

Idaho Pollutant Discharge Elimination System

POTW Permit Application Instructions

(Formerly EPA NPDES Form 2A)



**State of Idaho
Department of Environmental Quality
Water Quality Division
1410 N. Hilton
Boise, ID 83706**

July 2017



Printed on recycled paper, DEQ June 2017, PID IPGF, CA code 82988. Costs associated with this publication are available from the State of Idaho Department of Environmental Quality in accordance with Section 60-202, Idaho Code.

Table of Contents

Abbreviations and Acronyms	v
General Information.....	1
Who Must Apply.....	1
Indian Country	1
When to Apply	1
Fees for POTWs	2
Submitted Information Available to Public	2
Completing Required Application Information	3
Part A. Basic Information	3
A.1.– A.2. Reserved	3
A.3. New Versus Existing Discharger	3
A.4. Collection System and Flow.....	3
A.5. Reserved	4
A.6. Flow.....	4
A.7. Collection System.....	4
A.8. Discharge and Disposal	4
Contractor Information.....	6
Select an outfall	6
A.9. Description of Outfall.....	6
A.10. Description of Receiving Waters	7
A.11. Description of Treatment.....	7
A.12. Effluent Testing Information.....	8
Part B. POTWs with a Design Flow Greater than or Equal to 0.1 mgd	9
B.1. Inflow and Infiltration	9
B.2. Topographic Map	9
B.3. Process Flow Diagram or Schematic.....	10
B.4. Reserved	10
B.5. Scheduled Improvements and Implementation Schedules	10
B.6. Effluent Testing Data (greater than or equal to 0.1 mgd only).....	11
Part C. Reserved.....	11
Part D. Expanded Effluent Testing Data.....	11
Part E. Whole Effluent Toxicity (WET) Testing.....	12
E.1. Required Tests	13

E.2. Individual Test Data.....	14
E.3. Toxicity Reduction Evaluation (TRE).....	15
E.4. Summary of Submitted WET Test Information	16
Part F. Industrial User Information (SIU, RCRA, or CERCLA).....	16
F.1. Pretreatment Program	17
F.2. Number of SIUs and CIUs	17
F.3. Significant Industrial User Information	17
F.4. Industrial Processes.....	17
F.5. Principal Products and Raw Materials	17
F.6. Flow Rate	18
F.7. Pretreatment Standards	18
F.8. Problems at the POTW Attributed to Waste Discharged by the SIU/CIU	18
RCRA Hazardous Waste Received by Truck, Rail, or Dedicated Pipeline	18
F.9. RCRA Waste.....	19
F.10. and F.11. Waste Transport Type and Description	19
CERCLA, RCRA Remediation/Corrective Action, and Other Remedial Waste Activity:.....	19
F.12. Remediation Waste	20
F.13., 14., and 15. Waste Origin, Pollutants, and Waste Treatment	20
Part G. Combined Sewer Systems	20
G.1. System Map.....	20
G.2. System Diagram	21
G.3. CSO Description of Outfall.....	21
G.4. CSO Events	22
G.5. Description of Receiving Waters	22
G.6. CSO Operations.....	23
Part H. Requests.....	23
Part I. Other Information.....	23
Appendix A. Guidance for Completing the Effluent Testing Information—All POTW	24
Appendix B. Industrial Categories Subject to National Categorical Pretreatment Standards	27

List of Tables

Table 1. Effluent testing data requirements for each outfall of all applicants.	8
Table 2. Effluent testing data requirements for each outfall of all applicants = or > 0.2 mgd.	11
Table 3. Additional effluent testing data requirements for each outfall.	12

Abbreviations and Acronyms

§	section (usually a section of federal or state rules or statutes)	LC ₅₀	lethal concentration to kill 50% of a test species
BOD ₅	5-day biochemical oxygen demand	MDL	method detection limit
CBOD ₅	carbonaceous biochemical oxygen demand	mgd	million gallons per day
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act	ML	minimum level
CFR	Code of Federal Regulations	NOEC	no observed effect concentration
cfs	cubic feet per second	NPDES	National Pollutant Discharge Elimination System
CIU	categorical industrial user	POTW	publicly owned treatment works
CSO	combined sewer overflow	RCRA	Resource Conservation and Recovery Act
DEQ	Idaho Department of Environmental Quality	SIU	significant industrial user
DMR	discharge monitoring report	TRE	toxicity reduction evaluation
<i>E. coli</i>	<i>Escherichia coli</i>	TSDF	treatment, storage, and disposal facility
EDU	equivalent dwelling unit	US	United States
EPA	US Environmental Protection Agency	USGS	US Geological Survey
GC/MS	gas chromatography/mass spectrometry	WET	whole effluent toxicity
gpd	gallons per day		
IC ₂₅	concentration that causes 25% inhibition		
IDAPA	Idaho Administrative Procedures Act		
IPDES	Idaho Pollutant Discharge Elimination System		

General Information

Who Must Apply

New and existing publicly owned treatment works (POTW) must complete this application for an Idaho Pollutant Discharge Elimination System (IPDES) permit. For the IPDES program and requirements of this application, the term POTW includes:

- Publicly and privately owned treatment works predominantly treating domestic sewage,
- Domestic sewage treatment works,
- Sewer districts, and
- Any other dischargers designated by the Idaho Department of Environmental Quality (DEQ).

Indian Country

DEQ does not issue IPDES discharge permits for POTWs located in/within the limits of Indian Country, defined as:

Indian Country (IDAPA 58.01.25.010.43).

- a. All land within the limits of any Indian reservation under the jurisdiction of the United States Government, notwithstanding the issuance of any patent, and, including rights-of-way running through the reservation;
- b. All dependent Indian communities within the borders of the United States, whether within the originally or subsequently acquired territory thereof, and whether within or without the limits of the state; and
- c. All Indian allotments, the Indian titles to which have not been extinguished including rights-of-way running through the same.

If the POTW is located in Indian Country, contact the US Environmental Protection Agency (EPA) about submitting a National Pollutant Discharge Elimination System (NPDES) permit application.

When to Apply

For an existing source or sludge-only facility, provide adequate time for DEQ to assess the completeness of a renewal application by submitting an application at least 240 days (180 days by rule + 60 days for DEQ review = 240 days) before the permit's expiration date. Failure to submit an application within the timeframe may result in an expired permit. Complete applications must be submitted at least 180 days before the present permit expires; however, DEQ is allowed 60 days to determine if the application is complete. Applications for complex POTWs with multiple discharge points may require even more time to ensure application completeness. IPDES permit conditions will identify the date by which permit applicants must submit a re-application.

For a new source or new discharge, provide adequate time for DEQ to assess the completeness of a new application without jeopardizing the discharge schedule, by submitting an application at least 210 days (180 days by rule + 30 days for DEQ review = 210 days) before the anticipated discharge date. Complete applications must be submitted at least 180 days before the date on which the discharge is to commence; however, DEQ is allowed 30 days to determine if the application is complete. New sources and new discharges must not occur prior to receipt of an issued permit.

DEQ will consider your application complete when the application and any supplementary material is received and completed according to DEQ's satisfaction.

Fees for POTWs

POTWs, including domestic sewage treatment works, and sewer districts are charged an annual fee of \$1.74 per equivalent dwelling unit (EDU) that they serve. DEQ defines EDU in IDAPA 58.01.25.010.35 as:

A measure where one (1) equivalent dwelling unit is equivalent to wastewater generated from one (1) single-family residence. The number of EDUs must be calculated from the municipality's population served divided by the average number of people per household as defined in the most recent Census Bureau data (for that municipality, county, or average number of persons per household for the state of Idaho).

This definition refers to the most recent US Census Bureau annual estimate for the municipality or area served (e.g., sewer districts may not be clearly represented in US Census Bureau statistics).

To determine the appropriate annual fee for these POTWs, DEQ requires calculating EDUs by (IDAPA 58.01.25.110.02):

- i. Using the most recent Census Bureau statistics for estimates of the population served and the average number of people in a household; or
- ii. Existing facilities may report to the Department the number of EDUs served, annually; or
- iii. New facilities may report to the Department the number of EDUs to be served, based on the facility planning design as part of the IPDES permit application.

DEQ assesses annual fees on or before July 1 of each year, and payments are due on October 1 of each year. POTWs serving 575 EDUs or more, may request to divide annual fee payments into equal monthly or quarterly installments by submitting a request to DEQ through the IPDES E-Permitting System. Permit fees are expected to be received October 1, 2019.

Submitted Information Available to Public

DEQ will make information provided on the IPDES permit application available for public inspection, upon request. Information **required** by Idaho rules and supporting an individual permit application cannot be held confidential. If the applicant believes that some information is a trade secret or should be held confidential, DEQ requires that each item describing the confidential information contain language such as *trade secret*, *proprietary*, or *confidential*.

Information **required** by Idaho rules and supporting an individual permit application cannot be held confidential.

Completing Required Application Information

This IPDES application for a POTW is divided into sections A–G, including effluent monitoring tables. Not all applicants are required to complete each section of the application or all of the tables. The questions on the form direct you to the items and tables that must be completed.

If you do not enter information in a required field, an error is highlighted on the application screen. If you do not have such information, enter **9999** into the required field or select **Not Available/Applicable** from the dropdown option, which continues the application process and indicates to permitting staff that you do not have the required information.

Part A. Basic Information

The *Basic Information* section is required for all publicly and privately owned treatment works (POTW) applicants.

A.1.– A.2. Reserved

A.3. New Versus Existing Discharger

Is this POTW currently covered under an NPDES/IPDES permit (e.g., is not a new source or discharge)? Answer *Yes* if this application is for a POTW that currently covered for discharges under an existing NPDES or IPDES permit. **Required field.**

A.4. Collection System and Flow

Provide information on municipalities and areas served by the POTW. Provide the name and population of each entity, and provide information on the type of collection system (combined versus separate) and its ownership (e.g., municipal or private). Provide the names of all the cities, towns, unincorporated areas, and NPDES/IPDES numbers (if known) served by the POTW, and enter the number of people from each entity served by the POTW at the time you complete this application. Include privately owned collection systems discharging predominantly domestic waste to the POTW. Provide the number of total EDUs (IDAPA 58.01.25.010.35 and 58.01.25.110) served by the POTW, if known. Indicate whether each portion of the collection system is separate storm, separate sanitary, or combined. Identify the ownership status of each portion of the system (e.g., municipal or private). **Required fields.**

Do not report privately owned collection systems discharging industrial waste to the POTW; those facilities must be reported in Part F. *Industrial User Information*.

A.5. Reserved

A.6. Flow

Indicate the design flow rate of the POTW.

Provide the average daily flow rate and maximum daily flow for each of the last 3 years. Each year's data must be based on a 12-month period with the 12th month of "this year" occurring no more than 3 months before the application submittal.

a. Design flow rate. Provide the POTW's current design flow rate in million gallons per day (mgd). POTWs with a design flow less than 5 mgd must provide the design flow rate to two decimal places. POTWs that are greater than or equal to 5 mgd must report to one decimal place because fluctuations of 0.01 mgd to 0.09 mgd in smaller POTWs represent a significant percentage of daily flow. **Required field.**

b. Annual average daily flow rate. Enter the annual average daily flow rate (mgd) that the POTW actually treated this year and each of the past 2 years, for days that the POTW actually discharged. Each year's data must be based on a 12-month period with the 12th month of "this year" occurring no more than 3 months before application submittal. **Required field for existing dischargers.**

c. Maximum daily flow rate. Enter the maximum daily flow rate (mgd) that the POTW received this year and each of the past 2 years. Each year's data must be based on a 12-month period with the 12th month of "this year" occurring no more than 3 months before application submittal. **Required field for existing dischargers.**

A.7. Collection System

Indicate the types of collection systems used by the POTW and estimate the percent contribution based on the amount of miles of each. Identify what type of collection system brings wastewater to the POTW, and estimate the percentage (i.e., miles of pipe) of the entire collection system each type represents. For example, 80% separate sanitary sewers would mean that 80% of the actual miles of pipes are separate sanitary sewers (and 20% are combined sewers). The total must add up to 100%. **Required field.**

A.8. Discharge and Disposal

a. Identify the number and types of discharge points the POTW uses: Identify the number of treated effluent discharge points, untreated or partially treated effluent discharge points, combined sewer overflow (CSO) points, constructed emergency overflows before the headworks (provide latitude and longitude in decimal degrees), and any other discharge points (provide latitude and longitude in decimal degrees). **Required field.**

b. Does the POTW discharge effluent to basins, ponds, or other surface impoundments that do not have outlets for discharge to waters of the United States? **Required field.**

If *Yes*, provide the latitude and longitude in decimal degrees of the center of each surface impoundment. A surface impoundment with no point source discharge to waters of the United States is a holding pond or basin large enough to contain all wastewater discharged into it without water overflow and is used for water evaporation, or to attenuate high collection system flows until the POTW can accommodate these excess flows. The POTW must identify the location of each surface impoundment (latitude and longitude in decimal degrees), annual average volume discharged to each impoundment (mgd), and frequency of discharge into the surface impoundment (continuous or intermittent).

If the POTW discharges to more than one surface impoundment, use the *Add Additional Surface Impoundment Site* button to provide this information for each impoundment. The location of each the surface impoundment may also be referenced on the topographic map prepared under question B.2. *Topographic Map*, if applicable.

c. Does the POTW apply treated wastewater (recycled water) to an application site? **Required field.**

If *Yes*, provide the latitude and longitude of the center of each application site: Recycled water (treated wastewater) is applied by spraying or spreading the recycled water on an application site. If the POTW applies recycled water to land, for each site, identify the location (latitude and longitude in decimal degrees), size (acres), annual average daily volume applied (mgd), and frequency of discharge/application (continuous or intermittent). If the POTW applies recycled water to more than one site, use the *Add Additional Application Site* button to provide the information for each site. The information on the location of the application site may be identified on the topographic map prepared under B.2. *Topographic Map*, if applicable.

d.1. Does this POTW discharge or transport treated or untreated wastewater to another facility? Answer, *Yes*, if the POTW discharges treated or untreated wastewater to another facility (including a municipal waste transport or collection system). **Required field.**

d.1. If *Yes*, describe how the wastewater from the POTW is discharged or transported to another facility (e.g., tank truck or pipe). Provide the information requested in question A.8.d. If the POTW sends wastewater to more than one facility, provide this information for each facility. **Required field if *Yes* to A.8.d.**

d.2. Is transport by a party other than the applicant? If *Yes*, provide the name and mailing address of the company that transports the POTW's wastewater to another facility and the name, title, phone number, and email of the contact person at the transportation company. **Required fields if *Yes* to A.8.d.**

d.3. For each facility that receives this discharge, provide the following: Provide the name and mailing address of each facility that receives wastewater from this POTW, the name, title, phone number, and email of the contact person at the facility that receives the POTW's wastewater, and the NPDES/IPDES permit number for the facility, if known. Indicate the average daily flow (mgd) that is sent from the POTW to another facility. **Required fields if *Yes* to A.8.d.**

e. Is the POTW's discharge or disposal not included in the *Discharge and Disposal*? **Required field.**

If *Yes*, provide the following for each disposal method: If the POTW disposes of its wastewater using a method not described in sections A.8.a. through A.8.d., briefly describe how the POTW discharges or disposes of its wastewater (e.g., underground percolation or well injection). Provide the annual daily volumes (mgd) disposed, and indicate whether the discharge/disposal is continuous or intermittent. **Required fields if *Yes* to A.8.e.**

Contractor Information

Are any operational or maintenance aspects related to wastewater treatment or discharge of the POTW the responsibility of a contractor? **Required field.**

If *Yes*, complete the following information: If any of the POTW's operational or maintenance aspects are the responsibility of a contractor, provide the contractor's company name and the contact person's name, title, company mailing address, phone, and email. Describe the contractor's operational and maintenance responsibilities.

If the POTW has more than one contractor responsible for operational or maintenance aspects, use the *Add Additional Contractor Information* button to provide the information for each. **Required fields if *Yes* to B.4.**

Select an outfall

A.9. Description of Outfall

a. Is this outfall a bypass? Answer *Yes* if this is used as a bypass-only outfall for untreated or partially treated effluent discharge. **Required field.**

Provide the outfall number, outfall title (optional), and location. For location, provide the city or town zip code, county, state, and latitude and longitude in decimal degrees. If this outfall is a subsurface discharge (e.g., into a lake), indicate the distance the outfall is from shore and the distance below the water's surface. Provide these distances (feet) at the full pool for lakes and reservoirs, and base flow for flowing water bodies. Provide the average daily flow rate (mgd). **Required fields.**

b. Does this outfall have either an intermittent or a periodic discharge? Mark whether this outfall is a periodic or intermittent discharge. A *periodic discharge* occurs regularly (e.g., monthly or seasonally) but is not continuous all year. An *intermittent discharge* occurs occasionally but not regularly. **Required field.**

If *Yes*, provide the following information: Provide the number of times per year a discharge occurs from this outfall. Indicate the length (hours) each discharge lasts, amount of water discharged (mgd), and select the months when discharge occurs. If you do not have exact records of the months the discharges occurred, provide an estimate based on the best available information. **Required fields if *Yes* to A.9.b.**

c. Is outfall equipped with a diffuser? **Required field.**

If *Yes*, identify the type of diffuser: Indicate whether the outfall is equipped with a diffuser, and if *Yes*, select the type of diffuser (multiport or single port). **Required field if *Yes* to A.9.c.**

A.10. Description of Receiving Waters

I fully understand the implications of IDAPA 58.01.25.100.01 and accept responsibility for ensuring that all other necessary approvals, authorizations, or permits have been obtained. Check the box to indicate if you have read and understand this requirement for completing an IPDES application. **Required field.**

Rights (IDAPA 58.01.25.100.01). The issuance of, or coverage under, an IPDES permit does not convey any property rights or any exclusive privilege nor does it authorize any injury to persons or property or invasion of other private rights, or any infringement of state or local law or regulations. The issuance of, or coverage under, an IPDES permit does not constitute authorization of the permitted activities by any other state or federal agency or private person or entity, and does not excuse the permit holder from the obligation to obtain any other necessary approvals, authorizations, or permits.

a. Name of receiving water: Provide the name of the receiving surface water to which this outfall discharges. If the receiving surface water is a man-made water, identify the natural water body to which the discharge will ultimately flow (e.g., Control Ditch A, then into Stream B). **Required field.**

b. Reserved

c. Name of subbasin (if known): If known, provide the name of the subbasin into which this outfall discharges and the 8-digit hydrologic cataloging unit code assigned by the US Geological Survey (USGS).

d. Critical low flow of receiving stream (if available). acute (1Q10): or chronic (7Q10): If known and if the water body is a river or stream, provide the acute and chronic critical low flow (cubic feet per second [cfs]). If you are unsure of these numbers, the USGS may provide them, or you may get these numbers from prior studies.

e. Total hardness of receiving stream at critical low flow (if available):

A.11. Description of Treatment

a. What levels of treatment are provided? Check all that apply. Indicate the *Treatment Categories* and *Treatment Processes* that the POTW provides for the discharge from this outfall. **Required field.**

b. Design Removal Rates. Indicate the removal rates (as applicable). Provide the design removal rates (%), for biochemical oxygen demand (BOD₅) or carbonaceous biochemical oxygen demand (CBOD₅), suspended solids, phosphorus, nitrogen, and any other parameter, if applicable, or requested by DEQ. **Required field for BOD₅/CBOD₅ and total suspended solids.**

c. What type of disinfection is used for the effluent from this outfall? **Required field.**

1. Identify the type of disinfection used for the effluent from this outfall: Identify the type of disinfection the POTW uses (e.g., chlorination, ozonation, or ultraviolet).

2. If it varies by season, describe the disinfection technique: Describe any seasonal variation in disinfection technique that may occur.

3. If disinfection is by chlorination, is dechlorination used for this outfall? If the POTW uses chlorination, indicate whether it also dechlorinates. **Required field.**

d. Does the POTW have postaeration? Identify if the POTW has postaeration. **Required field.**

A.12. Effluent Testing Information

All applicants that discharge effluent to waters of the United States must provide effluent testing data for each outfall. Refer to Table 1 to determine which effluent testing information questions you must complete and to determine the number of pollutant scans on which to base the data.

Table 1. Effluent testing data requirements for each outfall of all applicants.

POTW Characteristics	Application Requirements	Minimum Number of Scans (Appendix A)
Design flow rate less than 0.1 mgd <i>and</i> not required to develop or does not have an approved pretreatment program	A.12. <i>Effluent Testing Information</i>	3
Design flow rate greater than 0.1 mgd but less than 1 mgd <i>and</i> not required to develop or does not have an approved pretreatment program	A.12. <i>Effluent Testing Information</i> and B.6. <i>Effluent Testing Data</i> —greater than or equal to 0.1 mgd	3
Design flow rate greater than or equal to 1 mgd, <i>or</i> required to develop or has an approved pretreatment program, <i>or</i> otherwise required by DEQ to provide the effluent data	A.12. <i>Effluent Testing Information</i> , B.6. <i>Effluent Testing Data</i> —greater than or equal to 0.1 mgd, and Part D. <i>Expanded Effluent Testing Data</i>	3

Complete the information in A.12. *Effluent Testing Information* once for each outfall (except bypass-only outfalls) through which effluent is discharged to waters of the United States. Do not include information about CSO discharge points. For specific instructions on completing the pollutant tables in A.12. *Effluent Testing Information*, refer to Appendix A. **Required fields for existing dischargers.**

Check those boxes that apply: Check all of the following boxes that apply to the POTW. Your responses will determine which remaining portions of the application must be completed.

Check those that apply:

- POTW flow is = or greater than 0.1 mgd
- POTW flow is = or greater than 1.0 mgd
- POTW has or is required to develop an approved pretreatment program
- POTW is required to submit additional parameter expanded effluent information
- POTW is required to submit additional parameter toxicity or WET testing information
- POTW accepts significant industrial user (SIU) discharges or RCRA/CERCLA wastes
- POTW has a combined sewer system
- POTW has sewage sludge

Contact DEQ if you have any questions about the applicability of these categories to the POTW.

Part B. POTWs with a Design Flow Greater than or Equal to 0.1 mgd

All applicants with a design flow rate greater than or equal to 0.1 mgd must answer questions B.1. *Inflow and Infiltration* through B.6. *Effluent Testing Data* and, in some cases, Part D. *Expanded Effluent Testing Data*.

B.1. Inflow and Infiltration

a. Estimate the average number of gallons per day (gpd) that flow into the POTW from inflow and infiltration: Provide the average number of gallons per day. **Required field for existing dischargers = or > 0.1 mgd.**

b. Are any steps underway or planned to minimize inflow and infiltration? **Required field for existing dischargers = or > 0.1 mgd.**

Briefly explain any steps underway or planned to minimize inflow and infiltration: Provide a narrative of steps the POTW is taking to minimize inflow and infiltration. **Required field if Yes to B.1.b.**

B.2. Topographic Map

On a topographic map, identify the POTW property boundaries extending at least 1 mile beyond the POTW. The map must show the outline of the POTW and the following information:

Provide a topographic map or aerial image extending at least 1 mile beyond the POTW's property boundaries, including all unit processes. The map must show the following:

- a. POTW and surrounding area, including all unit processes.
- b. Major pipes or other structures through which wastewater enters the POTW and the pipes or other structures through which treated wastewater is discharged from the POTW. Include outfalls from bypass piping, if applicable.
- c. Each well where fluids from the POTW are injected underground.
- d. Wells, springs, and other surface water bodies listed in public records or otherwise known to the applicant within one-quarter mile of the POTW's property boundary.
- e. Sewage sludge management facilities (including on-site treatment, storage, and disposal sites).
- f. Location at which waste classified as hazardous under the Resource Conservation and Recovery Act (RCRA) enters the POTW by truck, rail, or dedicated pipe.

Upload the map (pdf or jpg). If you do not have a map available, use DEQ's online tools to create and upload a map. **Required field for existing dischargers = or > 0.1 mgd.**

B.3. Process Flow Diagram or Schematic

Attach a diagram showing the processes of the POTW, including all bypass piping and all backup power sources or redundancy in the system. Provide a water balance showing all treatment units, including disinfection (e.g., chlorination and dechlorination). The water balance must show daily average flow rates at influent and discharge points and approximate daily flow rates between treatment units. Provide a diagram showing the POTW's processes, including all bypass piping and backup power sources or redundancy in the system. Include a water balance showing all treatment units, including disinfection and daily average flow rates at influent and discharge points, and approximate daily flow rates between treatment units. **Required field for existing dischargers = or > 0.1 mgd.**

Provide a brief narrative of the diagram: Include a brief narrative describing the diagram. **Required field for existing dischargers = or > 0.1 mgd.**

B.4. Reserved

B.5. Scheduled Improvements and Implementation Schedules

Select an outfall to edit.

a. Are scheduled improvements or schedules of implementation proposed? **Required field for existing dischargers = or > 0.1 mgd.**

If *Yes*, for each outfall provide information on any improvements to the POTW that are currently planned. Include only those improvements that will affect the wastewater treatment, effluent quality, or design capacity of the POTW (such improvements may include regionalization of POTWs). Identify the schedule for when these improvements will be started and finished. If the POTW has more than one improvement planned, use the *Add Additional Outfall Implementation Schedule* button to provide information for each one.

b. **Outfall Implementation Schedule.** For each outfall, identify dates for the following stages of any compliance schedule. For improvements that are planned independently of local, state, or federal agencies, indicate planned or actual completion dates, as applicable. If a step has already been finished, give the date when that step was completed.

- **Proposed Improvements Description:** Describe the proposed or ongoing improvements.
- **Scheduled Construction Commencement:** Date planned to start construction (MMDDYYYY). **Required field if Yes to B.5.a.**
- **Scheduled Construction Completion:** Date expected to finish construction (MMDDYYYY). **Required field if Yes to B.5.a.**
- **Scheduled Discharge Commencement:** Date expected a discharge will start (MMDDYYYY). **Required field if Yes to B.5.a.**

- **Actual Completion Date:** Date expected the effluent level will meet the POTW’s implementation schedule conditions (MMDDYYYY).

c. Are the planned improvements or implementation schedule required by local, state, or federal agencies? Indicate whether the planned improvements or implementation schedules are required by local, state, or federal agencies. **Required field if Yes to B.5.a.**

If Yes, Identify the new maximum daily inflow rate (mgd): Provide the new maximum daily inflow rate, if applicable. **Required field if Yes to B.5.c.**

d. Have appropriate permits/authorizations concerning other federal/state requirements been obtained? **Required field if Yes to B.5.a.**

If Yes, Describe briefly: Describe whether the POTW has received appropriate permits or clearances required by other federal or state requirements. **Required field if Yes to B.5.d.**

B.6. Effluent Testing Data (greater than or equal to 0.1 mgd only)

Complete the information in B.6. *Effluent Testing Data* once for each outfall through which effluent is discharged to waters of the United States (Table 2). Do not include information about CSO discharge points. For specific instructions on completing these pollutant tables, refer to Appendix A.

Table 2. Effluent testing data requirements for each outfall of all applicants = or > 0.2 mgd.

POTW Characteristics	Application Requirements	Minimum Number of Scans (Appendix A)
Design flow rate greater than 0.1 mgd but less than 1 mgd, <u>and</u> not required to develop or does not have an approved pretreatment program	A.12. <i>Effluent Testing Information</i> and B.6. <i>Effluent Testing Data</i> —greater than or equal to 0.1 mgd	3
Design flow rate greater than or equal to 1 mgd, <u>or</u> required to develop or has an approved pretreatment program, <u>or</u> otherwise required by DEQ to provide the effluent data	A.12. <i>Effluent Testing Information</i> , B.6. <i>Effluent Testing Data</i> —greater than or equal to 0.1 mgd, and Part D. <i>Expanded Effluent Testing Data</i>	3

Required fields for existing dischargers = or > 0.1 mgd.

Part C. Reserved

Part D. Expanded Effluent Testing Data

A POTW that discharges effluent to surface waters of the United States and meets one or more of the following criteria must complete Part D. *Expanded Effluent Testing Data*:

- Design flow rate greater than or equal to 1 mgd; or
- Required to develop or has an approved pretreatment program; or

- Required by DEQ to provide the effluent testing information

Refer to Table 3 to determine which effluent testing information questions you must complete and to determine the number of pollutant scans on which to base the data.

Table 3. Additional effluent testing data requirements for each outfall.

POTW Characteristics	Application Requirements	Minimum Number of Scans (Appendix A)
Design flow rate greater than or equal to 1 mgd, <u>or</u> required to develop or has an approved pretreatment program, <u>or</u> otherwise required by DEQ to provide the effluent data	A.12. <i>Effluent Testing Information</i> , B.6. <i>Effluent Testing Data</i> —greater than or equal to 0.1 mgd, and Part D. <i>Expanded Effluent Testing Data</i>	3

Complete Part D. *Expanded Effluent Testing Data* once for each outfall through which effluent is discharged to waters of the United States. The five categories for which this information must be completed are:

- Metals, cyanide, phenols, and hardness
- Volatile organic compounds
- Acid-extractable compounds
- Base-neutral compounds
- Other category

See 40 CFR 122 Appendix J for the complete list of pollutants.

Using the *Other Category*, submit any data the POTW may have for pollutants not specifically listed or for pollutants that are analyzed using different EPA-approved methods (e.g., two different methods were used for the same pollutant). Check the *Not Anticipated to be Present* box for all pollutants you do not anticipate to be present in the effluent discharge. DEQ may require additional testing on a case-by-case basis.

For specific instructions on completing the pollutant tables, refer to Appendix A.

Required fields for existing dischargers = or > 1 mgd.

Part E. Whole Effluent Toxicity (WET) Testing

POTWs meeting one or more of the following criteria must complete Part E. *WET Testing*:

- Design flow rate greater than or equal to 1 mgd; or
- An approved pretreatment program (and those required to develop one under 40 CFR 403); or
- Required by DEQ to submit the results of whole effluent toxicity (WET) testing

Applicants completing Part E. *WET Testing* must submit the results from any WET test conducted during the past 4.5 years that have not been reported or submitted to DEQ for each outfall discharging effluent to the waters of the United States. Do not include information on CSOs in this section. If the applicant conducted a WET test during the past 4.5 years that

revealed toxicity, provide any information available on the cause of the toxicity or any results of a toxicity reduction evaluation, if one was conducted.

Test results provided in Part E. *WET Testing* must be based on multiple species tested quarterly for a minimum of 1 year. For multiple species, EPA requires a minimum of 2 species (e.g., vertebrates and invertebrates). DEQ may require the applicant to include other species (e.g., plants). Applicants must provide these tests for either acute or chronic toxicity depending on the range of the receiving water dilution. EPA recommends that applicants conduct acute or chronic toxicity testing based on the following dilutions:

- Acute toxicity testing if the effluent's dilution is greater than 1,000:1 at the edge of the mixing zone.
- Acute or chronic toxicity testing if the effluent's dilution is between 100:1 and 1,000:1 at the edge of the mixing zone. Acute testing may be more appropriate at the higher end of this range (1,000:1), and chronic testing may be more appropriate at the lower end of this range (100:1).
- Chronic toxicity testing if the effluent's dilution is less than 100:1 at the edge of the mixing zone.

All data provided in Part E. *WET Testing Data* must be based on tests performed within 4.5 years before completing this application. The tests must have been conducted since the last NPDES/IPDES permit issuance or permit modification under 40 CFR 122.62(a) or IDAPA 58.01.25.201.

In addition, applicants should only submit data that have not previously been submitted to the permitting authority. **If test data have already been submitted within the last 4.5 years according to an issued NPDES/IPDES permit, do not reenter that information.** A permittee with no significant toxicity in the effluent over the past year who has submitted all WET test results through the end of the calendar quarter preceding the permit application does not need to supply additional WET testing data as part of this application. Instead, the applicant should complete E.4. *Summary of Submitted WET Test Information*, which requests a summary of WET test information already submitted.

When test data are requested to be reported, DEQ reserves the right to request that the data be reported through the IPDES web application.

Outfall number: Select each outfall from the dropdown and complete the appropriate Part E. *Whole Effluent Toxicity (WET) Test Information*.

E.1. Required Tests

a. **Indicate the number of WET tests conducted in the past 4.5 years:** Provide the total number of chronic and acute WET tests conducted in the past 4.5 years. A *chronic* toxicity test continues for a relatively long period of time, often one-tenth the life span of the organism or more. An *acute* toxicity test is one in which the effect is observed in 96 hours or less. **Required fields for existing dischargers = or > 1 mgd.**

E.2. Individual Test Data

Complete the following for each WET test conducted in the last 4.5 years. Complete E.2. *Individual Test Data* for each outfall and each test conducted in the last 4.5 years for which data has not been submitted. Use the columns for each test and specify the test number at the top of each column. Use the *Add Additional Test* button if more than 4 tests are being reported. The parameters listed are based on EPA-recommended test methods. Permittees may be required by DEQ to submit additional test parameter data for quality assurance purposes.

Have WET test data already been submitted to EPA? Identify if this POTW has already submitted WET test data to EPA for the current permit. If so, do not reenter WET test data that have already been submitted. **Required field for existing dischargers = or > 1 mgd.**

If Yes, enter the dates the test information was submitted: **Required field if Yes.**

Dates submitted to EPA: If the POTW conducted WET tests and reported the results according to the current EPA-issued NPDES permit (not an IPDES permit) requirement, identify the dates the tests were submitted and do not fill out the information requested in E.2. *Individual Test Data* for those tests (unless otherwise required by DEQ).

List of test data WET test section: Select and complete each WET test section for tests that data have not already been submitted.

Test Number: Identify a unique number for each test conducted. **Required fields for WET Testing.**

Is accelerated test? Identify if each test is an accelerated test. **Required fields for WET Testing.**

a. Test information. Provide the information requested for each test reported. Under *Test species*, *Test method number*, identify the scientific name of the organism used in the test and the test method number. **Required fields for WET Testing.**

b. Toxicity test methods used: Provide the source of the toxicity test methods. In conducting the tests, the POTW must use methods approved in 40 CFR 136. **Required fields for WET Testing.**

c. Sample collection method used. For multiple grab samples, indicate the number of grab samples used. Indicate whether *24-hour composite* or *grab* samples were used for each test. Provide the number of grab samples used. Refer to Appendix A for a definition of composite and grab samples. **Required fields for WET Testing.**

d. Indicate when the sample was taken in relation to disinfection (check all that apply). **Required fields for WET Testing.**

e. Describe the point in the treatment process at which the sample was collected. **Required fields for WET Testing.**

f. For each test, include whether the test was intended to assess chronic toxicity, acute toxicity, or both. **Required fields for WET Testing.**

g. Type of test performed. Indicate which type of test was performed. A *static* test is performed with a single constant volume of water. In a *static-renewal* test, the volume of water is renewed at discrete intervals. In a *flow-through* test, the volume of water is renewed continuously.

Required fields for *WET Testing*.

h. Source of dilution water. If laboratory water, specify type; if receiving water, specify source. Indicate whether laboratory water or the receiving water of the tested outfall was used as the source of dilution water. If laboratory water was used, provide the type of water used. Required fields for *WET Testing*.

i. Type of dilution. Always use fresh dilution water. Required fields for *WET Testing*.

j. Provide the percentage of the effluent used for all concentrations in the test series. Required fields for *WET Testing*.

k. Parameters measured during the test (state whether parameter meets test method specification). Provide the minimum and maximum parameters measured during the test for *pH*, *salinity*, *temperature*, *ammonia*, and *dissolved oxygen*. Identify, *Yes/No*, if each parameter meets the test method specification. Required fields for *WET Testing*.

l. Test results. Provide the results of each acute/chronic toxicity test performed that were identified in E.2.f. Required fields for *WET Testing*.

- **Acute.** For acute toxicity tests, provide:
 - The *Percent survival of the test species in 100% effluent*. Provide the concentration that is lethal to 50% (LC_{50}) of the test organisms. LC_{50} is the effluent (or toxicant) concentration estimated to be lethal to 50% of the test organisms during a specific period. Provide the *95% confidence interval*, *Control percent survival*, and any *Other* test results, if requested by DEQ, in the space provided.
- **Chronic.** For chronic toxicity tests, provide data at the most sensitive endpoint.
 - Generally expressed as a no observed effect concentration (*NOEC*), it may be expressed as an inhibition concentration to 25% (IC_{25}). The *NOEC* is the highest measured concentration of an effluent (or a toxicant) at which no significant adverse effects are observed on the test organisms at a specific time of observation. The IC_{25} is the effluent (or toxicant) concentration estimated to cause a 25% reduction in reproduction, fecundity, growth, or other nonlethal biological measurements. Provide the *Control percent survival* and indicate any *Other* test results, if requested by DEQ, in the space provided.

m. Quality Control/Quality Assurance. Identify whether reference toxicant data are available and whether the reference toxicant test was within acceptable bounds. Provide the date on which the reference toxicant test was run. Provide any other quality control/quality assurance information requested by DEQ. Required fields for *WET Testing*.

E.3. Toxicity Reduction Evaluation (TRE)

a. Is the POTW involved in a TRE? A *Toxicity Reduction Evaluation (TRE)* is a site-specific study conducted in a stepwise process designed to identify the causative agents of effluent

toxicity, evaluate the effectiveness of toxicity control options, and confirm the reduction in effluent toxicity. **Required field for *Toxicity Testing*.**

b. If *Yes*, describe or upload a copy of the document describing the TRE: If the POTW is conducting a TRE as part of a NPDES/IPDES permit requirement or enforcement order, provide only the date of the last TRE progress report in the space provided. **Required field if *Yes* to E.3.a.**

E.4. Summary of Submitted WET Test Information

a. Was WET test or information about the cause of toxicity submitted within the last 4.5 years? **Required field if *Yes* to E.3.a.**

b. If a WET test or information about the cause of toxicity was submitted within the past 4.5 years, provide the dates the information was submitted and a summary of the results. **Summary of Results:** Applicants who submitted the results of WET testing over the past 4.5 years do not need to resubmit these data. Instead, indicate the date you submitted each report and provide a summary of the test results for each report. In the summary, include the outfall number and collection dates of the samples tested, dates of testing, toxicity testing methods used, and test results (e.g., 100% survival in 40% effluent). **Required fields if *Yes* to E.4.a.**

Part F. Industrial User Information (SIU, RCRA, or CERCLA)

All POTWs receiving discharges from *significant industrial users (SIUs)*, RCRA, Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), or other remedial wastes must complete Part F. *Industrial User Information*.

An *industrial user* means any industrial or commercial entity that discharges wastewater that is not domestic wastewater. Domestic wastewater includes wastewater from connections to houses, hotels, nonindustrial office buildings, institutions, or sanitary waste from industrial facilities. The number of industrial users is the total number of industrial and commercial users that discharge to the POTW.

A *categorical industrial user (CIU)* is subject to categorical pretreatment standards under 40 CFR 403.6 and 40 CFR Chapter I, Subchapter N, which are technology-based standards developed by EPA to set industry-specific effluent limits. A list of industrial categories subject to categorical pretreatment standards is included in Appendix B.

An *SIU* is defined in 40 CFR 403.3(v) as an industrial user that:

- Is subject to Categorical Pretreatment Standards under 40 CFR 403.6 and 40 CFR Chapter I, Subchapter N; and
- Any other industrial user that: discharges an average of 25,000 gallons per day or more of process wastewater to the treatment works (excluding sanitary, non-contact cooling and boiler blowdown wastewater); contributes a process waste stream that makes up 5 percent or more of the average dry weather hydraulic or organic capacity of the treatment works; or is designated as such by the Control Authority as defined in 40 CFR 403.12(a) on the basis that the industrial user has a reasonable potential for adversely affecting the treatment works operation or for violating any pretreatment standard or requirement (in accordance with 40 CFR 403.8(f)(6)).

For this application, provide information on noncategorical SIUs and CIUs separately.

F.1. Pretreatment Program

Does the POTW have, or is it subject to, an approved pretreatment program? Indicate whether the POTW has an approved pretreatment program. An *approved pretreatment program* is administered by a POTW that meets the criteria established in 40 CFR 403.8 and 403.9 and has been approved by an EPA regional administrator or the DEQ director. **Required field for Industrial User Information.**

If this POTW has or is required to develop an approved pretreatment program, also complete Parts D. *Expanded Effluent Testing Data* and E. *WET Testing*.

F.2. Number of SIUs and CIUs

Provide the number of each of the following types of industrial users that discharge to the POTW. **Required fields if Yes to F.1.**

F.3. Significant Industrial User Information

Provide the following information for each SIU and CIU: All POTWs that receive discharges from SIUs/CIUs must complete F.3. *Significant User Industrial User Information* through F.8. *Problems at the POTW Attributed to Waste Discharged by the SIU/CIU*. If the POTW receives wastewater from more than one SIU/CIU, complete these sections *once for each SIU and CIU*.

Provide the name and mailing address of each SIU and CIU. **Required fields based for F.3.**

F.4. Industrial Processes

Describe all of the industrial processes that affect or contribute to the SIU/CIU discharge. Describe the actual processes (rather than simply listing them) at the SIU/CIU that affect or contribute to the SIU/CIU discharge. For example, in a metal finishing operation, describe how the product is cleaned before finishing, what type of plating baths are in operation (e.g., nickel or chromium), how paint is applied, and how the product is polished. **Required field for F.4.**

F.5. Principal Products and Raw Materials

Describe all the principal products that affect or contribute to the SIU/CIU discharge. List principal products that the SIU/CIU generates. **Required field for F.4.**

Describe all the raw materials that affect or contribute to the SIU/CIU discharge. List the raw materials used to manufacture the SIU/CIU products. **Required field for F.4.**

F.6. Flow Rate

Process wastewater flow: Indicate the average daily volume of process wastewater that the CIU/SIU discharges into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent: *Process wastewater* means any water that, during manufacturing or processing, comes into direct contact with or results from the production or use of any raw material, intermediate product, finished product, byproduct, or waste product.

Nonprocess wastewater flow: Indicate the average daily volume of nonprocess wastewater that the CIU/SIU discharges into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent: *Nonprocess wastewater* means sanitary wastewater, noncontact cooling water, water from laundering, and noncontact storm water.

Required to complete process or nonprocess fields.

F.7. Pretreatment Standards

Indicate whether the SIU is subject to the following:

a. Local Limits: *Local limits* are enforceable local requirements developed by POTWs to address federal standards and state and local regulations. Required field for F.7.

b. Categorical pretreatment standards: *Categorical pretreatment standards* are national technology-based standards developed by EPA to set industry-specific effluent limits. These standards are implemented by 40 CFR 403.6. If the POTW is subject to categorical pretreatment standards, indicate the category and subcategory (if a subcategory exists). Required fields for F.7.

F.8. Problems at the POTW Attributed to Waste Discharged by the SIU/CIU

a. Has the SIU/SIU caused or contributed to any problems (e.g., upsets or interference) at the POTW in the past 3 years? Required fields for F.8.

If Yes, describe the episode: If Yes, provide information about any problems the POTW has experienced that are attributable to discharges from the SIU/CIUs. Problems may include upsets or interference at the POTW, corrosion in the collection system, or other similar events in the past 3 years. Required fields if Yes for F.8.a.

RCRA Hazardous Waste Received by Truck, Rail, or Dedicated Pipeline

As defined in Section 1004(5) of RCRA, *hazardous waste* means:

A solid waste, or combination of solid wastes, which because of its quantity, concentration, or physical, chemical or infectious characteristics may:

- Cause or significantly contribute to an increase in mortality or an increase in serious irreversible, or incapacitating reversible, illness; or
- Pose a substantial present or potential hazard to human health or the environment when improperly treated, stored, transported, or disposed of, or otherwise managed.

Solid wastes considered hazardous are listed under 40 CFR 261. POTWs that accept hazardous wastes by truck, rail, or dedicated pipeline (a pipeline carrying hazardous waste directly to a POTW without prior mixing with domestic sewage) within the property boundary of the POTW are considered hazardous waste treatment, storage, and disposal facilities (TSDFs) and are subject to regulation under RCRA. Under RCRA, mixtures of domestic sewage and other wastes that commingle in the POTW collection system before reaching the property boundary, including those wastes that otherwise would be considered hazardous, are excluded from regulation under the domestic sewage exclusion. Hazardous wastes that are delivered directly to the POTW by truck, rail, or dedicated pipeline do not fall within the exclusion. Hazardous wastes received by these routes may only be accepted by POTW if the POTW complies with applicable RCRA requirements for TSDFs.

Applicants completing F.9 through F.11 should indicate all points at which RCRA hazardous waste enters the POTW by truck, rail, or dedicated pipe in the map provided in B.2 of the application, if applicable.

F.9. RCRA Waste

Does the POTW receive or has it in the past 3 years received RCRA hazardous waste by truck, rail, or dedicated pipe? Indicate whether the POTW currently receives or has received RCRA waste by truck, rail, or dedicated pipe in the past 3 years. **Required field for Industrial User Information.**

F.10. and F.11. Waste Transport Type and Description

Provide waste transport type, EPA hazardous waste number, and annual amount (volume or mass and specify units): Indicate the method by which RCRA waste is received at the POTW and provide the EPA hazardous waste numbers, which are located in 40 CFR 261, Subparts C and D, and the amount (in volume or mass) received. **Required fields if Yes for F.9.**

Use the *Add More EPA Hazardous Waste* button if more than one waste is reported.

CERCLA, RCRA Remediation/Corrective Action, and Other Remedial Waste Activity:

Substances that are regulated under CERCLA are described and listed in 40 CFR 302. F.12. *Remediation Waste* through F.15. *Waste Treatment* apply to the type, origin, and treatment of CERCLA wastes currently (or expected to be) discharged to the POTW.

F.12. Remediation Waste

Does the POTW currently or has it been notified that it will receive waste from remedial activities? If *Yes*, indicate whether this POTW currently receives waste from a CERCLA (Superfund) site or plans to accept waste from a CERCLA, RCRA, or another remedial waste site in the next 5 years. If it does, provide the information requested in F.13 through F.15 *once for each site*. **Required field for *Industrial User Information*.**

F.13., 14., and 15. Waste Origin, Pollutants, and Waste Treatment

Waste Origin: Describe the site and type of facility at which the CERCLA, RCRA, or other remedial waste originates or is expected to originate in the next 5 years. **Pollutants:** List the hazardous constituents that are received or are expected to be received. Include data on volume and concentration, if known.

Name of Site and Type of facility: Information must include the POTW name and EPA identification number, if one exists, and a description of the type of facility.

Volume of Overall Hazardous Waste: Provide the volume of waste in gallons per day.

List each hazardous constituent received or expected, and identify the volume and concentration, if known: Provide a list of the pollutants that are or will be discharged by the CERCLA site, the concentration, and the measured units of such pollutants.

Is waste treated before entering the POTW?

If *Yes*, describe the treatment (removal efficiency): Provide information concerning the treatment technology used (if any) by the CERCLA site to treat the waste before discharge to the POTW, and any data concerning removal efficiency.

Discharge: Information on the frequency of the discharge (continuous or intermittent).

Description of Intermittent Schedule: If intermittent, describe the discharge schedule.

Use the *Add Additional Site* button if more than one site is being reported.

Required fields if *Yes* for F.12.

Part G. Combined Sewer Systems

A combined sewer system collects a mixture of both sanitary wastewater and storm water runoff.

G.1. System Map

Upload a system map or use the online map tool to create a map that includes the following features:

a. All CSO discharge points.

b. Sensitive use areas potentially affected by CSOs (e.g., beaches, drinking water supplies, shellfish beds, sensitive aquatic ecosystems, and outstanding natural resource waters).

c. Waters that support threatened and endangered species potentially affected by CSOs.

Indicate on a system map all *combined sewer overflow (CSO)* discharge points. For each point, indicate any sensitive use areas and any waters supporting threatened or endangered species that are potentially affected by CSOs. Sensitive use areas include beaches, drinking water supplies, shellfish beds, sensitive aquatic ecosystems, and outstanding natural resource waters.

If possible, all documents should be approximately letter size with margins suitable for filing and binding. Use as few documents as necessary to clearly show what is involved. All discharge points should be identified by outfall number. Label each document with the applicant's name, NPDES/IPDES permit number, location (city, county, or town), date of drawing, and page number of each diagram as "page 3 of 3." **Required field for *Combined Sewer Systems*.**

G.2. System Diagram

Upload a system diagram or use the online map tool to create a system diagram with the following features:

a. Locations of major sewer trunk lines, both combined and separate sanitary

b. Locations of points where separate sanitary sewers feed into the combined sewer system

c. Locations of in-line and off-line storage structures

d. Locations of flow-regulating devices

e. Locations of pump stations

Diagram the location of combined and separate sanitary major sewer trunk lines and indicate any connections where separate sanitary sewers feed into the combined sewer system. Clearly indicate the location of all in-line and off-line storage structures, flow regulating devices, and pump stations.

If possible, all documents should be approximately letter size with margins suitable for filing and binding. Use as few documents as necessary to clearly show what is involved. All discharge points should be identified by outfall number. Each sheet should be labeled with the applicant's name, NPDES/IPDES permit number, location (city, county, or town), date of drawing, and page number of each diagram as "page 3 of 3." **Required field for *Combined Sewer Systems*.**

G.3. CSO Description of Outfall

CSO Outfalls. Complete G.3 through G.6 *once for each CSO discharge point.* Use the *Add Additional Outfall* button for additional outfalls, as necessary.

Number: Provide the outfall number. **Required field for *Combined Sewer Systems*.**

Title: Provide the outfall name.

Location (Zip Code, City, (if applicable), County, State): Location, including zip code, city or town, county, and state. **Required field for *Combined Sewer Systems*.**

Latitude (N) and Longitude (W): Identify the latitude and longitude to the third decimal place in decimal degrees. **Required field for *Combined Sewer Systems*.**

Distance from shore (if applicable): For subsurface discharges (e.g., discharges to lakes), provide the distance (feet) of the discharge point from the shore. Provide this distance (feet) at the full pool for lakes and reservoirs, and base flow for flowing water bodies.

Distance below surface (if applicable): For subsurface discharges (e.g., discharges to lakes), provide the depth (feet) of the discharge point below the surface of the discharge point. Provide this distance at the lowest point .

Which of the following were monitored during the last year for this CSO? (Check all that apply) Indicate whether rainfall, CSO flow volume, CSO pollutant concentrations, CSO frequency, or receiving water quality were monitored during the past 12 months. **Required field for *Combined Sewer Systems*.**

How many storm events were monitored during the last year? Provide the number of storm events monitored during the past 12 months. **Required field for *Combined Sewer Systems*.**

G.4. CSO Events

a. Provide the number of CSO events in the last year: Provide the number of CSO events that have occurred in the past 12 months. Indicate whether this is an actual or estimated number. **Required field for *Combined Sewer Systems*.**

b. Provide the average duration per CSO event: Provide the average duration (hours) per CSO event. Indicate whether this is an actual or estimated value. **Required field if *Yes* to G.4.**

c. Provide the average volume per CSO event: Provide the average volume (million gallons) of discharge per CSO incidents over the past 12 months. Indicate whether this is an actual or estimated number. **Required field if *Yes* to G.4.**

d. Provide the minimum rainfall that caused a CSO event in the last year: Provide the minimum amount of rainfall that caused a CSO incident in the past 12 months. **Required field if *Yes* to G.4.**

G.5. Description of Receiving Waters

I fully understand the implications of IDAPA 58.01.25.100.01 and accept responsibility for ensuring that all other necessary approvals, authorizations, or permits have been obtained. Check the box to indicate if you have read and understand this requirement for completing an IPDES application. **Required field for *Combined Sewer Systems*.**

Rights (IDAPA 58.01.25.100.01). The issuance of, or coverage under, an IPDES permit does not convey any property rights or any exclusive privilege nor does it authorize any injury to persons or property or

invasion of other private rights, or any infringement of state or local law or regulations. The issuance of, or coverage under, an IPDES permit does not constitute authorization of the permitted activities by any other state or federal agency or private person or entity, and does not excuse the permit holder from the obligation to obtain any other necessary approvals, authorizations, or permits.

a. **Name of receiving water body:** List the name of the immediate receiving surface water starting at the CSO discharge point and moving downstream. If the immediate receiving surface water is a man-made water, also identify the natural water body to which the discharge will ultimately flow (e.g., Control Ditch A, then into Stream B). **Required field for *Combined Sewer Systems*.**

b. **Name of subbasin (if known):** Provide the name of the subbasin in which the receiving water is located. If known, also provide the 8-digit hydrologic cataloging unit code assigned by USGS.

G.6. CSO Operations

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, fish kills, fish advisories, other recreational loss, or violation of any applicable state water quality standard.): **Required field for *Combined Sewer Systems*.**

Part H. Requests

1. **Do you intend to request or renew one or more of the variances or waivers authorized under IDAPA or the Code of Federal Regulations?** Identify if you intend to request a variance or waiver and which variance or waiver you intend to request. If you identify any of the variance or waiver options, DEQ will discuss the information and timeline requirements with you. **Required field.**

Additionally, provide any variance or waiver request materials with Part I. *Other Information*.

2. **Do you intend to request a mixing zone?** Identify if you intend to request a mixing zone. If *Yes*, DEQ will discuss the information and timeline requirements with you. **Required field.**

Part I. Other Information

Use the space below to expand upon any of the previous questions or to alert the reviewer of any other optional information you feel should be considered in establishing permit limits for the POTW.

Appendix A. Guidance for Completing the Effluent Testing Information—All POTW

All applicants must provide data for each of the pollutants in A.12. *Effluent Testing Information*. Some applicants must also provide data for the pollutants in B.6. *Effluent Testing Data* and Part D. *Expanded Effluent Testing Data*. All applicants submitting effluent testing data must base these data on a minimum of three pollutant scans. All samples analyzed must represent the discharge from the sampled outfall.

If the existing data fulfills the requirements described below, use that data in lieu of conducting additional sampling. If you measure more than the required number of daily values for a pollutant and those values represent the waste stream, include them in the data reported. Use the *Add Additional Pollutant* button or *Other Category* functions on the application to provide any existing sampling data that the POTW may have for pollutants not listed in the appropriate sections.

Sampling data represent the POTW's discharge and consider seasonal variations. At least two of the samples used to complete the effluent testing information questions must have been taken no fewer than four months and no more than eight months apart. For example, one sample may be taken in April and another in October to meet this requirement. Applicants unable to meet this time requirement due to periodic, discontinuous, or seasonal discharges can obtain alternative guidance on this requirement from DEQ.

Sample collection for the reported analyses should be supervised by a person experienced in performing wastewater sampling. Specific requirements contained in the applicable analytical methods should be followed for sample containers, sample preservation, holding times, and duplicate sample collection. Samples should be taken at a time that represents normal operation. To the extent feasible, all processes that contribute to wastewater should be in operation, and the treatment system should be operating properly with no system upsets. Samples should be collected from the center of the flow channel (where turbulence is at a maximum), at a location specified in the current NPDES permit, or at any location adequate for collecting a representative sample.

A minimum of four grab samples must be collected for pH, temperature, cyanide, total phenols, residual chlorine, oil and grease, fecal coliform, *Escherichia coli* (*E. coli*), and enterococci (applicants need only provide data on *either* fecal coliform or *E. coli* and enterococci). For all other pollutants, 24-hour composite samples must be collected. A minimum of one grab sample, instead of a 24-hour composite, may be taken for effluent from holding ponds or other impoundments that have a retention period greater than 24 hours.

Grab and composite samples are defined as follows:

- Grab sample: An individual sample of at least 100 milliliters collected randomly for a period not exceeding 15 minutes.
- Composite sample: A sample derived from two or more discrete samples collected at equal time intervals or collected proportional to the flow rate over the compositing

period. The composite collection method may vary depending on pollutant characteristics or discharge flow characteristics.

DEQ may allow or establish appropriate site-specific sampling procedures or requirements, including sampling locations, the season in which sampling takes place, the duration between sampling events, and protocols for collecting samples under 40 CFR 136. Contact DEQ for detailed guidance on sampling techniques and for answers to specific questions.

The following instructions explain how to complete each of the columns in the pollutant tables in the effluent testing information sections of the application.

Maximum Daily Discharge. For composite samples, the daily discharge is the average pollutant concentration and total mass found in a composite sample taken over a 24-hour period. For grab samples, the daily discharge is the arithmetic or flow-weighted total mass or average pollutant concentration found in a series of at least four grab samples taken during the operating hours of the POTW during a 24-hour period.

To determine the *maximum* daily discharge values, compare the daily discharge values from each of the sample events. Report the highest total mass and highest concentration level from these samples.

- *Concentration* is the amount of pollutant that is present in a sample with respect to the size of the sample. The daily discharge concentration is the average concentration of the pollutant throughout the 24-hour period.
- *Mass* is calculated as the total mass of the pollutant discharged over the 24-hour period.
- All data must be reported as both concentration and mass (where appropriate). Use the following abbreviations in the columns labeled *Units*.

Concentration

ppm—parts per million
 gpd—gallons per day
 mgd—million gallons per day
 su—standard units
 mg/L—milligrams per liter
 ppb—parts per billion
 µg/L—micrograms per liter

Mass

lb—pounds
 ton—tons (US tons)
 mg—milligrams
 g—grams
 kg—kilograms
 T—tonnes (metric tons)

Average Daily Discharge. The average daily discharge is determined by calculating the arithmetic mean daily pollutant concentration and the arithmetic mean daily total mass of the pollutant from each of the sample events within the 3 years before completing this permit application. Report the concentration, mass, and units used under the *Average Daily Discharge* column, along with the number of samples on which the average is based. Use the unit abbreviations shown above in *Maximum Daily Discharge*.

If data requested in the application have been reported on the POTW’s Discharge Monitoring Reports (DMRs), you may compile the data and report it under the *maximum daily discharge* and *average daily discharge* columns of the form.

Analytical Method. All information reported must be based on data collected through analyses conducted using 40 CFR 136 methods. Applicants should use methods that enable pollutants to be detected at levels adequate to meet water quality-based standards. Where no approved method can detect a pollutant at the water quality-based standards level, the most sensitive approved method should be used. If the applicant believes that an alternative method should be used (e.g., due to matrix interference), the applicant should obtain prior approval from DEQ. If an alternative method is specified in the existing permit, the applicant should use that method unless otherwise directed by DEQ. When no approved analytical method exists, an applicant may use a suitable method but must provide a description of the method. For the application, a *suitable method* is sufficiently sensitive to measure as close to the water quality-based standard as possible.

Indicate the method used for each pollutant in the *Analytical Method* column of the pollutant tables. If a method has not been approved for a pollutant for which you are providing data, use a suitable method to measure the concentration of the pollutant in the discharge, and provide a detailed description of the method used or a reference to the published method. The description must include the sample holding time, preservation techniques, and the quality control measures used. In such cases, indicate the method used and attach to the application a narrative describing the method used.

Reporting Levels. The applicant should provide the *method detection limit*, *minimum level*, or other designated method endpoint reflecting the precision of the analytical method used.

All analytical results must be reported using the actual numeric values determined by the analysis. Even where analytical results are below the detection or quantitation level of the method used, the actual data should be reported, rather than reporting *nondetect* or zero. Because the endpoint of the method has also been reported along with the test results, DEQ can determine if the data are in the *nondetect* or *below quantitation* range.

For any dilutions made and any problems encountered in the analysis, the applicant should attach an explanation and any supporting documentation with the application. For gas chromatography/mass spectrometry (GC/MS), report all results found to be present by spectral confirmation (i.e., quantitation limits or detection limits should not be used as a reporting threshold for GC/MS).

Total Recoverable Metals. Total recoverable metals are measured from unfiltered samples using EPA methods specified in 40 CFR 136.3. A digestion procedure is used to solubilize suspended materials and destroy possible organic metal complexes. The method measures dissolved metals plus those metals recovered from suspended particles by the method digestion.

Appendix B. Industrial Categories Subject to National Categorical Pretreatment Standards

Industrial Categories with Pretreatment Standards in Effect

- Aluminum Forming
- Asbestos Manufacturing
- Battery Manufacturing
- Builder's Paper and Board Mills
- Carbon Black Manufacturing
- Coil Coating
- Copper Forming
- Electrical and Electronic Components
- Electroplating
- Feedlots
- Ferroalloy Manufacturing
- Fertilizer Manufacturing
- Glass Manufacturing
- Grain Mills Manufacturing
- Ink Formulating
- Inorganic Chemicals
- Iron and Steel Manufacturing
- Leather Tanning and Finishing
- Metal Finishing
- Metal Molding and Casting
- Nonferrous Metals Forming and Metal Powders
- Nonferrous Metals Manufacturing
- Organic Chemicals, Plastics, and Synthetic Fibers
- Paint Formulating
- Paving and Roofing
- Pesticide Manufacturing
- Petroleum Refining
- Pharmaceutical Manufacturing
- Porcelain Enameling
- Pulp, Paper, and Paperboard
- Rubber Manufacturing
- Soap and Detergents Manufacturing
- Steam Electric Power Generating
- Sugar Processing
- Timber Products Manufacturing

Industrial Categories with Effluent Guidelines

- Currently Under Development
- Pulp, Paper, and Paperboard
- Pesticide Formulating, Packaging, and Repackaging

- Centralized Waste Treatment
- Pharmaceutical Manufacturing
- Metal Products and Machinery, Phase I
- Industrial Laundries
- Transportation Equipment Cleaning
- Landfills and Incinerators
- Metal Products and Machinery, Phase II