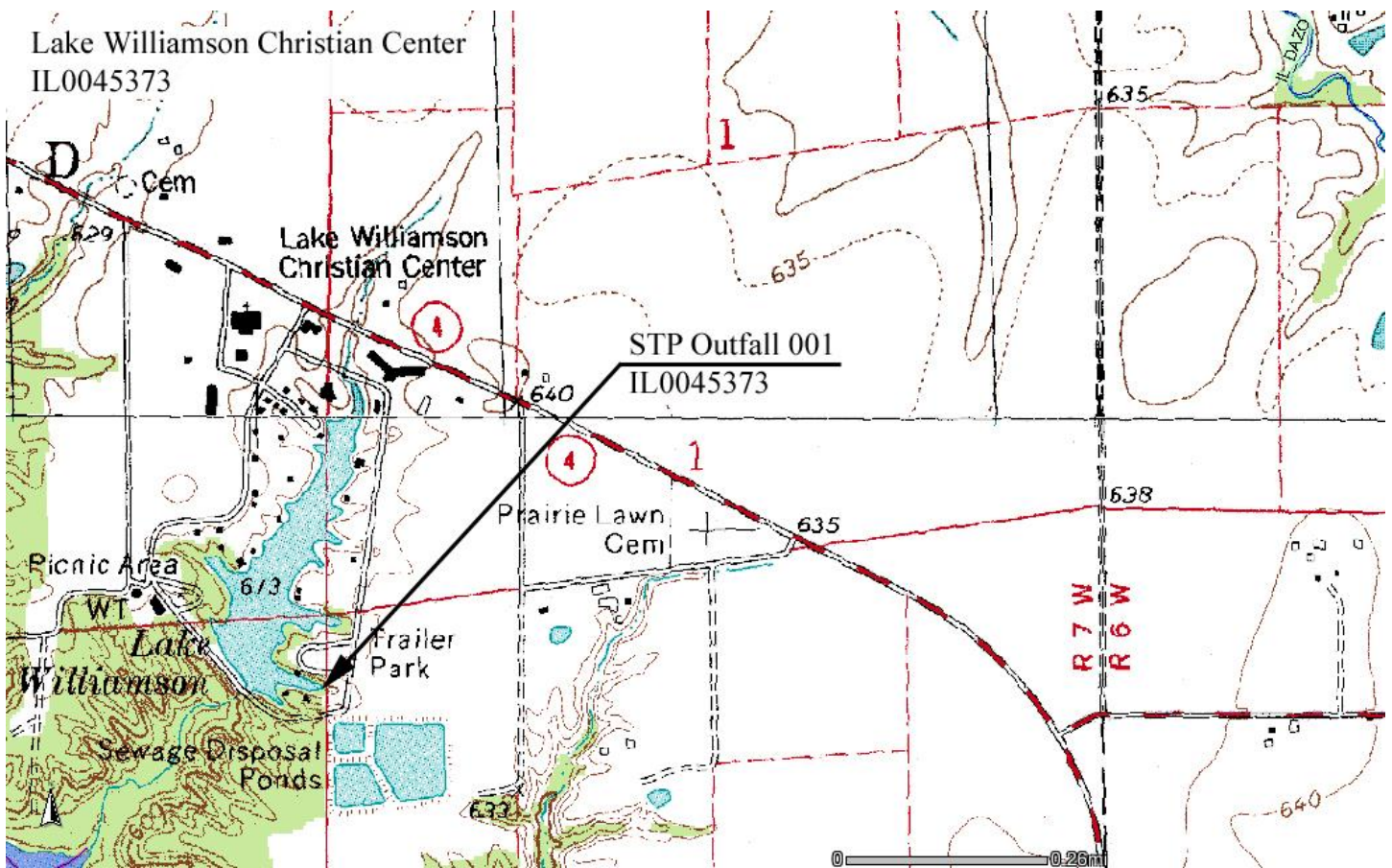
Parameter	LOAD LIMITS lbs/day DAF (DMF)*			CONCENTRATION LIMITS mg/L			Regulation
	Monthly Average	Weekly Average	Daily Maximum	Monthly Average	Weekly Average	Daily Maximum	
CBOD ₅	2.7 (6.7)		5.3 (13)	10		20	35 IAC 304.120 40 CFR 133.102
Suspended Solids	3.2 (8)		6.4 (16)	12		24	35 IAC 304.120 40 CFR 133.102
pH	Shall be in the range of 6 to 9 Standard Units						35 IAC 304.125
Fecal Coliform	**See Below						35 IAC 302.209
Chlorine Residual						0.05	35 IAC 302.208
				Monthly Avg. not less than	Weekly Avg. not less than	Daily Minimum	
Dissolved Oxygen March-July				NA	6	5	35 IAC 302.206
August-February				5.5	4	3.5	

*Load Limits are calculated by using the formula: $8.34 \times (\text{Design Average and/or Maximum Flow in MGD}) \times (\text{Applicable Concentration in mg/L})$.

** Fecal Coliform shall not exceed a geometric mean of 200 cfu/100 ml nor exceed a daily maximum value of 242×10^6 cfu/day for May through October, nor shall more than 10% of the samples during any 30 day period exceed 400 cfu/100 ml.

This draft Permit also contains the following requirements as special conditions:

1. Reopening of this Permit to include different final effluent limitations.
2. Operation of the facility by or under the supervision of a certified operator.
3. Submission of the operational data in a specified form and at a required frequency at any time during the effective term of this Permit.
4. More frequent monitoring requirement without Public Notice in the event of operational, maintenance or other problems resulting in possible effluent deterioration.
5. Prohibition against causing or contributing to violations of water quality standards.
6. Effluent sampling point location.
7. Recording the monitoring results on Discharge Monitoring Report Forms using one such form for each outfall each month and submitting the forms to IEPA each month.
8. Seasonal fecal coliform limits.



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Illinois Environmental Protection Agency

Division of Water Pollution Control

1021 North Grand Avenue East

Post Office Box 19276

Springfield, Illinois 62794-9276

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

Reissued (NPDES) Permit

Expiration Date:

Issue Date:

Effective Date:

Name and Address of Permittee:

Lake Williamson Christian Center
P.O. Box 620
Carlinville, Illinois 62626

Facility Name and Address:

Lake Williamson Christian Center-STP
Parkside Drive
Carlinville, Illinois 62626
(Macoupin County)

Receiving Waters: Unnamed tributary to Lake Williamson

In compliance with the provisions of the Illinois Environmental Protection Act, Title 35 of the Ill. Adm. Code, Subtitle C, Chapter I, and the Clean Water Act (CWA), the above-named Permittee is hereby authorized to discharge at the above location to the above-named receiving stream in accordance with the standard conditions and attachments herein.

Permittee is not authorized to discharge after the above expiration date. In order to receive authorization to discharge beyond the expiration date, the Permittee shall submit the proper application as required by the Illinois Environmental Protection Agency (IEPA) not later than 180 days prior to the expiration date.

Alan Keller, P.E.
Manager, Permit Section
Division of Water Pollution Control

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Effluent Limitations, Monitoring, and Reporting

FINAL

Discharge Number(s) and Name(s): STP Outfall 001

Load limits computed based on a design average flow (DAF) of 0.032 MGD (design maximum flow (DMF) of 0.08 MGD).

Excess flow facilities (if applicable) shall not be utilized until the main treatment facility is receiving its maximum practical flow.

From the effective date of this Permit until the expiration date, the effluent of the above discharge(s) shall be monitored and limited at all times as follows:

Parameter	LOAD LIMITS lbs/day DAF (DMF)*			CONCENTRATION LIMITS mg/L			Sample Frequency	Sample Type
	Monthly Average	Weekly Average	Daily Maximum	Monthly Average	Weekly Average	Daily Maximum		
Flow (MGD)							Continuous	
CBOD ₅ **	2.7 (6.7)		5.3 (13)	10		20	1 Day/Month	Composite
Suspended Solids	3.2 (8)		6.4 (16)	12		24	1 Day/Month	Composite
pH	Shall be in the range of 6 to 9 Standard Units						1 Day/Month	Grab
Fecal Coliform***	****See Below.						1 Day/Month	Grab
Chlorine Residual***						0.05	1 Day/Month	Grab
				Monthly Average not less than	Weekly Average not less than	Daily Minimum		
Dissolved Oxygen March-July				NA	6	5	1 Day/Month	Grab
August-February				5.5	4	3.5	1 Day/Month	Grab

*Load limits based on design maximum flow shall apply only when flow exceeds design average flow.

**Carbonaceous BOD₅ (CBOD₅) testing shall be in accordance with 40 CFR 136.

***See Special Condition 8.

**** Fecal Coliform shall not exceed a geometric mean of 200 cfu/100 ml nor exceed a daily maximum value of 242×10^6 cfu/day for May through October, nor shall more than 10% of the samples during any 30 day period exceed 400 cfu/100 ml.

Flow shall be reported on the Discharge Monitoring Report (DMR) as monthly average and daily maximum.

Fecal Coliform shall be reported on the DMR as a daily maximum value.

pH shall be reported on the DMR as minimum and maximum value.

Chlorine Residual shall be reported on DMR as daily maximum value.

Dissolved oxygen shall be reported on the DMR as a minimum value.

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Influent Monitoring, and Reporting

The influent to the plant shall be monitored as follows:

<u>Parameter</u>	<u>Sample Frequency</u>	<u>Sample Type</u>
Flow (MGD)	Continuous	
BOD ₅	1 Day/Month	Composite
Suspended Solids	1 Day/Month	Composite

Influent samples shall be taken at a point representative of the influent.

Flow (MGD) shall be reported on the Discharge Monitoring Report (DMR) as monthly average and daily maximum.

BOD₅ and Suspended Solids shall be reported on the DMR as a monthly average concentration.

Special Conditions

SPECIAL CONDITION 1: This Permit may be modified to include different final effluent limitations or requirements which are consistent with applicable laws, regulations, or judicial orders. The IEPA will public notice the permit modification.

SPECIAL CONDITION 2: The use or operation of this facility shall be by or under the supervision of a Certified Class 4 operator.

SPECIAL CONDITION 3: The IEPA may request in writing submittal of operational information in a specified form and at a required frequency at any time during the effective period of this Permit.

SPECIAL CONDITION 4: The IEPA may request more frequent monitoring by permit modification pursuant to 40 CFR Section 122.63 and Without Public Notice in the event of operational, maintenance or other problems resulting in possible effluent deterioration.

SPECIAL CONDITION 5: The effluent, alone or in combination with other sources, shall not cause a violation of any applicable water quality standard outlined in 35 Ill. Adm. Code 302.

SPECIAL CONDITION 6: Samples taken in compliance with the effluent monitoring requirements shall be taken at a point representative of the discharge, but prior to entry into the receiving stream.

SPECIAL CONDITION 7: The Permittee shall record monitoring results on Discharge Monitoring Report (DMR) Forms using one such form for each outfall each month.

In the event that an outfall does not discharge during a monthly reporting period, the DMR Form shall be submitted with no discharge indicated.

The Permittee may choose to submit electronic DMRs (eDMRs) instead of mailing paper DMRs to the IEPA. More information, including registration information for the eDMR program, can be obtained on the IEPA website, <http://www.epa.state.il.us/water/edmr/index.html>.

The completed Discharge Monitoring Report forms shall be submitted to IEPA no later than the 25th day of the following month, unless otherwise specified by the permitting authority.

Permittees not using eDMRs shall mail Discharge Monitoring Reports with an original signature to the IEPA at the following address:

Illinois Environmental Protection Agency
Division of Water Pollution Control
Attention: Compliance Assurance Section, Mail Code # 19
1021 North Grand Avenue East
Post Office Box 19276
Springfield, Illinois 62794-9276

SPECIAL CONDITION 8: Fecal Coliform limits for Discharge Number 001 are effective May thru October. Sampling of Fecal Coliform is only required during this time period.

The total residual chlorine limit is applicable at all times. If the Permittee is chlorinating for any purpose during the months of November through April, sampling is required on a daily grab basis. Sampling frequency for the months of May through October shall be as indicated on effluent limitations, monitoring and reporting page of this Permit.