

NPDES Permit No. IL0036528

Notice No. FRB:12042401.bah

Public Notice Beginning Date: **August 9, 2012**

Public Notice Ending Date: **September 10, 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 Permittee:

City of Mount Olive
200 East Main Street
Mount Olive, Illinois 62069

Name and Address of Facility:

Mount Olive - North STP
West Second Street
Mount Olive, Illinois 62069
(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 Permittee. 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 Francis Burba 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 City of Mount Olive.

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 Sugar Creek is 0 cfs.

The design average flow (DAF) for the facility is 0.597 million gallons per day (MGD) and the design maximum flow (DMF) for the facility is 1.289 MGD. Treatment consists of screening, grit removal, comminutors, trickling filters, Imhoff tanks, final clarifiers, intermittent sand filters, a holding pond, excess flow treatment, and sludge drying beds.

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 § 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(s) which are 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 Sugar Creek	39° 04' 30" North	89° 44' 27" West	General Use	Not Rated
002	unnamed tributary to Silver Creek	39° 03' 20" North	89° 43' 30" 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(s) receiving the discharge from outfall(s) 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): 001 STP Outfall

Load limits computed based on a design average flow (DAF) of 0.597 MGD (design maximum flow (DMF) of 1.289 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	50 (108)		100 (215)	10		20	35 IAC 304.120 40 CFR 133.102
Suspended Solids	60 (129)		120 (258)	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	Daily Maximum shall not exceed 400 per 100 mL (May through October)						35 IAC 304.121
Chlorine Residual						0.05	35 IAC 302.208
Ammonia Nitrogen: March-May/Sept.-Oct.	7.5 (16)	19 (41)	28 (61)	1.5	3.8	5.7	35 IAC 355 and 35 IAC 302
June-August	7.5 (16)	19 (41)	42 (90)	1.5	3.8	8.4	
Nov.-Feb.	15 (33)		34 (74)	3.1		6.9	
				Monthly Avg. not less than	Weekly Avg. not less than	Daily Minimum	
Dissolved Oxygen March-July				N/A	6.0	5.0	35 IAC 302.206
August-February				5.5	4.0	3.5	

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

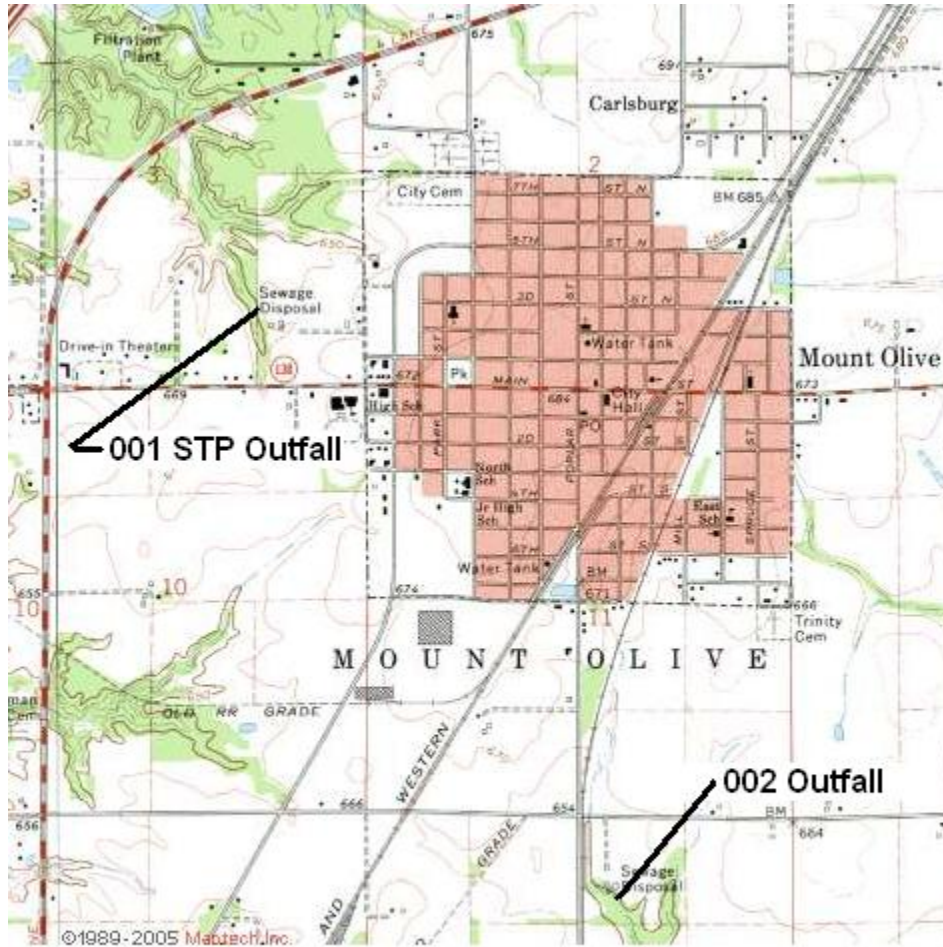
This Permit contains an authorization to treat and discharge excess flow as follows:

Discharge Number(s) and Name(s): 002 Excess Flow Outfall

<u>Parameter</u>	<u>CONCENTRATION LIMITS (mg/L)</u>	
	<u>Monthly Average</u>	<u>Regulation</u>
BOD ₅	30	40 CFR 133.102
Suspended Solids	30	40 CFR 133.102
Fecal Coliform	Daily Maximum Shall Not Exceed 400 per 100 mL	35 IAC 304.121
pH	Shall be in the range of 6 to 9 Standard Units	35 IAC 304.125
Chlorine Residual	0.75	35 IAC 304.208

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. 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.
7. The provisions of 40 CFR Section 122.41(m) & (n) are applicable and are hereby incorporated by reference.
8. Effluent sampling point location.
9. Controlling the sources of infiltration and inflow into the sewer system.
10. Seasonal fecal coliform limits and compliance schedule for installation of disinfection facilities.
11. Burden reduction.
12. Submission of annual fiscal data.
13. Submission of semi annual reports indicating the quantities of sludge generated and disposed.
14. Reopening of this Permit to include revised effluent limitations based on a Total Maximum Daily Load (TMDL) or other water quality study.



Mount Olive - North STP
NPDES No. IL0036528
Macoupin County

NPDES Permit No. IL0036528

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:

City of Mount Olive
200 East Main Street
Mount Olive, Illinois 62069

Facility Name and Address:

Mount Olive - North STP
West Second Street
Mount Olive, Illinois 62069
(Macoupin County)

Receiving Waters: unnamed tributary to Sugar Creek

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

SAK:FRB:12042401.bah

NPDES Permit No. IL0036528

Effluent Limitations, Monitoring, and Reporting

FINAL

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

Load limits computed based on a design average flow (DAF) of 0.597 MGD (design maximum flow (DMF) of 1.289 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 **	50 (108)		100 (215)	10		20	2 Days/Month	Composite
Suspended Solids	60 (129)		120 (258)	12		24	2 Days/Month	Composite
pH	Shall be in the range of 6 to 9 Standard Units						2 Days/Month	Grab
Fecal Coliform***	Daily Maximum shall not exceed 400 per 100 mL (May through October)						2 Days/Week	Grab
Chlorine Residual***						0.05	2 Days/Week	Grab
Ammonia Nitrogen: As (N) March-May/Sept.-Oct.	7.5 (16)	19 (41)	28 (61)	1.5	3.8	5.7	2 Days/Month	Composite
June-August	7.5 (16)	19 (41)	42 (90)	1.5	3.8	8.4	2 Days/Month	Composite
Nov.-Feb.	15 (33)		34 (74)	3.1		6.9	2 Days/Month	Composite
				Monthly Average not less than	Weekly Average not less than	Daily Minimum		
Dissolved Oxygen March-July				N/A	6.0	5.0	2 Days/Month	Grab
August-February				5.5	4.0	3.5	2 Days/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 10.

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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Effluent, Limitations, Monitoring, and Reporting

FINAL

Discharge Number(s) and Name(s): 002 Excess Flow Outfall

These flow facilities 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:

	CONCENTRATION LIMITS (mg/L)		
<u>Parameter</u>	<u>Monthly Average</u>	<u>Sample Frequency</u>	<u>Sample Type</u>
Total Flow (MG)		Daily When Discharging	Continuous
BOD ₅	30	Daily When Discharging	Grab
Suspended Solids	30	Daily When Discharging	Grab
Fecal Coliform	Daily Maximum Shall not Exceed 400 per 100 mL	Daily When Discharging	Grab
pH	Shall be in the range of 6 to 9 Standard Units	Daily When Discharging	Grab
Chlorine Residual	0.75	Daily When Discharging	Grab

Total flow in million gallons shall be reported on the Discharge Monitoring Report (DMR) in the quantity maximum column.

Report the number of days of discharge in the comments section of the DMR.

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

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

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

Chlorine Residual shall be reported on the DMR as monthly average.

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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	2 Days/Month	Composite
Suspended Solids	2 Days/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 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 3 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 § 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. 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 7. The provisions of 40 CFR Section 122.41(m) & (n) are applicable and are hereby incorporated by reference.

SPECIAL CONDITION 8. 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 9. This Permit may be modified to include requirements for the Permittee on a continuing basis to evaluate and detail its efforts to effectively control sources of infiltration and inflow into the sewer system and to submit reports to the IEPA if necessary.

SPECIAL CONDITION 10. 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.

In order for the Permittee to achieve the above limit, it will be necessary to either construct disinfection equipment or install de-chlorination equipment in accordance with the following schedule:

- | | | |
|----|--|--|
| 1. | Plans and specifications submitted to IEPA | 6 months from effective date of this permit |
| 2. | Arrange financing | 9 months from effective date of this permit |
| 3. | Commence construction | 10 months from effective date of this permit |
| 4. | Interim report | 12 months from effective date of this permit |
| 5. | Complete construction | 16 months from effective date of this permit |
| 6. | Obtain operational level | 18 months from effective date of this permit |

Compliance dates set out in this Permit may be superseded or supplemented by compliance dates in judicial orders, Pollution Control Board orders. This Permit may be modified, with Public Notice, to include such revised compliance dates.

The Permittee shall operate the de-chlorination facilities in a manner to ensure continuous compliance with the total residual chlorine limit, and not to the extent that will result in violations of other permitted effluent characteristics, or water quality standards.

REPORTING

The Permittee shall submit a report no later than fourteen (14) days following the completion dates indicated for each numbered item in the compliance schedule, indicating, a) the date the item was completed, or b) that the item was not completed, the reasons for non-completion and the anticipated completion date.

SPECIAL CONDITION 11. The Permittee has undergone a Monitoring Reduction review and the influent and effluent sample frequency has been reduced for BOD₅, CBOD₅, Suspended Solids, ammonia nitrogen, and pH due to sustained compliance. The IEPA will require that the influent and effluent sampling frequency for these parameters be increased to 2 days per week if effluent deterioration occurs due to increased wasteload, operational, maintenance or other problems. The increased monitoring will be required Without Public Notice when a permit modification is received by the Permittee from the IEPA.

SPECIAL CONDITION 12. During January of each year the Permittee shall submit annual fiscal data regarding sewerage system operations to the Illinois Environmental Protection Agency/Division of Water Pollution Control/Compliance Assurance Section. The Permittee may use any fiscal year period provided the period ends within twelve (12) months of the submission date.

Submission shall be on forms provided by IEPA titled "Fiscal Report Form For NPDES Permittees".

SPECIAL CONDITION 13. For the duration of this Permit, the Permittee shall determine the quantity of sludge produced by the treatment facility in dry tons or gallons with average percent total solids analysis. The Permittee shall maintain adequate records of the quantities of sludge produced and have said records available for IEPA inspection. The Permittee shall submit to the IEPA, at a minimum, a semi-annual summary report of the quantities of sludge generated and disposed of, in units of dry tons or gallons (average total percent solids) by different disposal methods including but not limited to application on farmland, application on reclamation land, landfilling, public distribution, dedicated land disposal, sod farms, storage lagoons or any other specified disposal method. Said reports shall be submitted to the IEPA by January 31 and July 31 of each year reporting the preceding January thru June and July thru December interval of sludge disposal operations.

Duty to Mitigate. The Permittee shall take all reasonable steps to minimize any sludge use or disposal in violation of this Permit.

Sludge monitoring must be conducted according to test procedures approved under 40 CFR 136 unless otherwise specified in 40 CFR 503, unless other test procedures have been specified in this Permit.

Planned Changes. The Permittee shall give notice to the IEPA on the semi-annual report of any changes in sludge use and disposal.

The Permittee shall retain records of all sludge monitoring, and reports required by the Sludge Permit as referenced in Standard Condition 23 for a period of at least five (5) years from the date of this Permit.

If the Permittee monitors any pollutant more frequently than required by the Sludge Permit, the results of this monitoring shall be included in the reporting of data submitted to the IEPA.

Monitoring reports for sludge shall be reported on the form titled "Sludge Management Reports" to the following address:

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

SPECIAL CONDITION 14. This Permit may be modified to include alternative or additional final effluent limitations pursuant to an approved Total Maximum Daily Load (TMDL) Study or upon completion of an alternate water quality study.