

National Pollutant Discharge Elimination System (NPDES) Industrial/Commercial Application Form

version 3.7

(Submission #: HQ8-YS4J-9WJGJ, version 7)

Digitally signed by:
MiEnviro Portal
Date: 2025.03.04 11:58:02 -05:00
Reason: Submission Data
Location: State of Michigan

Details

Submission ID HQ8-YS4J-9WJGJ

NOTE (CREATED)

Correction Requests - February 11, 2025

Thank you for your continued efforts to revise the submitted application. Please provide clarification and/or corrections to the noted items. Further processing of your application will be placed on hold until we receive the information and your application is considered complete.

If you have any questions, please reach out to me at VaelL@michigan.gov or 517-512-3989.

Created on 2/11/2025 12:13 PM by **Lilly Vael**

NOTE (CREATED)

Correction Request - January 6, 2025

Thank you for your application. Please provide clarification and/or corrections to the noted items. Please provide this information by January 20, 2025, if possible. Further processing of your application will be placed on hold until we receive the information and your application is considered complete. Please let me know if you have questions concerning this Correction Request or about how to revise the submission in MiEnviro.

Created on 1/6/2025 11:44 AM by **Lilly Vael**

Form Input

Applicant Information

"APPLICANT" refers to the entity legally responsible for the information submitted with this application, and for the permit that will result from it. **DO NOT** provide the name of an individual. Contact information will be collected in another section.

Applicant Information

Enter name of legal entity:

Organization Name

Clearwater Pools and Service of Ann Arbor, Inc.

Phone Type Number Extension

Business 7346698990

Email

erkfritzjeff@yahoo.com

Fax

734-669-8991

Enter address of legal entity:

7100 JACKSON RD

STE 200

ANN ARBOR, MI 48103

United States

Facility Information

Additional Instructions for completing this portion of the application are provided in the Appendix.

[Appendix to the Permit Application](#)

Facility/Site Name (Read Only)

Home 2 Suites Ann Arbor

Facility Name 1 - Company Name

Home 2 Suites

Facility Name 2 - Division Name

NONE PROVIDED

Facility Name 3 - Plant Name

NONE PROVIDED

Public primary school systems and governing entities that cross local government boundaries should select "Local Government/District" below.

Which of the following best describes this facility?

Private

Facility Location

42.2430546,-83.75289939999999

Site/Facility Location Address

361 W. Eisenhower
Ann Arbor, MI 48103

NAICS (North American Industry Classification System) code:

721110

CORRECTION REQUEST (APPROVED)

NAICS Code

Please add the appropriate NAICS code for this facility. Based on the SIC code of 7011, a NAICS code of 721110 - Hotels (except Casino Hotels) and Motels may be appropriate.

Created on 1/6/2025 4:04 PM by Lilly Vael

1 COMMENT

Lilly Vael (vaell@michigan.gov) (1/14/2025 8:38 AM)

In this case, the NAICS code for the hotel being built should be provided instead of the NAICS code associated with Clearwater Pools and Service of Ann Arbor, Inc.

SIC (Standard Industrial Classification) code:

7011

CORRECTION REQUEST (APPROVED)

SIC & NAICS codes:

This code best describes the major products/services provided by the facility based on economic importance. The code information can be found in the corporate tax returns under Schedule K listed as the ♦Business Activity Code♦ or the ♦Manufacturers Identity Code.♦ The SIC code 23 entered here corresponds to apparel manufacturing which does not seem appropriate for this facility. Please provide the correct SIC and NAICS codes for this facility.

Created on 1/2/2025 2:02 PM by Lilly Vael

Is this facility a primary industry? Refer to Table 1 of the Appendix to make this determination.

No, this facility is not a primary industry.

[CLICK HERE to view the Appendix to the permit application](#)

Enter the name of the Local Unit of Government (LUG) in which the facility is located:

Ann Arbor Township

Provide an e-mail address for an appropriate LUG contact, such as a clerk, who can be notified about the public notice period:

CityClerk@a2gov.org

CORRECTION REQUEST (APPROVED)

Local Unit of Government Contact:

The city clerk for Ann Arbor is Jacqueline Beaudry, and her email is CityClerk@a2gov.org. Please update this email accordingly.

Created on 1/2/2025 2:03 PM by **Lilly Vael**

Does the facility have an EGLE-certified operator at the appropriate level?

NO

Please provide an explanation:

New Hotel Being Built. We are Pool builder. Owner will have to get certified operator.

Contacts (1 of 1)

CORRECTION REQUEST (APPROVED)

Contacts:

Please provide information for the application contact, facility contact, and discharge monitoring reports (DMR) contact including first and last name, title, business, address, city, state, ZIP code, telephone number, and e-mail address.

Created on 1/2/2025 2:07 PM by **Lilly Vael**

2 COMMENTS

Lilly Vael (vaell@michigan.gov) (2/14/2025 9:24 AM)

Please add contact information for the facility contact.

Lilly Vael (vaell@michigan.gov) (1/14/2025 8:41 AM)

We will need contact information for the application contact, facility contact, and DMR contact. Please note that multiple contact roles may be applied to the same contact if appropriate.

Additional Instructions for completing this portion of the application are provided in the Appendix.

[Appendix to the Permit Application](#)

CONTACTS

At a minimum the following contact types are required:

Annual Permit Billing Contact

Application Contact

Facility Contact

DMR Contact

Certified Operator

- If a single person has multiple roles, please enter that person's information once and assign them multiple roles.
- To add additional contacts, use the "Add New" button at the bottom of this page, or select "Duplicate" to copy the contact information and edit a portion of the contact fields.

Contact

Annual Permit Billing Contact

DMR Contact

Application Contact

Facility Contact

Required Contact Types:

At minimum the following contact types must be provided:

Annual Permit Billing Contact; Application Contact; Facility Contact; DMR Contact; Certified Operator

Contact Information

Prefix

NONE PROVIDED

First Name

Dante

Last Name

Bacall

Title

President

Organization Name

NONE PROVIDED

Phone Type

Business

Number

248-766-1546

Extension

Email

daivin@superiorhg.com

Fax

NONE PROVIDED

Address

14200 E JEFFERSON AVE

DETROIT, MI 48215

United States

Antidegradation

RULE 98 ♦ ANTIDEGRADATION REQUIREMENTS

In accordance with R 323.1098 of the Michigan Water Quality Standards, the applicant is required to submit an Antidegradation Demonstration for any new or increased loading of pollutants to the surface waters of the state, unless one or more exemptions apply. An Antidegradation Demonstration must contain the information specified in Rule 1098, outlined in the Appendix.

[Appendix to the Permit Application](#)

Will this discharge represent an increased loading of pollutants to the surface waters of the state?

YES

Is the increased loading of pollutants exempt from Antidegradation Demonstration?

YES -- Select the exemption(s) that applies from the Exemptions List below

CORRECTION REQUEST (APPROVED)

Antidegradation Demonstration Exemption:

Because the swimming pool wastewater discharge is authorized by a Certificate of Coverage (COC), this facility will be exempt from providing an Antidegradation Demonstration. As the discharge can be authorized under a Certificate of Coverage, please also indicate Item H ♦ Discharges authorized by a Certificate of Coverage or Notice of Coverage as an exemption. If any of the other statements are applicable, select those as well.

Created on 1/2/2025 2:10 PM by Lilly Vael

Reasons for exemption from antidegradation demonstration (Select all that apply):

H) Discharges authorized by Certificates of Coverage (COC) and Notices of Coverage

Additional Information

Other Environmental Permits

Provide the information requested in the table for any other federal, state, or local environmental permits in effect or applied for at the time of submittal of this Application, including, but not limited to, permits issued under any of the following programs: Air Pollution

Control, Hazardous Waste Management, Wetlands Protection, Soil Erosion and Sedimentation Control, and other NPDES permits.

Other Environmental Permits (Hit 'Add Row' for each environmental permit)

Issuing Agency:	Permit or COC Number:	Permit type:
EGLE	SP-5653-01	Swimming Pool Construction Permit

WATER FLOW DIAGRAM

[Home 2 Suites, AA Civil Full Set \(1\).pdf - 01/13/2025 10:37 AM](#)
[Handwritten Bio Dynamic and 100 Gal tank.pdf - 02/05/2025 10:27 AM](#)
[Plumbing sanitary and stom underground plan ann arbor.pdf - 02/05/2025 10:31 AM](#)
[Home 2 Suites A2 sanitary drain map.jpg - 02/05/2025 10:37 AM](#)

Comment

Pool Backwash will be run thru the Bio-Dynamic 4000 to remove chlorine. This pipe leads to an Underground retention tank system on site. That tank enters into the City of Ann Arbor Storm System.

CORRECTION REQUEST (APPROVED)

Water Flow Diagram

Please revise the flow diagram to include the 100 gallon holding tank before the water is discharged to the storm sewer. Additionally, please add in the name of the receiving water. The receiving water will be the water of the state the discharged water enters after flowing through the storm sewer.

Created on 1/7/2025 9:13 AM by Lilly Vael

1 COMMENT

Lilly Vael (vaell@michigan.gov) (1/14/2025 8:59 AM)

Please remake the diagram in the "Handwritten Drawing Pool Backwash De Chlorination Bio-Dynamic 400.pdf" file. The new diagram should have a box for the holding tank before the water is discharged to the storm sewer and a box after the storm sewer to indicate the receiving water.

CORRECTION REQUEST (APPROVED)

Water Flow Diagram:

Please add the name of the receiving water. Additionally, please be sure to include the process used for the first 30 seconds of backwash. Please see the correction request regarding backwash for additional information.

Created on 1/6/2025 11:03 AM by Lilly Vael

❖ Surface waters of the state❖ means all the following: The Great Lakes and their connecting waters, all inland lakes, rivers, streams, impoundments, open drains, wetlands, and other surface bodies of water within the confines of the state but does not include drainage ways and ponds used solely for wastewater conveyance, treatment, or control. A storm sewer is not a surface water of the state.

NARRATIVE

[Handwritten Drawing Pool Backwash De Chlorination Bio-Dynamic 4000.pdf - 12/23/2024 10:08 AM](#)
[Home 2 Suites, AA Civil Full Set \(1\).pdf - 01/13/2025 10:39 AM](#)
[Plumbing sanitary and stom underground plan ann arbor.pdf - 01/13/2025 10:40 AM](#)

Comment

Pool Backwash will be run thru the Bio-Dynamic 4000 to remove chlorine. This pipe leads to an Underground retention tank system on site. That tank enters into the City of Ann Arbor Storm System. Hotel Pool. used for guest of hotel to use at there leisure.

CORRECTION REQUEST (APPROVED)

Narrative:

Please provide a narrative that describes the water flow diagram. Include a brief description of the nature of the business and the processes relating to the pool as well as a description of the treatment system. Additionally, if possible, please include an anticipated date when the pool will be operational.

Created on 1/2/2025 2:12 PM by Lilly Vael

MAP OF FACILITY AND DISCHARGE LOCATION

[Bio-Dynamic-4000-Installation-and-Operation.pdf - 12/23/2024 10:13 AM](#)

[Home 2 Suites, AA Civil Full Set \(1\).pdf - 01/13/2025 10:40 AM](#)

[County Map Book updated_25OCT2022_CityofAnnArbor.pdf - 02/05/2025 10:39 AM](#)

[Home 2 Suites A2 sanitary drain map.jpg - 02/05/2025 10:46 AM](#)

[Handwritten Bio Dynamic and 100 Gal tank.pdf - 02/05/2025 10:55 AM](#)

Comment

Pool Backwash will be run thru the Bio-Dynamic 4000 to remove chlorine then into 100 gal holding tank. after holding take water goes into storm water discharge in hotel. This pipe leads to an Underground retention tank system on site. That tank enters into Storm System Mallets creek.

CORRECTION REQUEST (APPROVED)

Map of Facility and Discharge Location:

Please provide a detailed reproducible map using an internet source (e.g., Google Maps, Bing Maps, Yahoo etc.) or other map tracing the flow of water from the discharge point to the receiving water (i.e., waters of the state), including the outfall location.

For your discharge location map, we will need to know the exact path of the storm sewer system to the receiving water. Please contact the Public Works Department for Washtenaw County for information on the storm sewers. They should be able to help you find the exact path of the discharge to the receiving water.

Created on 1/6/2025 11:19 AM by **Lilly Vael**

1 COMMENT

Lilly Vael (vaell@michigan.gov) (1/29/2025 11:20 AM)

Thank you for the additional information. However, further details are needed as the current submitted maps do not show how the discharged wastewater will travel from the facility to the receiving waters. If the wastewater is traveling through the storm sewers, we need to know the exact path of the storm sewer to the receiving water. Additionally, the map provided to show this must also show the receiving water. You will receive an email with additional information regarding this correction request.

Laboratory Services (1 of 1)

Laboratory:Clearwater Pools

To add additional laboratories, please use the [Add New Section](#) button at the bottom of this page, or select [Duplicate Section](#) to copy the laboratory information and edit a portion of the fields.

Laboratory Name

Clearwater Pools

Lab Type

In-house Laboratory

Laboratory Phone

7346698990

Laboratory Email

erkfritzjeff@yahoo.com

Analyses Performed

chlorine testing

Water Source and Discharge Type

1. WATER SUPPLY INFORMATION

Identify all water sources entering the facility and treatment systems, and provide average flows. The volume may be estimated from water supply meter readings, pump capacities, etc. Provide the name of the source where appropriate (e.g., Grand River, Lake Michigan, City of Millpond, etc.).

Water Supply Type	Name and Location of Source	Average Volume or Flow Rate	Units
Municipal Supply	Ann Arbor City Water	75	Other: Gallons Per minute

2. WATER DISCHARGE INFORMATION

Select all wastewater types discharged from this facility.
Public Swimming Pool Wastewater

Identify water discharged by the facility and treatment systems, and provide average flows. If water is first used for one purpose and then is subsequently used for another purpose, indicate the type and amount of the last use. For example, if the water is initially used for noncontact cooling water and then for process water, indicate the amount of process water. The amount of water from sources should approximate the amount of water usage. If the amounts are different, provide an explanation.

Discharge Type	Average Flow Rate	Units
Public Swimming Pool Wastewater	75	Other: gallons per minute
<div><div>CORRECTION REQUEST (APPROVED)</div><div>Discharged Wastewater:</div><div>Public Swimming Pool Wastewater should be included in the discharge table unless the Public Swimming Pool Wastewater is being repurposed into process wastewater. If that is the case, please revise the flow diagram and narrative to reflect this. Created on 1/2/2025 2:37 PM by Lilly Vael</div></div>		

Briefly explain why the combined water from all sources does not equal the total approximate water usage, if applicable.
NONE PROVIDED

Note: For the above tables indicate units as MGD (million gallons per day), MGY (million gallons per year), or other appropriate units.

3. PRELIMINARY COOLING WATER QUESTIONS

Does the facility use water for cooling purposes?
NO

4. WHOLE EFFLUENT TOXICITY (WET) TESTS.

Have any acute or chronic WET tests been conducted on any discharge(s) or receiving water(s) in relation to this facility's discharge within the last three (3) years? This includes WET tests conducted for water treatment additive approval.
NO

PUBLIC SWIMMING POOL WASTEWATER QUESTIONS

Does your facility discharge filter backwash water?
YES

What type of filter produces this backwash?
Sand Filter

Describe how the first 30 seconds of backwash from a sand filter is handled (e.g., sent to a holding tank, discharged to sanitary, etc.). If a sand filter is not used, enter NA.
Pool water gets Backwashed through Sand Filter then Ran Bio Dynamic 4000 De Chlorination. Water then ran into a 100-gallon water holding tank.
After the first 30 seconds discharge water into the Storm Drain in Pump Room.

<div><div>CORRECTION REQUEST (APPROVED)</div><div>First 30 Seconds Backwash:</div><div>The backwash from at least the first 30 seconds of the backwash cycle must be treated before it is discharged to the surface water. Appropriate treatment would be with a holding tank that must retain the backwash from at least the first 30 seconds of the backwash cycle for a sufficient amount of time for solids to settle. The effluent must then be discharged from the holding tank in such a way that the settled solids in the tank will not be disturbed. The settled solids may not be discharged to the surface waters. The backwash after the first 30 seconds of each backwash cycle does not require treatment. Please see the attached file as an example of an appropriate holding tank for treating the backwash. As currently written, the provided answer for how the first 30 seconds of backwash will be handled is not satisfactory.</div></div>

Describe how the backwash from a diatomaceous earth filter is handled. If a diatomaceous earth filter is not used, enter NA.
NA

Within the next 5 years, does the facility plan to drain this pool fully and/or draw it down significantly?
NO

Outfall Information and Effluent Characteristics (1 of 1)

Outfall:001 Receiving water:Mallets Creek

Existing outfalls can be selected in the top-right corner of the page.

- To add additional outfalls (new or existing), please use the "Add New" button at the bottom of this page, or select "Duplicate" to copy the contact information and edit a portion of the contact fields.

1. OUTFALL INFORMATION

Enter the outfall number (e.g., 001):
001

CORRECTION REQUEST (APPROVED)

Outfall Number:

Traditionally the first outfall is labeled 001. If there is not a compelling reason to keep this outfall labeled 300, please name it 001 for ease of record keeping.

Created on 1/2/2025 2:40 PM by Lilly Vael

Outfall Description

Backwash running through de Chloritization system then to holding tank for first 30 seconds.

CORRECTION REQUEST (APPROVED)

Outfall Description:

Please revise this outfall description to be more descriptive of the discharged wastewater. For instance, describing it as "Discharges to (the receiving water)" would provide more detail than listing the units.

Created on 1/6/2025 11:29 AM by Lilly Vael

Enter the name of the receiving water:

Mallets Creek

CORRECTION REQUEST (APPROVED)

Receiving Water:

While discussing the path of discharged wastewater through the storm sewers with the Washtenaw County Public Works Department, please confirm the name of the receiving water.

Created on 1/6/2025 11:32 AM by Lilly Vael

1 COMMENT

Lilly Vael (vaell@michigan.gov) (1/29/2025 11:16 AM)

Based on maps of the area, it seems likely that the receiving water for this facility would be "Malletts Creek" not the currently identified Ann Arbor Pittsfield Drain. Please review the receiving water information as you revise the map of discharge location and update it appropriately.

Outfall

42.24398056,-83.7537222

CORRECTION REQUEST (APPROVED)

Outfall Location: Additional Information

Based on the submitted facility and discharge map showing the wastewater being discharged from the western side of the facility and traveling north towards Malletts Creek, it seems the location of Outfall 001 will not be at the provided coordinates (42.24244558994948, -83.7512127026639).

The Outfall location will be considered the point where the discharged wastewater enters Malletts Creek. This point has been marked on a map attached here for your reference. Please update the coordinates provided for Outfall 001 to the location where the discharged waste water enters Malletts Creek.

If it has been determined that the discharged wastewater will enter Malletts Creek at the indicated coordinates East of the facility, please update the provided facility and discharge map titled "County_Map_Book_updated_25OCT2022_CityofAnnArbor.pdf" to accurately show the flow of discharge to Malletts Creek at that location.

Created on 3/4/2025 11:26 AM by Lilly Vael

CORRECTION REQUEST (APPROVED)

Outfall Location:

Please provide the coordinates for the discharge location where it meets the receiving water. The application appendix instructs the following: Identify the location of the outfall using latitude and longitude, accurate to within six decimal degrees (e.g., 0.000001 decimal degrees, Latitude = 42.454167, Longitude = -83.041667).

Created on 1/6/2025 11:35 AM by Lilly Vael

1 COMMENT

Lilly Vael (vaell@michigan.gov) (2/11/2025 11:50 AM)

The coordinates for Outfall 001 should be placed where the discharged wastewater first enters into Malletts Creek. Based on the map provided showing the path of discharge from the facility, this will occur to the North of the facility. Please update the Outfall 001 coordinates accordingly.

2. TYPE OF WASTEWATER DISCHARGED THROUGH THIS OUTFALL

Type(s) of Wastewater Discharged (check all that apply to this outfall):

Public Swimming Pool Wastewater

3. FLOW

DEFINITIONS: A facility is considered to have a SEASONAL discharge if wastewater is treated AND STORED throughout a portion of the year and then discharged over a specified period or periods of days, weeks, or months. Batch process discharges are not seasonal discharges. Any facility that does not discharge seasonally is considered to have a CONTINUOUS discharge. Batch discharges are a type of continuous discharge.

Is the discharge continuous or seasonal?

Continuous

CORRECTION REQUEST (APPROVED)

Continuous Discharge:

Please select continuous discharge as it is the most appropriate selection for this facility. Seasonal flows are most appropriate for facilities where the discharge is treated and stored throughout a portion of the year and then discharged over a specified time (similar to wastewater stabilization lagoons). Upon revising to ☒ continuous, ☒ there will be a few subsequent questions to answer on the application.

Created on 1/2/2025 2:43 PM by Lilly Vael

What maximum daily flow rate are you requesting authorization to discharge from this outfall during the next five years? Enter a numeric value only based on the units Million Gallons Per Day. If the requested flow rate is less than 1,000 gallons per day, please enter a minimum of "0.001".

.001

How often is there a discharge from this outfall (on average)?

Hours per day:	Days per year:
.05	12

Does this outfall have batch discharges?
NO

4. PROCESS STREAMS CONTRIBUTING TO OUTFALL DISCHARGE

The information requested below is used to determine the applicable federal regulations for this facility. For each industrial process at the facility, provide the name, the SIC or the NAICS code, and a brief description of the process. As part of each description, identify a reasonable measure of the facility's actual long-term daily production and average number of production days per year. In many cases, this is the average daily or average annual production rate from the last five years. Some federal regulations require that certain industries report different information, depending on the type of process. The Summary of Information to Be Reported by Industry Type, pages 10-11 of the Appendix, includes an abbreviated list of industrial categories and their specific Application requirements. If the industrial process does not have specific Application requirements and recent long-term production rates are not an appropriate measure of future production, report the expected annual production rate for the next five (5) years, or for the life of the permit.

[Appendix to the Permit Application](#)

PROCESS STREAMS CONTRIBUTING TO OUTFALL DISCHARGE

Name of the process contributing to the discharge	SIC or NAICS code:	Describe the process and provide measures of production:
Backwash Pool Water	7011	removal Chlorine Bio-Dynamic 4000 100 gallon holding tank for solids
<p>CORRECTION REQUEST (APPROVED)</p> <p>Process Streams:</p> <p>Please provide the appropriate SIC code here. Please see the previous comment on the SIC/NAIC section for additional information.</p> <p>Created on 1/2/2025 2:44 PM by Lilly Vael</p>		

5. EFFLUENT CHARACTERISTICS - CONVENTIONAL POLLUTANTS

FOR ALL APPLICANTS, SAMPLE RESULTS ARE REQUIRED FOR: Biochemical Oxygen Demand – five day (BOD5), Chemical Oxygen Demand (COD), Total Organic Carbon (TOC), Ammonia Nitrogen (as N), Total Suspended Solids, Temperature-Summer, and Temperature-Winter, UNLESS you request a waiver and provide sufficient rationale to support that request.

Please fill out the table below, indicating how you have, or will be, providing the required analytical results. In the "How are results provided?" column, select "ESTIMATED DATA" if you submit estimated data for that parameter, select "LAB REPORT" if you've attached a lab report for that parameter, or select "NONE" if you do not submit estimated data and have not attached a lab report for that parameter.

[View the Appendix to the Permit Application](#)

Please confirm that you have read the statements above.
I CONFIRM

Effluent Characteristics - Conventional Pollutants

Conventional Pollutants	HOW ARE RESULTS PROVIDED?	Waiver Information	Provide Rationale Here to Support Waiver Request
Biochemical Oxygen Demand - five day (BOD5)	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent
Chemical Oxygen Demand (COD)	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent

Conventional Pollutants	HOW ARE RESULTS PROVIDED?	Waiver Information	Provide Rationale Here to Support Waiver Request
Total Organic Carbon (TOC)	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent
Ammonia Nitrogen (as N)	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent
Total Suspended Solids	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent
Temperature, Summer	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent
Temperature, Winter	NONE	I request a waiver for this parameter based on the following rationale:	Request waiver-Not expected in effluent
pH	LAB REPORT		
Total Dissolved Solids	NONE	Waiver request not required.	
Total Phosphorus (as P)	NONE	Waiver request not required.	
Fecal Coliform Bacteria	NONE	Waiver request not required.	
Escherichia coli	NONE	Waiver request not required.	
Total Residual Chlorine	LAB REPORT		
Dissolved Oxygen	NONE	Waiver request not required.	
Oil & Grease	NONE	Waiver request not required.	

CORRECTION REQUEST (APPROVED)

Effluent Characteristics:

Per the General Permit, this facility will be required to provide data for pH and Total Residual Chlorine. Please update the table accordingly.

Created on 1/7/2025 9:36 AM by Lilly Vael

Please attach lab reports for conventional pollutants here.

NONE PROVIDED

Comment

New Hotel being built in Ann Arbor.

6. EFFLUENT CHARACTERISTICS - TOXIC POLLUTANTS

Instructions: Carefully review each of the toxic pollutant groups below and respond as appropriate. For guidance concerning test procedures, see Part II.B.2. of your NPDES permit.

Tables 1 – 6, referenced below, are located in the [Appendix](#).

DIOXIN AND FURAN CONGENER INFORMATION

Existing industries that use or manufacture 2,3,5-trichlorophenoxy acetic acid (2,4,5-T); 2-(2,3,5-trichlorophenoxy) propanoic acid, (Silvex, 2,3,5-TP); 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate (Erbon); 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothionate (Ronnell); 2,4,5-trichlorophenol (TCP); or hexachlorophrene (HCP), or knows or has reason to believe that 2,3,7,8-Tetrachlorodibenzo-p-dioxin (TCDD) is present in the facility's effluent, are required to submit the results of at least one effluent analysis for the dioxin and furan congeners listed in Table 6. All effluent analyses for dioxin and furan congeners shall be conducted using USEPA Method 1613. In addition, submit the results of all other effluent analyses performed within the last three (3) years for any dioxin and furan congener listed in Table 6.

Do you have analytical results of this type to report?

NO

OTHER INDUSTRY PRIORITY POLLUTANT INFORMATION

Existing secondary industries or existing primary industries that discharge nonprocess wastewater are required to submit the results of at least one effluent analysis for any chemical listed in Tables 2 and 3 known or believed to be present in the facility's effluent. In addition, submit the results of all other effluent analyses performed within the last three years for any chemical listed in Tables 2 and 3.

Do you have analytical results of this type to report?

NO

INJURIOUS CHEMICALS NOT PREVIOUSLY REPORTED

Existing industries are required to provide a measured or estimated effluent concentration for any toxic or otherwise injurious chemicals known or believed to be present in the facility's effluent that has not been previously identified in this Application. Quantitative effluent data for these chemicals that are less than five years old shall be reported.

Do you have analytical results of this type to report?

NO



ADDITIONAL TOXIC AND OTHER POLLUTANT INFORMATION

All existing industries, regardless of discharge type, are required to provide the results of at least one analysis for any chemical listed in Table 4 known or believed to be present in the facility's effluent, and a measured or estimated effluent concentration for any chemical listed in Table 5 known or believed to be present in the facility's effluent. In addition, submit the results of any effluent analysis performed within the last three years for any chemical listed in Tables 4 and 5.

Do you have analytical results of this type to report?

NO

[Appendix to the Permit Application](#)

***Please note: This form may have a glitch. When you click  Add New,  it may cause the Conventional Pollutant table to not be changeable. To fix it, click into another Section, such as Additional Information, and then click back into this Section (Outfall Information and Effluent Characteristics), click into the Outfall you were adding/editing, and the table will work as intended. ***

Water Treatment Additives

Water Treatment Additives (WTAs)

Approvals to use WTAs are authorized by the Michigan Department of Environment, Great Lakes, and Energy under separate correspondence. Issuance of a permit/COC does not authorize the use of water treatment additives. Written approval from the Department must be obtained prior to using water treatment additives at the facility.

Water treatment additives (WTAs) include any material that is added to water used at the facility or to wastewater generated by the facility to condition or treat the water. Examples of WTAs include biocides, flocculants, water conditioners, pH adjusting agents, etc.

Are any WTAs added to water used at the facility or to wastewater generated by the facility?

NO

PFAS

The purpose of this section is to determine whether the applicant must submit sample results for per- and polyfluoroalkyl substances (PFAS).

"Surface waters of the state" means all of the following: The Great Lakes and their connecting waters, all inland lakes, rivers, streams, impoundments, open drains, wetlands, and other surface bodies of water within the confines of the state but does not include drainage ways and ponds used solely for wastewater conveyance, treatment, or control.

1. Is this facility known to have PFOS and/or PFOA present in wastewater discharged to surface waters of the state?

NO

2. Is this facility a landfill for solid or hazardous waste with a discharge of leachate to a surface water of the state?

NO

3. Is this facility a metal finisher that discharges wastewater associated with this activity to a surface water of the state?

NO

4. Is the discharge from the remediation of a contaminated site to a surface water of the state?

NO

5. Does the facility manufacture paper, corrugated paper, cardboard, paperboard, or packaging paper (coated or uncoated), and discharge wastewater associated with this activity to a surface water of the state?

NO

6. Does the facility conduct car washing as all or part of its operations and discharge car wash wastewater to a surface water of the state?

NO

7. Is this facility a commercial industrial laundry that discharges wastewater associated with this activity to a surface water of the state?

NO

8. Is this facility a chemical manufacturer with a discharge of wastewater associated with this activity to a surface water of the state?

NO

9. Has Aqueous Film-Forming Foam (AFFF) ever been used at the facility for training or testing, or to respond to a fire emergency? Has AFFF ever been stored at this facility? If yes to either, please select "YES."

NO

10. Does this facility manufacture, formulate, or mix paints/pigments and discharge wastewater from these operations to a surface water of the state?

NO

11. Does this facility have a discharge from a leather or hide tanning/finishing operation to a surface water of the state?

NO

12. Does this facility perform carpet and/or upholstery cleaning and discharge wastewater from these operations to a surface water of the state?

NO

13. Is the facility a carpet, rug, or textile manufacturer that discharges wastewater associated with this activity to a surface water of the state?

NO

14. Is this facility a centralized waste treater? Centralized Waste Treaters treat or recover metal-bearing, oily, and organic wastes, wastewater, or used material received from off site, and are regulated under 40 CFR Part 437.

NO

15. Does this facility apply a stain-, dirt-, water-, or fire-resistant coating and/or protectant, and discharge wastewater associated with this activity to a surface water of the state?

NO

Storm Water

Important Terms Used in the Storm Water Section:

"STORM WATER" means storm water runoff, snow melt runoff, and/or surface runoff and drainage.

"SURFACE WATER OF THE STATE" means the Great Lakes and their connecting waters, and all inland lakes, rivers, streams, impoundments, open drains, wetlands, and other surface bodies of water within the confines of the state not including drainage ways and ponds used solely for wastewater conveyance, treatment, or control.

"SPECIAL-USE AREA" is defined as any of the following:

1. Secondary containment structure required by state or federal law
2. Area identified as a site of environmental contamination pursuant to [Part 201, Environmental Remediation](#), or [Part 213, Leaking Underground Storage Tanks](#), of the NREPA. If a Baseline Environmental Assessment (BEA) has been submitted to EGLE, the site regulated under Part 201 or Part 213.
3. A facility that EGLE has determined is a significant contributor of pollutants to surface waters of the state.

Please confirm that you have read all terms and their definitions above:

I Confirm

Is the storm water from this facility discharged to a surface water of the state, either directly or through another conveyance such as a municipal separate storm sewer system? **IMPORTANT:** You may select "NO" here **ONLY IF** the storm water is discharged to a municipal combined storm sewer system, a municipal wastewater treatment system, or a privately-owned activated sludge treatment system.

YES

The applicant must determine whether this facility is engaged in a regulated "industrial activity" as defined in 40 CFR 122.26(b)(14).

TO MAKE THIS DETERMINATION, carefully review the [Primary Activities & Standard Industrial Classification \(SIC\)](#) Codes document.

Please confirm that you have reviewed the document referenced above.

I Confirm

Is this facility engaged in a regulated industrial activity according to the document referenced above?

NO

Other Information

Under Michigan law, EGLE has 180 days from receipt of a complete application in which to completely process the application. That said, if you need your permit expedited, please indicate the desired permit effective date below and we will make every effort to accommodate your request. Keep in mind that the more quickly and accurately you respond to requests from EGLE for information needed to complete your application, including requests to correct or clarify your application, the more likely it is that EGLE will be able to accommodate your request to expedite your permit. My desired permit effective date is:

01/31/2025

Comments (As needed)

New Hotel Construction Swimming Pool in Ann Arbor MI.

Water discharge only for Backwash of Pool Once per month total of 300 gallons of water.

Water to be De Chlorinized with Bio-Dynamic 4000 prior to discharge into Storm Sewer.

Not any type of Manufacturing Place.

June 2025 Pool Operation

CORRECTION REQUEST (APPROVED)

Anticipated Date for Pool Operation

Is this facility planning for the pool to be operational by the end of January? If not, when is the anticipated opening date for the pool?

Created on 1/3/2025 9:13 AM by Lilly Vael

NOTE (CREATED)

Timeline for Permit Issuance:

Thank you for providing the anticipated pool operation date. I will email you regarding options for the timeline for permit issuance based on this anticipated operational date.

Created on 1/7/2025 10:28 AM by Lilly Vael

Additional Documents (As needed)

NONE PROVIDED

Comment

NONE PROVIDED

Revisions

Revision	Revision Date	Revision By
Revision 1	12/17/2024 1:32 PM	ryan erkfritz
Revision 2	1/6/2025 2:30 PM	ryan erkfritz
Revision 3	1/13/2025 10:34 AM	ryan erkfritz
Revision 4	1/30/2025 11:02 AM	ryan erkfritz
Revision 5	2/12/2025 10:03 AM	ryan erkfritz
Revision 6	3/3/2025 11:52 AM	ryan erkfritz
Revision 7	3/4/2025 11:43 AM	ryan erkfritz