

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

version 2.21

(Submission #: HNT-1S5Q-DY1XK, version 2)

Digitally signed by:
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HCV764WATRPWA01.dmz-ad.state.mi.us
Date: 2020.09.08 14:54:10 -04:00
Reason: Copy Of Record
Location: State of Michigan

Details

Submission ID HNT-1S5Q-DY1XK

Status Submitted

Fees

Fee \$75.00

Payments/Adjustments (\$75.00)

Balance Due \$0.00 (Paid)

CORRECTION REQUEST (CORRECTED)

Updated Application Form: Some Information Lost

Please open the attached note that explains the changes made to the application form that require updates.

Created on 8/26/2020 12:47 PM by **Kathryn Gallagher**

Form Input

Permit or COC Number

Permit Number (Pre-populated)

MIG640207

Applicant Information

Organization Name

City of Ann Arbor Water Treatment Plant

Phone Type	Number	Extension
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Business	734-794-6426	43905
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Email

bsteglitz@a2gov.org

Fax

NONE PROVIDED

919 SUNSET RD

ANN ARBOR, MI 48103

United States

Facility Information

Instructions for completing this section are on Page 2 of the Appendix.

[Appendix to the Permit Application](#)

FACILITY DESIGNATED NAME (pre-populated)

Ann Arbor WFP

Facility Name 1 - Company Name

City of Ann Arbor

Facility Name 2 - Division Name

City of Ann Arbor Water Treatment Services

Facility Name 3 - Plant Name

City of Ann Arbor Water Filtration Plant

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

Which of the following best describes your facility?

Local Government/District

Facility Location

42.2967,-83.7629

Site/Facility Location Address

919 Sunset Road
Ann Arbor, Michigan 48103

Tax Parcel Number:

09-90-00-074-837

NAICS (North American Industry Classification System) code:

0

SIC (Standard Industrial Classification) code:

4941

Indicate if this facility is a primary industry (refer to Table 1 of the Appendix to determine if this facility is a primary industry).

No, this facility is not a primary industry.

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

Local Unit of Government (LUG)

Ann Arbor

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

bsteglitz@a2gov.org

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

YES

Contacts (1 of 1)

CONTACTS

Provide contact information for each person as required for each area; a person may be identified for more than one category.

?To add additional contacts, 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.

?If a single person has multiple contact types, please enter the person's information once and assign multiple roles.

Contact

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

Required Contact Types:

? At minimum the following contact types must be provided:
 Annual Permit Billing Contact; Application Contact; Facility Contact; DMR Contact; and Certified Operator

Section I shall be completed by all permit applicants. Instructions for completing Section I are on Page 2 of the Appendix.

[Appendix to the Permit Application](#)**Contact****Prefix**

NONE PROVIDED

First Name

Brian

Last Name

Steglitz

Title

Manager, Water Treatment Services

Organization Name

City of Ann Arbor

Phone Type

Business

Number

7347946426

Extension

43905

Email

bsteglitz@a2gov.org

Fax

NONE PROVIDED

919 Sunset Road

Ann Arbor, MI 48103

US

Certification Number(s)

9458

Certification Classification(s)

F-1, S-3

Antidegradation**RULE 98  ANTIDEGRADATION REQUIREMENTS**

In accordance with Rule 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 on Pages 8-9 of the Appendix. For assistance in completing this item, contact the Permits Section.

[Appendix to the Permit Application](#)

You must select  Yes  below if you are requesting authorization for one or more of the following:

- a) A discharge flow rate greater than that already authorized under your current NPDES permit
- b) Discharge to a different receiving water
- c) Discharge to a new location on the same receiving water
- d) The discharge of one or more new wastewater types not already authorized under your current NPDES permit

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

NO

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:
NONE PROVIDED	NONE PROVIDED	NONE PROVIDED

WATER FLOW DIAGRAM

[Water Flow Diagram.docx - 09/26/2019 08:47 AM](#)

Comment

NONE PROVIDED

⚡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

[Water Flow Diagram Narrative.docx - 09/27/2019 03:28 PM](#)

Comment

NONE PROVIDED

MAP OF FACILITY AND DISCHARGE LOCATION

[Settling Lagoon-Huron River Aerial Map 2019 Highlighted.pdf - 09/08/2020 12:41 PM](#)

Comment

NONE PROVIDED

CORRECTION REQUEST (CORRECTED)

Map of Facility and Discharge Location

Please submit a map which shows the flow of water from the facility's discharge point to the settling lagoon to the receiving water. Helpful information for a facility map is an aerial or topographical map of the facility (such as a labeled screenshot from Google Maps) that shows the location and flow path from the facility to the point where the wastewater discharge reaches the receiving water. Since the discharge from the lagoons flows into a ditch, please highlight its path through the ditch to the Huron River.

Created on 8/26/2020 12:25 PM by **Kathryn Gallagher**

LIST ADJACENT PROPERTY OWNERS

Business or Lake Board / Lake Association (if applicable)	Individual Property Owner or Business Contact	Address	City	State	ZIP Code	Country
	KELLEY PETER	1301 DELAWARE SW #N-801	Washington	DC	20024	USA
	BARNARD JAMES & RITA	911 SUNSET RD	Ann Arbor	MI	48103	USA
	912 SUNSET, LLC	2950 NEWPORT	Ann Arbor	MI	48103	USA

Business or Lake Board / Lake Association (if applicable)	Individual Property Owner or Business Contact	Address	City	State	ZIP Code	Country
	SWAIN MARTYN & KUBINEC JENNY	915 SUNSET RD	Ann Arbor	MI	48103	USA
	CITY OF ANN ARBOR	* PO BOX 8647	Ann Arbor	MI	48107	USA
	T-MOBILE CENTRAL LLC	12920 SSE 38TH ST	Bellevue	WA	98006	USA
	ANN ARBOR WATER TREATMENT PLANT	919 SUNSET RD	Ann Arbor	MI	48103	USA
	T-MOBILE CENTRAL LLC	12920 SE 38TH STREET	Bellevue	WA	98006	USA
	SPRINT SPECTRUM LP	PO BOX 8430	Kansas City	MO	64114-8430	USA
	AT&T MOBILITY LLC	1010 PINE ST, 9E-L-01	Saint Louis	MO	63101	USA
	ORLOWSKI DEBORAH L	956 SUNSET RD	Ann Arbor	MI	48103	USA
	CITY OF ANN ARBOR	* P.O. BOX 8647	Ann Arbor	MI	48107	USA
	BARBOUR MARCIA L	2627 ENGLISH OAK	Ann Arbor	MI	48103	USA
	BELLEN THOMAS & FINK MARGARET	1084 SUNSET RD	Ann Arbor	MI	48103	USA
	HOLCOMBE ALISON V & GREGORY S	1124 SUNSET RD	Ann Arbor	MI	48103	USA
	ROBINSON LUKE & KATIE	1164 SUNSET RD	Ann Arbor	MI	48103	USA
	BOONENBERG JOHN & CLAUDIA	1204 SUNSET RD	Ann Arbor	MI	48103	USA
	SVILAR ALEXANDER & KENDRA	1244 SUNSET RD	Ann Arbor	MI	48103	USA
	LIU DANIEL KERMIT	1280 SUNSET RD	Ann Arbor	MI	48103	USA
	BACK JOHN & LILLIAN	1320 SUNSET RD	Ann Arbor	MI	48103	USA
	LAVELLE ROSEMARY RYANN	1360 SUNSET RD	Ann Arbor	MI	48103	USA
	KAFI JOSEPH & FAY	1400 SUNSET RD	Ann Arbor	MI	48103	USA
	HENDERSON RON & M B	1430 SUNSET RD	Ann Arbor	MI	48103	USA
	MEERTEN SYVIA VAN	1435 SUNSET RD	Ann Arbor	MI	48103	USA
	PHAM THAI-VI	1440 SUNSET RD	Ann Arbor	MI	48103	USA
	MCCORRY NANCY & JENSEN MAREN	1331 POMONA RD	Ann Arbor	MI	48103	USA
	KENNEDY CHARLES W	1332 POMONA RD	Ann Arbor	MI	48103	USA
	MYERS NICHOLAS	1339 POMONA RD	Ann Arbor	MI	48103	USA

Business or Lake Board / Lake Association (if applicable)	Individual Property Owner or Business Contact	Address	City	State	ZIP Code	Country
	DURGIN WILLIAM	1401 POMONA RD	Ann Arbor	MI	48103	USA
	DURHAM LISA & DURHAM TIMOTHY	1409 POMONA RD	Ann Arbor	MI	48103	USA
	LAMPHEAR DONALD & R	1417 POMONA RD	Ann Arbor	MI	48103	USA
	TYSON JOHN E & MARGARET L TRUST	1425 POMONA RD	Ann Arbor	MI	48103	USA
	SEAGLY KATHARINE & ROHRER JOSEPH	1112 OLDEN RD	Ann Arbor	MI	48103	USA
	VANDERMEER J & PERFECTO I	1120 OLDEN RD	Ann Arbor	MI	48103	USA
	WALLACH MATTHEW R	1123 OLDEN RD	Ann Arbor	MI	48103	USA
	MACDOUGALL BARRY & SATTERLEE ROBERT	1126 OLDEN RD	Ann Arbor	MI	48103	USA
	TIERNEY JOHN	1134 OLDEN RD	Ann Arbor	MI	48103	USA
	CALVO ANA MARIA	1135 OLDEN RD	Ann Arbor	MI	48103	USA
	KNYAL WEISE BRIDGET A	1141 OLDEN RD	Ann Arbor	MI	48103	USA
	MESSNER JOSEPH L & HAGMAN DARRYL M	1142 OLDEN RD	Ann Arbor	MI	48103	USA
	JOYNT ROBERT L & M ELLEN TRUST	1148 OLDEN RD	Ann Arbor	MI	48103	USA
	DAPOGNY JAMES E	1154 OLDEN RD	Ann Arbor	MI	48103	USA
	TAUBMAN RUTH M TRUST	940 VESPER RD	Ann Arbor	MI	48103	USA
	KOHRMAN DAVID	1800 COOLEY AV	Ann Arbor	MI	48103	USA
	WILLIAMS DENNIS L & NANCYL	1801 COOLEY AV	Ann Arbor	MI	48103	USA
	DREWS SCOTT & THERESA	1804 COOLEY AV	Ann Arbor	MI	48103	USA
	BAUSCH FRIEDRICH H JR & LUCY ANNA &	1805 COOLEY AV	Ann Arbor	MI	48103	USA
	ATKINSON-THOMAS KELLY TRUST &	1810 COOLEY AV	Ann Arbor	MI	48103	USA
	HULLINGHORST GENE TRUST	1814 COOLEY AV	Ann Arbor	MI	48103	USA
	STOLLMAN JENNIFER A	1815 COOLEY AV	Ann Arbor	MI	48103	USA
	EAGAL ALEXANDER H & WULF-EAGAL QUIN	1824 COOLEY AV	Ann Arbor	MI	48103	USA
	MCKENZIE MARGUERITE M	1710 SAUNDERS CRS	Ann Arbor	MI	48103	USA

Business or Lake Board / Lake Association (if applicable)	Individual Property Owner or Business Contact	Address	City	State	ZIP Code	Country
	DANCISHERYL	1714 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	GILL SONIA	1715 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	SIDHU MARTHA L & HARMAILS	1720 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	COX BRIAN MICHAEL & ANGELA BETH	1721 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	ESSENBURG ARNOLD & M	1724 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	SABOLICH-YI BRYAN SR	1730 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	PINNEO SUSAN	1731 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	LUNDE KRISTOPHER & VIVIANA	1735 SAUNDERS CRS	Ann Arbor	MI	48103	USA
	SWENSON CHRISTIAN N & ASCHENBACH KR	1704 CREAL CRS	Ann Arbor	MI	48103	USA
	WEGRYN DONNA TRUST	1705 CREAL CRS	Ann Arbor	MI	48103	USA
	BROWN KENNETH & P	1710 CREAL CRS	Ann Arbor	MI	48103	USA
	DIBRITO ANGELA MARIE & ALLEN RUSSEL	1711 CREAL CRS	Ann Arbor	MI	48103	USA
	COLLINSON PETER K	1714 CREAL CRS	Ann Arbor	MI	48103	USA
	THE LESLIE J SMITH LIVING TRUST	1715 CREAL CRS	Ann Arbor	MI	48103	USA
	ERNSTING GARY & KATHERINE	1720 CREAL CRS	Ann Arbor	MI	48103	USA
	DILLON ANN CONSTANCE & MATTHEW J	1625 HATCHER CRS	Ann Arbor	MI	48103	USA
	EVANS E	1513 BROOKLYN AVE	Ann Arbor	MI	48104	USA
	GORE JEFFERY & AMY	1710 HATCHER CRS	Ann Arbor	MI	48103	USA
	SMITH LAUREN	1711 HATCHER CRS	Ann Arbor	MI	48103	USA
	SHEETS JANE	1715 HATCHER CRS	Ann Arbor	MI	48103	USA
	FRENETTE RICHARD K	1720 HATCHER CRS	Ann Arbor	MI	48103	USA

Business or Lake Board / Lake Association (if applicable)	Individual Property Owner or Business Contact	Address	City	State	ZIP Code	Country
	STOEFFLER MATTHEW F & LINTON EDITH	1721 HATCHER CRS	Ann Arbor	MI	48103	USA
	DEGERY DOMINIQUE & LEWIS BARRY	1725 HATCHER CRS	Ann Arbor	MI	48103	USA
	JAMES COLUMBUS	1730 HATCHER CRS	Ann Arbor	MI	48103	USA
	KIELB MICHAEL & SUSAN	1731 HATCHER CRS	Ann Arbor	MI	48103	USA
	JARRETT E & MCDONALD-HYMAN C	1740 HATCHER CRS	Ann Arbor	MI	48103	USA
	ALLEN JOHN R	1800 HATCHER CRS	Ann Arbor	MI	48103	USA
	CITY OF ANN ARBOR	* PO BOX 8647	Ann Arbor	MI	48107	USA
	CITY OF ANN ARBOR	* PO BOX 8647	Ann Arbor	MI	48107	USA
	PIEH PATRICK & ELIZABETH	2105 FOSS CT	Ann Arbor	MI	48103	USA
	WETTER NATHANIEL M & WETTER MICHAEL	2110 FOSS CT	Ann Arbor	MI	48103	USA
	ROBERTS DANIEL	2115 FOSS CT	Ann Arbor	MI	48103	USA
	BALL ERIK D	2125 FOSS CT	Ann Arbor	MI	48103	USA
	DONNELLY LEE LIVING TRUST	2130 FOSS CT	Ann Arbor	MI	48103	USA
	LABELLE CHRISTINE A	2135 FOSS CT	Ann Arbor	MI	48103	USA
	SALAZAR AMADO & ANAMARIA &	1577 LINCOLNSHIRE	AURORA	IL	60502	USA
	KURTZ LINDA	2150 FOSS CT	Ann Arbor	MI	48103	USA
	HAYAMI TAKAYUKI & AYAKO	2153 FOSS CT	Ann Arbor	MI	48103	USA
	SHELDON-KU DIANE	1700 FULMER ST	Ann Arbor	MI	48103	USA
	BELLINO MICHELLE & PHIPPS NATHAN	1706 FULMER ST	Ann Arbor	MI	48103	USA
	MURPHY ELISABETH G	1715 FULMER ST	Ann Arbor	MI	48103	USA
	JAG FULMER, LLC	4779 COLLINS AVE #4301	Miami Beach	FL	33140	USA
	HAMLIN WENDY K & TRAVIS A LIGHTNER	1720 FULMER ST	Ann Arbor	MI	48103	USA
	RAUPAGH DANIEL N	1727 FULMER ST	Ann Arbor	MI	48103	USA
	JEFFERSON DAVID & BATEMAN AMELIA	1745 FULMER ST	Ann Arbor	MI	48104	USA
	BAWOL BRIAN & EMILY	1750 FULMER	Ann Arbor	MI	48103	USA
	ISAMAN FREDRIC A IV	1757 FULMER ST	Ann Arbor	MI	48103	USA
	MOSTAFA GHOLI MEHRABI & FARAH KEYOU	1760 FULMER	Ann Arbor	MI	48103	USA
	KEYOUMARSI FARAH	10381 RIDGELINE	Milan	MI	48160	USA
	MEHRABI SOUSAN	1770 FULMER STREET	Ann Arbor	MI	48103	USA

Business or Lake Board / Lake Association (if applicable)	Individual Property Owner or Business Contact	Address	City	State	ZIP Code	Country
	MACHIDA LAURA	1771 FULMER ST	Ann Arbor	MI	48103	USA
	HANSEN RYAN	1780 FULMER ST	Ann Arbor	MI	48103	USA
	ZAHER MICHAEL C	1820 FULMER ST	Ann Arbor	MI	48103	USA
	DERGACHEV VLADIMIR & AMIRDJANOVA A	1161 RESTON AVE	Herndon	VA	20170	USA
	WATSON GORDON B & MARIANNE	1872 FULMER ST	Ann Arbor	MI	48103	USA
	LEE CHRISTOPHER TRUST &	1882 FULMER ST	Ann Arbor	MI	48103	USA
	CITY OF ANN ARBOR	* PO BOX 8647	Ann Arbor	MI	48107	USA
	CITY OF ANN ARBOR	* PO BOX 8647	Ann Arbor	MI	48107	USA
	CITY OF ANN ARBOR	* PO BOX 8647	Ann Arbor	MI	48107	USA
	WINES ELEMENTARY/ANN ARBOR PUBLIC SCHOOLS	2555 S STATE ST	Ann Arbor	MI	48104	USA
	FORSYTHE MIDDLE SCHOOL/ANN ARBOR PUBLIC SCHOOLS	2555 S STATE ST	Ann Arbor	MI	48104	USA

Laboratory Services (1 of 1)

Laboratory: City of Ann Arbor

?To add additional laboratories, please use the  Add New  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

City of Ann Arbor

Lab Type

In-house Laboratory

Laboratory Phone

734-794-6426

Laboratory Email

NONE PROVIDED

Analyses Performed

Flow, TSS, Outfall observations, pH

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 (i.e., Grand River, Lake Michigan, City of, Millpond).

Water Supply Type	Name and Location of Source	Average Volume or Flow Rate	Units
Surface Water Intake	Huron River	11	MGD
Municipal Supply	Steere Farm Well Field	2.3	MGD

2. WATER DISCHARGE INFORMATION

Indicate the types of wastewater that are discharged from this facility. Multiple may be selected.

Potable Water 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
Potable Water Wastewater	0.088	MGD

Provide an explanation for why the amount of water from the sources would not equal the 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 Storm Water Questions

"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.

Please confirm that you have read the definition of "Surface Waters of the State" above

I confirm

Is the storm water from this facility discharged to a surface water of the state, either directly or through another conveyance (e.g., municipal separate storm sewer system)? NOTE: If storm water is discharged to a municipal combined storm sewer system, a municipal wastewater treatment system, or a privately-owned activated sludge treatment system, select "NO."

YES

To determine if this facility is engaged in a regulated industrial activity as defined in 40 CFR 122.26(b)(14) carefully review the document available at:

[CLICK HERE](https://www.michigan.gov/documents/deq/wrd-isw-fed-sic_398366_7.pdf) or go to https://www.michigan.gov/documents/deq/wrd-isw-fed-sic_398366_7.pdf

Have you reviewed the "Primary Activities & Standard Industrial Classification (SIC) Codes" document referenced above.

I confirm

Is this facility engaged in a regulated industrial activity as defined in 40 CFR 122.26(b)(14)? To make this determination, click the link found above.

NO

Preliminary Cooling Water Questions

Does the facility use water for cooling purposes?

YES

Does or will the facility use a surface water intake structure as a cooling water source for the facility? Use of an intake structure includes obtaining water by any sort of contract or arrangement with an independent supplier if the supplier is itself not a facility covered by the requirements of 40 CFR 125 Subparts I or J, except as provided in 125.91(c) and (d).

NO
Briefly describe the facility's cooling water source(s). (For example: Well water, municipal water, etc.)
Municipal water

Potable Water Wastewater Specific Questions

Select one of the classifications of the potable water treatment facility. Examples of miscellaneous wastewaters include, but, are not limited to: sump dewatering water, pump seal water, condensate waters, hydrant flushing water, fire system suppression test water.

Chemical Precipitation/Filtration

Does the facility backwash filters and/or clean sedimentation basins?

YES

Is chlorinated water used for back-washing and/or cleaning the sedimentation basins?

YES

Is the source water for the facility from a surface water or groundwater?

Surface Water

Outfall Information and Effluent Characteristics (1 of 1)

Outfall:001 Receiving water:Huron River

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

Outfall Description

001

Enter the name of the receiving water:

Huron River

Outfall

42.314722,-83.7630

CORRECTION REQUEST (CORRECTED)

Outfall 001 Coordinates

Please provide the outfall coordinates for the discharge location where it meets the receiving water. The outfall coordinates provided place the discharge just North of the lagoon and M-14. The coordinates should place the outfall on the Huron River.

Created on 8/26/2020 12:51 PM by Kathryn Gallagher

2. TYPE OF WASTEWATER DISCHARGED THROUGH THIS OUTFALL

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

Potable Water Wastewater

3. FLOW

Is the discharge continuous or seasonal?

Continuous

CORRECTION REQUEST (CORRECTED)

Discharge Characterization

Please change the answer to continuous, as it is the most appropriate characterization for this facility. A facility with seasonal discharges is restricted in when they can discharge according to the time of year.

Created on 8/26/2020 12:29 PM by **Kathryn Gallagher**

?NOTE: Continuous discharges include batch discharges

[For the definition of seasonal vs. continuous discharge, CLICK HERE to view the application Appendix](#)

What maximum daily flow rate are you requesting authorization to discharge from this outfall for the next five years?

Enter a numeric value only based on the units Million Gallons Per Day.

3.0

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

Hours per day:	Days per year:
8	30

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:
Lime Softening Residuals	4941	See process description

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 "DMR" if you submit Discharge Monitoring Reports (DMRs) for that parameter, select "LAB REPORT" if you've attached a lab report for that parameter, or select "NONE" if you do not submit DMRs and have not attached a lab report for that parameter.

[CLICK HERE to open 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
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	LAB REPORT		
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	NONE	Waiver request not required.	
Dissolved Oxygen	NONE	Waiver request not required.	
Oil & Grease	NONE	Waiver request not required.	

Please attach lab reports for conventional pollutants here.

2018 Data Summary.xlsx - 09/30/2019 09:12 AM

Comment

NONE PROVIDED

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.

[CLICK HERE to open the Appendix to the Permit Application](#)

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 (Ronnel); 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](#)

7. 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? (including for water treatment additive approvals)

NO

***Please note: this form has a glitch when you click Add New, it will 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 Outfall Information and Effluent Characteristics and click into the Outfall you were adding/editing and the table will work as intended. ***

Water Treatment Additives

Water Treatment Additives (WTAs)

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?

YES

Please list any WTAs currently in use, or will be used during the next permit cycle

Quicklime, ammonia, bleach, carbon dioxide, Clarifloc, granular activated carbon, hydrofluorosilicic acid, liquid oxygen, ozone, sodium hexametaphosphate, sodium hydroxide, sulfuric acid

Approval Upload

[Quicklime.PDF - 09/08/2020 11:35 AM](#)
[Ammonia.PDF - 09/08/2020 01:57 PM](#)
[Bleach.PDF - 09/08/2020 01:57 PM](#)
[Carbon Dioxide.PDF - 09/08/2020 01:57 PM](#)
[Liquid Oxygen.PDF - 09/08/2020 01:57 PM](#)
[Ozone.PDF - 09/08/2020 01:57 PM](#)
[Sodium Hexametaphosphate.PDF - 09/08/2020 01:57 PM](#)
[Hydrofluorosilicic acid.PDF - 09/08/2020 01:57 PM](#)
[Clarifloc.PDF - 09/08/2020 01:57 PM](#)
[Sodium Hydroxide 50%.PDF - 09/08/2020 01:57 PM](#)
[Granular Activated Charcoal.PDF - 09/08/2020 01:57 PM](#)
[Sulfuric Acid 93% 66B SDS.pdf - 09/08/2020 02:08 PM](#)

Comment

NONE PROVIDED

ALL WTAs MUST HAVE SPECIFIC APPROVAL FROM EGLE PRIOR TO THEIR USE.

WTA approval request forms must be submitted through the facility's MiWaters page. Requests submitted through an unaffiliated page or via email will not be processed.

To submit a WTA approval request, go to your site in MiWaters, click on Apps, Requests and Reports, Start New Form, and in the search box under the form name filter, type "additive," and click on Begin Submission for either "Service Request ♦ Non-Select Water Treatment Additive Request Form" OR "Select Water Treatment Additive Request Form."

The link below will take you to instructions concerning WTAs, including guidance on selecting the correct form in MiWaters. [CLICK HERE to link to WTA guidance/instructions](#)

[Appendix to the Permit Application](#)

Other Information

Comments (As needed)

NONE PROVIDED

Additional Documents (As needed)

NONE PROVIDED

Comment

NONE PROVIDED

Application Fee

COC Renewal Fee

75

Please note, if you mistakenly select the incorrect fee, underpayments result in the application being administratively incomplete and if you over pay, refunds for the overpayment take additional time to process. Also, only pay the NPDES application fee one time, if you are prompted to pay when REVISING a previously submitted application do not pay the application fee a second time.

Fee Amount

75

Status History

	User	Processing Status
9/8/2020 11:10:13 AM	Brian Steglitz	Draft
9/8/2020 2:53:45 PM	Brian Steglitz	Submitted

Audit

Event	Event Description	Event By	Event Date
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Revisions

Revision	Revision Date	Revision By
Revision 1	9/25/2019 11:02 AM	Brian Steglitz
Revision 2	9/8/2020 11:10 AM	Brian Steglitz

Submission Agreements

APPLICATION CERTIFICATION

Rule 323.2114(1-4), promulgated under the Michigan Act, requires that this form must **must be electronically-signed, backed by a certifier agreement form with a wet-ink signature from one of the following:**

A. For an organization, company, corporation, or authority, by a principal executive office, vice president, or higher

B. For a partnership, by a general partner

C. For a sole proprietor, by the proprietor

D. For a municipal, state, or other public facility, by a principal executive officer or ranking elected official (e.g., mayor, village president, city or village manager, or clerk)

Note: If the signatory is not listed above, but is authorized to sign the Application, please provide documentation of that authorization.

"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 having knowledge of violations."

I understand that my e-signature constitutes a legal agreement to comply with the requirements of the NPDES Permit. I certify under penalty of law that I possess full authority on behalf of the legal owner/permittee to sign and submit this Application.

<input checked="" type="checkbox"/>	I am the owner of the account used to perform the electronic submission and signature.
<input checked="" type="checkbox"/>	I have the authority to submit the data on behalf of the facility I am representing.
<input checked="" type="checkbox"/>	I agree that providing the account credentials to sign the submission document constitutes an electronic signature equivalent to my written signature.
<input checked="" type="checkbox"/>	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.