NPDES Permit No. IL0029980
Notice No. TTL:11032301.bah

Public Notice Beginning Date: May 25, 2011
Public Notice Ending Date: June 24, 2011

National Pollutant Discharge Elimination System (NPDES) Permit Program

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

Public Notice/Fact Sheet Issued By:
Illinois EPA
Division of Water Pollution Control
Permit Section
1021 North Grand Avenue East
Post Office Box 19276
Springfield, Illinois 62794-9276
217/782-0610

Name and Address of Discharger:
City of Monticello
210 North Hamilton Street
Monticello, Illinois 61856

Name and Address of Facility:
City of Monticello - STP
Rural Route 2, Railroad Street
Monticello, Illinois 61856
(Piatt County)

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

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

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

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

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

The applicant is engaged in treating domestic wastewater for the City of Monticello.

The length of the Permit is approximately 5 years.

The main discharge number is 001. The seven day once in ten year low flow (7Q10) of the receiving stream, Sangamon River is 1.9 cfs.

The design average flow (DAF) for the facility is 1.0 million gallons per day (MGD) and the design maximum flow (DMF) for the facility is 2.0 MGD. Treatment consists of screening, grit removal excess flow treatment, primary clarification, activated sludge, trickling filtration, final clarification, rapid sand filtration, and disinfection.
This Reissued Permit does not increase the facility’s DAF, DMF, concentration limits, and/or load limits.

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

<table>
<thead>
<tr>
<th>Discharge Number</th>
<th>Receiving Stream</th>
<th>Latitude</th>
<th>Longitude</th>
<th>Stream Classification</th>
<th>Integrity Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>Sangamon River</td>
<td>40° 1’ 50&quot; North</td>
<td>88° 35’ 18&quot; West</td>
<td>General Use</td>
<td>B</td>
</tr>
</tbody>
</table>

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

The stream segment(s), E-18, receiving the discharge from outfall(s) 001 is (are) on the 303(d) list of impaired waters.

The following parameters have been identified as the pollutants causing impairment:

<table>
<thead>
<tr>
<th>Potential Causes -</th>
<th>Uses Impaired</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006 list</td>
<td></td>
</tr>
<tr>
<td>Fecal coliform bacteria</td>
<td>Primary contact use</td>
</tr>
<tr>
<td>Partially approved 2008 list</td>
<td></td>
</tr>
<tr>
<td>Fecal coliform bacteria</td>
<td>Primary contact use</td>
</tr>
</tbody>
</table>
The discharge(s) from the facility is (are) proposed to be monitored and limited at all times as follows:

Discharge Number(s) and Name(s): STP Outfall 001 (to Sangamon River) & 002 (to Unnamed tributary of Sangamon River)**

Load limits computed based on a design average flow (DAF) of 1.0 MGD (design maximum flow (DMF) of 2.0 MGD).

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

<table>
<thead>
<tr>
<th>Parameter</th>
<th>LOAD LIMITS lbs/day</th>
<th>CONCENTRATION LIMITS mg/L</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DAF (DMF)*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Monthly Average</td>
<td>Weekly Average</td>
</tr>
</tbody>
</table>
| CBOD₅              | 83 (167)            | 167 (334)     | 10          | 20          | 35 IAC 304.120  
|                    |                     |               |             |             | 40 CFR 133.102  
|                    |                     |               |             |             | 35 IAC 304.120  
|                    |                     |               |             |             | 40 CFR 133.102  
| Suspended Solids   | 100 (200)           | 200 (400)     | 12          | 24          | 35 IAC 304.120  
|                    |                     |               |             |             | 40 CFR 133.102  
| pH                 |                     |               |             |             | 35 IAC 304.125  
| Fecal Coliform***  | See Below.          |               |             |             | 35 IAC 302.209  
| Chlorine Residual  |                     |               |             |             | 0.05 35 IAC 302.208  
| Ammonia Nitrogen:  | 13 (27)             | 33 (67)       | 56 (112)    | 1.6        | 6.7 35 IAC 355 and 
| March-May/Sept.-Oct.|                     |               |             |             | 35 IAC 302  
|                    | 13 (25)             | 32 (63)       | 56 (110)    | 1.5        | 3.8 6.6 35 IAC 355 and  
|                    |                     |               |             |             | 35 IAC 302  
| Nov.-Feb.          | 33 (67)             | NA            | NA          | 4          | 35 IAC 302.208  
| Copper             | 0.37 (0.73)         |               |             | 0.0438     | 35 IAC 302.208  
| Total Phosphorus   | Monitor and Report  |               |             |             | 35 IAC 309.146  
| Total Nitrogen     | Monitor and Report  |               |             |             | 35 IAC 309.146  
| Nitrate            | Monitor and Report  |               |             |             | 35 IAC 309.146  
|                    |                     | Monthly Avg. not less than | Weekly Avg. not less than | Daily Minimum |
| Dissolved Oxygen    |                     | N/A           | 6.25        | 5           | 35 IAC 302.206  
| March-July         |                     |               |             |             | 35 IAC 302.206  
|                    | 6.0                 | 4.5           | 4.0         |             | 35 IAC 302.206  

*Load Limits are calculated by using the formula: 8.34 x (Design Average and/or Maximum Flow in MGD) x (Applicable Concentration in mg/L).

**Outfall 002 shall be used only when the Sangamon River stage prevents gravity discharge through Discharge Number 001.

***Fecal coliform shall not exceed a geometric mean of 200 cfu/100 ml, nor shall more than 10% of the samples during any 30 day period exceed 400 cfu/100 ml May through October.
This Permit contains an authorization to treat and discharge excess flow as follows:

**Discharge Number(s) and Name(s):**
- STP Outfall A01 (to Sangamon River)
- STP Outfall A02 (to Unnamed tributary of Sangamon River)

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Monthly Average</th>
<th>Regulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOD₅</td>
<td>30</td>
<td>40 CFR 133.102</td>
</tr>
<tr>
<td>Suspended Solids</td>
<td>30</td>
<td>40 CFR 133.102</td>
</tr>
<tr>
<td>Fecal Coliform</td>
<td>Daily Maximum shall not exceed 200 cfu per 100 mL</td>
<td>35 IAC 302.209</td>
</tr>
<tr>
<td>pH</td>
<td>Shall be in the range of 6 to 9 Standard Units</td>
<td>35 IAC 304.125</td>
</tr>
<tr>
<td>Chlorine Residual</td>
<td>0.75</td>
<td>35 IAC 304.208</td>
</tr>
</tbody>
</table>

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

1. Reopening of this Permit to include different final effluent limitations.
2. Operation of the facility by or under the supervision of a certified operator.
3. Submission of the operational data in a specified form and at a required frequency at any time during the effective term of this Permit.
4. More frequent monitoring requirement without Public Notice in the event of operational, maintenance or other problems resulting in possible effluent deterioration.
5. Prohibition against causing or contributing to violations of water quality standards.
6. Effluent sampling point location.
7. Controlling the sources of infiltration and inflow into the sewer system.
8. Seasonal fecal coliform limits.
9. Monitoring for arsenic, barium, cadmium, hexavalent chromium, total chromium, copper, weak acid dissociable cyanide, total cyanide, fluoride, dissolved iron, total iron, lead, manganese, mercury, nickel, oil, phenols, selenium, silver and zinc is required to be conducted semi-annually beginning 3 months from the effective date.
10. The Permittee is required to monitor for mercury twice monthly for five months beginning three months after the effective date of this Permit;
12. Submission of annual fiscal data.
13. The Permittee is required to perform biomonitoring tests in the 18th, 15th, 12th and 9th months prior to the expiration date of the permit, and to submit the results of such tests to the IEPA within one week of receiving the results from the laboratory.
15. Provisions of 40 CFR Section 122.41 (m) & (n).
16. Submission of semi annual reports indicating the quantities of sludge generated and disposed.
17. Recording the monitoring results on Discharge Monitoring Report Forms using one such form for each outfall each month and submitting the forms to IEPA each month.
NPDES Permit No. IL0029980

Illinois Environmental Protection Agency
Division of Water Pollution Control
1021 North Grand Avenue East
Post Office Box 19276
Springfield, Illinois 62794-9276

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
Reissued (NPDES) Permit

Expiry Date: Issue Date:
Effective Date:

Name and Address of Permittee: Facility Name and Address:
City of Monticello City of Monticello - STP
210 North Hamilton Street Rural Route 2, Railroad Street
Monticello, Illinois 61856 Monticello, Illinois 61856
(Piatt County)

Receiving Waters: Sangamon River

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

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

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

SAK:TTL:11032301.bah
NPDES Permit No. IL0029980
Effluent Limitations, Monitoring, and Reporting

Discharge Number(s) and Name(s): STP Outfall 001 (to Sangamon River) & STP Outfall 002 (to Unnamed tributary of Sangamon River)**

Load limits computed based on a design average flow (DAF) of 1.0 MGD (design maximum flow (DMF) of 2.0 MGD).
Excess flow facilities (if applicable) shall not be utilized until the main treatment facility is receiving its maximum practical flow.
From the effective date of this Permit until the expiration date, the effluent of the above discharge(s) shall be monitored and limited at all times as follows:

<table>
<thead>
<tr>
<th>Parameter</th>
<th>LOAD LIMITS lbs/day DAF (DMF)*</th>
<th>CONCENTRATION LIMITS mg/L</th>
<th>Sample Frequency</th>
<th>Sample Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flow (MGD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CBOD₅**</td>
<td>83 (167)</td>
<td>167 (334)</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Suspended Solids</td>
<td>100 (200)</td>
<td>200 (400)</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>pH</td>
<td>Shall be in the range of 6 to 9 Standard Units</td>
<td></td>
<td>1 Day/Week</td>
<td>Grab</td>
</tr>
<tr>
<td>Fecal Coliform***†</td>
<td>See Below.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chlorine Residual***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ammonia Nitrogen: As (N)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>March-May/Sept.-Oct.</td>
<td>13 (27)</td>
<td>33 (67)</td>
<td>56 (112)</td>
<td>1.6</td>
</tr>
<tr>
<td>June-August</td>
<td>13 (25)</td>
<td>32 (63)</td>
<td>56 (110)</td>
<td>1.5</td>
</tr>
<tr>
<td>Nov.-Feb.</td>
<td>33 (67)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copper</td>
<td>0.37 (0.73)</td>
<td></td>
<td>0.0438</td>
<td></td>
</tr>
<tr>
<td>Total Phosphorus</td>
<td>Monitor and Report</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Nitrogen</td>
<td>Monitor and Report</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nitrate</td>
<td>Monitor and Report</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dissolved Oxygen</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>March-July</td>
<td>N/A</td>
<td>6.3</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>August-February</td>
<td>6.0</td>
<td>4.5</td>
<td>4.0</td>
<td></td>
</tr>
</tbody>
</table>

*Load limits based on design maximum flow shall apply only when flow exceeds design average flow.
**Carbonaceous BOD₅ (CBOD₅) testing shall be in accordance with 40 CFR 136.
***See Special Condition 8.
****Outfall 002 shall be used only when the Sangamon River stage prevents gravity discharge through Discharge Number 001.
† Fecal coliform shall not exceed a geometric mean of 200 cfu/100 ml, nor shall more than 10% of the samples during any 30 day period exceed 400 cfu/100 ml May through October.
Flow shall be reported on the Discharge Monitoring Report (DMR) as monthly average and daily maximum.
Fecal Coliform shall be reported on the DMR as a daily maximum value.
pH shall be reported on the DMR as minimum and maximum value.
Chlorine Residual shall be reported on DMR as daily maximum value.
Dissolved oxygen shall be reported on the DMR as a minimum value.
Discharge Number(s) and Name(s): STP Outfalls A01 and A02

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

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Concentration Limits (mg/L)</th>
<th>Sample Frequency</th>
<th>Sample Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Flow (MG)</td>
<td>Monthly Average</td>
<td>Daily When Discharging</td>
<td>Continuous</td>
</tr>
<tr>
<td>BOD₅</td>
<td>30</td>
<td>Daily When Discharging</td>
<td>Grab</td>
</tr>
<tr>
<td>Suspended Solids</td>
<td>30</td>
<td>Daily When Discharging</td>
<td>Grab</td>
</tr>
<tr>
<td>Fecal Coliform</td>
<td>Daily Maximum shall not exceed 200 cfu per 100 mL</td>
<td>Daily When Discharging</td>
<td>Grab</td>
</tr>
<tr>
<td>pH</td>
<td>Shall be in the range of 6 to 9 Standard Units</td>
<td>Daily When Discharging</td>
<td>Grab</td>
</tr>
<tr>
<td>Chlorine Residual</td>
<td>0.75</td>
<td>Daily When Discharging</td>
<td>Grab</td>
</tr>
</tbody>
</table>

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

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

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

Chlorine Residual shall be reported on the DMR as monthly average.
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Influent Monitoring, and Reporting

The influent to the plant shall be monitored as follows:

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Sample Frequency</th>
<th>Sample Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flow (MGD)</td>
<td>Continuous</td>
<td>RIT* or as Hardware Allows</td>
</tr>
<tr>
<td>BOD₅</td>
<td>1 Day/Week</td>
<td>Composite</td>
</tr>
<tr>
<td>Suspended Solids</td>
<td>1 Day/Week</td>
<td>Composite</td>
</tr>
</tbody>
</table>

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

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

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

*RIT = Recording, Indicating, Totalizing.
NPDES Permit No. IL0029980

Special Conditions

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

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

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

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

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

SPECIAL CONDITION 6. Samples taken in compliance with the effluent monitoring requirements shall be taken:

A. For Discharge Numbers 001 & 002 - During dry weather flows (no excess flow discharge), samples shall be taken at a point representative of the flows but prior to entry into the receiving stream. During periods of excess flow discharge, CBOD₅, Suspended Solids, and Ammonia Nitrogen, if Ammonia Nitrogen monitoring and sampling is required on the Effluent Limitations, Monitoring, and Reporting Page of this Permit, shall be monitored at a point representative of the discharge but prior to admixture with the excess flow. If Fecal Coliform limits are different for Discharge Numbers 001/002 and A01/A02, sampling shall occur at a point representative of the discharge and prior to admixture, if hardware allows. Other parameters may be sampled after admixture but prior to entry into the receiving stream.

B. For Discharge Numbers A01 & A02 - Samples for all parameters shall be taken at a point representative of the discharge but prior to entry into the receiving stream. If Fecal Coliform limits are different for Discharge Numbers 001/002 and A01/A02, sampling shall occur at a point representative of the discharge and prior to admixture, if hardware allows. The sampling point for other parameters may be at a point after admixture with the dry weather flows.

SPECIAL CONDITION 7. This Permit may be modified to include requirements for the Permittee on a continuing basis to evaluate and detail its efforts to effectively control sources of infiltration and inflow into the sewer system and to submit reports to the IEPA if necessary.

SPECIAL CONDITION 8. Fecal Coliform limits for Discharge Number 001 & 002 are effective May thru October. Sampling of Fecal Coliform is only required during this time period.

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

SPECIAL CONDITION 9. The Permittee shall conduct semi-annual monitoring of the effluent and report concentrations (in mg/l) of the following listed parameters. Monitoring shall begin three (3) months from the effective date of this permit. The sample shall be a 24-hour effluent composite except as otherwise specifically provided below and the results shall be submitted on Discharge Monitoring Report Forms to IEPA unless otherwise specified by the IEPA. The parameters to be sampled and the minimum reporting limits to be attained are as follows:

<table>
<thead>
<tr>
<th>STORET CODE</th>
<th>PARAMETER</th>
<th>Minimum reporting limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>01002</td>
<td>Arsenic</td>
<td>0.05 mg/L</td>
</tr>
<tr>
<td>01007</td>
<td>Barium</td>
<td>0.5 mg/L</td>
</tr>
<tr>
<td>01027</td>
<td>Cadmium</td>
<td>0.001 mg/L</td>
</tr>
<tr>
<td>01032</td>
<td>Chromium (hexavalent) (grab)</td>
<td>0.01 mg/L</td>
</tr>
<tr>
<td>01034</td>
<td>Chromium (total)</td>
<td>0.05 mg/L</td>
</tr>
<tr>
<td>01042</td>
<td>Copper</td>
<td>0.005 mg/L</td>
</tr>
<tr>
<td>00718</td>
<td>Cyanide (weak acid dissociable) (grab)</td>
<td>5.0 ug/L</td>
</tr>
<tr>
<td>00720</td>
<td>Cyanide (total) (grab not to exceed 24 hours)</td>
<td>5.0 ug/L</td>
</tr>
<tr>
<td>00951</td>
<td>Fluoride</td>
<td>0.1 mg/L</td>
</tr>
<tr>
<td>01045</td>
<td>Iron (total)</td>
<td>0.5 mg/L</td>
</tr>
<tr>
<td>01046</td>
<td>Iron (Dissolved)</td>
<td>0.5 mg/L</td>
</tr>
<tr>
<td>01051</td>
<td>Lead</td>
<td>0.05 mg/L</td>
</tr>
<tr>
<td>01055</td>
<td>Manganese</td>
<td>0.5 mg/L</td>
</tr>
<tr>
<td>71900</td>
<td>Mercury (grab)**</td>
<td>1.0 ng/L*</td>
</tr>
<tr>
<td>01067</td>
<td>Nickel</td>
<td>0.005 mg/L</td>
</tr>
<tr>
<td>00556</td>
<td>Oil (hexane soluble or equivalent) (Grab Sample only)</td>
<td>5.0 mg/L</td>
</tr>
</tbody>
</table>
NPDES Permit No. IL0029980

Special Conditions

32730 Phenols (grab) 0.005 mg/L
01147 Selenium 0.005 mg/L
01077 Silver (total) 0.003 mg/L
01092 Zinc 0.025 mg/L

Unless otherwise indicated, concentrations refer to the total amount of the constituent present in all phases, whether solid, suspended or dissolved, elemental or combined, including all oxidation states.

*1.0 ng/L = 1 part per trillion.
**Utilize USEPA Method 1631E and the digestion procedure described in Section 11.1.1.2 of 1631E.

SPECIAL CONDITION 10. The Permittee shall monitor the effluent for the following parameters twice a month for a period of five (5) consecutive months, beginning three (3) months from the effective date of this Permit. This Permit may be modified with public notice to establish effluent limitations if appropriate, based on information obtained through sampling. The sample shall be a 24-hour effluent composite except as otherwise specifically provided below and the results shall be submitted on the DMR’s to IEPA. The parameters to be sampled and the minimum reporting limits to be attained are as follows:

STORET CODE PARAMETER Minimum reporting limit
71900 Mercury (grab)** 1.0 ng/L*

Unless otherwise indicated, concentrations refer to the total amount of the constituent present in all phases, whether solid, suspended or dissolved, elemental or combined, including all oxidation states.

*1.0 ng/L = 1 part per trillion.
**Utilize USEPA Method 1631E and the digestion procedure described in Section 11.1.1.2 of 1631E.

SPECIAL CONDITION 11. The Permittee may collect data in support of developing a site-specific metals translator for copper. Total and dissolved metals for a minimum of twelve weekly samples need to be collected from the effluent and at a downstream location indicative of complete mixing between the effluent and the receiving water to determine a metal translator for these parameters. The IEPA will review submitted sample data and may reopen and modify this Permit to eliminate or include revised effluent limitations for these parameters based on the metal translator determined from the collected data.

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

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

SPECIAL CONDITION 13. The Permittee shall conduct biomonitoring of the effluent from Discharge Number(s) 001 or 002.

Biomonitoring

1. Acute Toxicity - Standard definitive acute toxicity tests shall be run on at least two trophic levels of aquatic species (fish, invertebrate) representative of the aquatic community of the receiving stream. Testing must be consistent with Methods for Measuring the Acute Toxicity of Effluents and Receiving Waters to Freshwater and Marine Organisms (Fifth Ed.), EPA/821-R-02-012. Unless substitute tests are pre-approved; the following tests are required:
   a. Fish - 96 hour static LC₅₀ Bioassay using fathead minnows (Pimephales promelas).
   b. Invertebrate 48-hour static LC₅₀ Bioassay using Ceriodaphnia.

2. Testing Frequency - The above tests shall be conducted using 24-hour composite samples unless otherwise authorized by the IEPA. Samples must be collected in the 18th, 15th, 12th, and 9th month prior to the expiration date of this Permit.

3. Reporting - Results shall be reported according to EPA/821-R-02-012, Section 12, Report Preparation, and shall be submitted to IEPA, Bureau of Water, Compliance Assurance Section within one week of receipt from the laboratory. Reports are due to the IEPA no later than the 16th, 13th, 10th, and 7th month prior to the expiration date of this Permit.

4. Toxicity - Should a bioassay result in toxicity to >20% of organisms test in the 100% effluent treatment, the IEPA may require, upon notification, six (6) additional rounds of monthly testing on the affected organism(s) to be initiated within 30 days of the toxic bioassay. Results shall be submitted to IEPA within (1) week of becoming available to the Permittee. Should any of the additional bioassays result in toxicity to ≥50% of organisms tested in the 100% effluent treatments, the Permittee may wish to
contact the IEPA to request the discontinuance of further sampling at which time the IEPA may require the Permittee to begin the toxicity reduction evaluation and identification as outlined below.

5. Toxicity Reduction Evaluation - Should the results of the biomonitoring program identify toxicity, the IEPA may require that the Permittee prepare a plan for toxicity reduction evaluation and identification. This plan shall be developed in accordance with Toxicity Reduction Evaluation Guidance for Municipal Wastewater Treatment Plants, EPA/833B-99/002, and shall include an evaluation to determine which chemicals have a potential for being discharged in the plant wastewater, a monitoring program to determine their presence or absence and to identify other compounds which are not being removed by treatment, and other measures as appropriate. The Permittee shall submit to the IEPA its plan for toxicity reduction evaluation within ninety (90) days following notification by the IEPA. The Permittee shall implement the plan within ninety (90) days or other such date as contained in a notification letter received from the IEPA.

The IEPA may modify this Permit during its term to incorporate additional requirements or limitations based on the results of the biomonitoring. In addition, after review of the monitoring results, the IEPA may modify this Permit to include numerical limitations for specific toxic pollutants. Modifications under this condition shall follow public notice and opportunity for hearing.

**SPECIAL CONDITION 14.** The Permittee shall work towards the goals of achieving no discharges from sanitary sewer overflows or basement backups and ensuring that overflows or backups, when they do occur do not cause or contribute to violations of applicable standards or cause impairment in any adjacent receiving water. In order to accomplish these goals, the Permittee shall develop and submit to the IEPA a Capacity, Management, Operations, and Maintenance (CMOM) plan within twelve (12) months of the effective date of this Permit. The Permittee may be required to construct additional sewage transport and/or treatment facilities in future permits or other enforceable documents.

The CMOM plan shall include the following elements:

**A.** Measures and Activities:

1. A complete map of the collection system;
2. Schedules, checklists, and mechanisms to ensure that preventative maintenance is performed on equipment;
3. An assessment of the capacity of the collection and treatment system at critical junctions and immediately upstream of locations where overflows and backups occur or are likely to occur; and
4. Identification and prioritization of structural deficiencies in the system.

**B.** Design and Performance Provisions:

1. Monitor the effectiveness of CMOM;
2. Upgrade the elements of the CMOM plan as necessary; and,
3. Maintain a summary of CMOM activities.

**C.** Overflow Response Plan:

1. Know where overflows and backups occur; and,
2. Respond to each overflow or backup to determine additional actions such as clean up.

**D.** System Evaluation Plan.

**E.** Reporting and Monitoring Requirements.

**SPECIAL CONDITION 15.** The provisions of 40 CFR Section 122.41(m) & (n) are applicable and are hereby incorporated by reference.

**SPECIAL CONDITION 16.** For the duration of this Permit, the Permittee shall determine the quantity of sludge produced by the treatment facility in dry tons or gallons with average percent total solids analysis. The Permittee shall maintain adequate records of the quantities of sludge produced and have said records available for IEPA inspection. The Permittee shall submit to the IEPA, at a minimum, a semi-annual summary report of the quantities of sludge generated and disposed of, in units of dry tons or gallons (average total percent solids) by different disposal methods including but not limited to application on farmland, application on reclamation land, landfilling, public distribution, dedicated land disposal, sod farms, storage lagoons or any other specified disposal method. Said reports shall be submitted to the IEPA by January 31 and July 31 of each year reporting the preceding January thru June and July thru December interval of sludge disposal operations.

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

Sludge monitoring must be conducted according to test procedures approved under 40 CFR 136 unless otherwise specified in 40 CFR 503, unless other test procedures have been specified in this Permit.
Planned Changes. The Permittee shall give notice to the IEPA on the semi-annual report of any changes in sludge use and disposal.

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

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

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

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

SPECIAL CONDITION 17. The Permittee shall record monitoring results on Discharge Monitoring Report (DMR) Forms using one such form for each outfall each month.

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

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

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

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

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