

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
MISSOURI CLEAN WATER COMMISSION



CONSTRUCTION PERMIT

The Missouri Department of Natural Resources hereby issues a permit to:

Douglas S. Bjornstad, P.E.
District Manager / Engineer
Jefferson County Public Sewer District
P.O. Box 632, 4629 Yeager Rd
Hillsboro, MO 63050

for the construction of (described facilities):

See attached.

Permit Conditions:

See attached.

Construction of such proposed facilities shall be in accordance with the provisions of the Missouri Clean Water Law, Chapter 644, RSMo, and regulation promulgated thereunder, or this permit may be revoked by the Department of Natural Resources (Department).

As the Department does not examine structural features of design or the efficiency of mechanical equipment, the issuance of this permit does not include approval of these features.

A representative of the Department may inspect the work covered by this permit during construction. Issuance of a permit to operate by the Department will be contingent on the work substantially adhering to the approved plans and specifications.

This permit applies only to the construction of water pollution control components; it does not apply to other environmentally regulated areas.

July 19, 2022
Effective Date

July 18, 2024
Expiration Date

Chris Wieberg, Director, Water Protection Program

CONSTRUCTION PERMIT

I. CONSTRUCTION DESCRIPTION

This project for disinfection improvements will install a chlorine contact tank and dechlorination process to the existing WWTP. It will also remove a septic tank structure and connect a waste activated sludge line and aeration system for the sludge holding tank.

This project will also include general site work appropriate to the scope and purpose of the project and all necessary appurtenances to make a complete and usable wastewater treatment facility.

II. COST ANALYSIS FOR COMPLIANCE

Pursuant to Section 644.145, RSMo, when issuing permits under this chapter that incorporate a new requirement for discharges from publicly owned combined or separate sanitary or storm sewer systems or publicly owned treatment works, or when enforcing provisions of this chapter or the Federal Water Pollution Control Act, 33 U.S.C. 1251 et seq., pertaining to any portion of a publicly owned combined or separate sanitary or storm sewer system or [publicly owned] treatment works, the Department of Natural Resources shall make a “finding of affordability” on the costs to be incurred and the impact of any rate changes on ratepayers upon which to base such permits and decisions, to the extent allowable under this chapter and the Federal Water Pollution Control Act. This process is completed through a cost analysis for compliance. Permits that do not include new requirements may be deemed affordable.

The Department is not required to determine Cost Analysis for Compliance because the permit contains no new conditions or requirements that convey a new cost to the facility.

III. CONSTRUCTION PERMIT CONDITIONS

The permittee is authorized to construct subject to the following conditions:

1. This construction permit does not authorize discharge.
2. All construction shall be consistent with plans and specifications signed and sealed by District Manager Douglas S. Bjornstad, P.E., and as described in this permit.
3. The Department must be contacted in writing prior to making any changes to the plans and specifications that would directly or indirectly have an impact on the capacity, flow, system layout, or reliability of the proposed wastewater treatment facilities or any design parameter that is addressed by 10 CSR 20-8, in accordance with 10 CSR 20-8.110(11).

4. State and federal law does not permit bypassing of raw wastewater, therefore steps must be taken to ensure that raw wastewater does not discharge during construction. If a sanitary sewer overflow or bypass occurs, report the appropriate information to the Department's St. Louis Regional Office per 10 CSR 20-7.015(9)(G).
5. The wastewater treatment facility shall be located above the twenty-five (25)-year flood level.
6. The wastewater facility structures, electrical equipment, and mechanical equipment shall be protected from physical damage by not less than the one hundred- (100-) year flood elevation per 10 CSR 20-8.140(2)(B). The minimum distance between wastewater treatment facilities and all potable water sources shall be at least three hundred feet (300') per 10 CSR 20-8.140(2)(C)1.
7. In addition to the requirements for a construction permit, 10 CSR 20-6.200 requires land disturbance activities of 1 acre or more to obtain a Missouri state operating permit to discharge stormwater. The permit requires best management practices sufficient to control runoff and sedimentation to protect waters of the state. Land disturbance permits will only be obtained by means of the Department's ePermitting system available online at <https://dnr.mo.gov/data-e-services/missouri-gateway-environmental-management-mogem>. See <https://dnr.mo.gov/data-e-services/water/electronic-permitting-epermitting> for more information.
8. A United States Army Corps of Engineers (USACE) Clean Water Act Section 404 Department of the Army permit and a Section 401 Water Quality Certification issued by the Department may be required for the activities described in this permit. This permit is not valid until these requirements are satisfied or notification is provided that no Section 404 permit is required by the USACE. You must contact your local USACE district since they determine what waters are jurisdictional and which permitting requirements may apply. You may call the Department's Water Protection Program, Operating Permits Section at 573-522-4502 for more information. See <https://dnr.mo.gov/water/business-industry-other-entities/permits-certification-engineering-fees/section-401-water-quality> for more information.
9. All construction must adhere to applicable 10 CSR 20-8 (Chapter 8) requirements listed below.
 - Emergency Power. Disinfection and dechlorination processes, when used, shall be provided during all power outages. 10 CSR 20-8.190 (2) (A)
 - Contact period for Chlorine Disinfection. A minimum contact period of fifteen (15) minutes at design peak hourly flow or maximum rate of pumpage shall be provided after thorough mixing. 10 CSR 20-8.190 (3) (A)
 - Alarm System for chlorination and dechlorination systems. The applicant shall conform to 10 CSR 20-8.140(7)(C) and be responsible for specifying what the alarm requirements are necessary to assure consistent disinfection in compliance with the applicable bacteria limits and the disinfection residual limit in the effluent. 10 CSR 20-8.190 (3) (C)

- Solid dechlorination systems shall not be located in the chlorine contact tank. 10 CSR 20-8.190 (4) (B) 1.
- Contact time. A minimum of thirty (30) seconds for mixing and contact time of dechlorination systems shall be provided at the design peak hourly flow or maximum rate of pumpage. 10 CSR 20-8.190 (4) (B) 2.

10. Upon completion of construction:

- A. JCPSD will continue to be the continuing authority for operation and maintenance of these facilities;
- B. Submit an electronic copy of the as built's if the project was not constructed in accordance with previously submitted plans and specifications; and
- C. Submit the enclosed form Statement of Work Completed to the Department in accordance with 10 CSR 20-6.010(5)(N). When the facility applies for their next operating permit renewal, they will be expected to include an updated facility description on their application.

IV. REVIEW SUMMARY

1. CONSTRUCTION PURPOSE

This project is needed for the Sandia Heights WWTF to meet *e. coli* limits. The chlorination/dechlorination process will meet the 1030 CFU/100mL daily maximum limit at a design flow of 50,000 gpd and peak flow of 100,000 gpd, which is much higher than the current actual design flow.

2. FACILITY DESCRIPTION

The JCPSD assumed responsibility for the Sandia Heights Mobile Home Park WWTF in March 2018.

The Sandia Heights WWTF is located at 3718 La Samora Drive, Hillsboro, in Jefferson County, Missouri. The facility has a design average flow of 24,075 gpd and serves a population equivalent of approximately 215 people.

The facility is an aerobic digester with sixteen cells, storage holding tanks, and uses land application for sludge disposal. There is currently no disinfection.

3. COMPLIANCE PARAMETERS

The existing facility cannot meet its *e. coli* daily maximum limit of 1030 CFU/100 mL. The proposed project is required to meet final effluent limits as established in Operating Permit MO-0087301.

4. REVIEW of MAJOR TREATMENT DESIGN CRITERIA

- Tablet Chlorinator – Installation of a tablet Norweco IT-4000 chlorination chamber receiving clarified effluent and prior to the chlorine contact tank. The tablet chlorinator shall have a design flow of 50,000 gpd and a maximum flow of 100,000 gpd. The system will dispense hypochlorite as the wastewater comes into contact with the tablets.
- Chlorine Contact Tank – Installation of a pre-cast concrete tank approximately 6 ft x 6 ft x 6 ft . This tank will allow for a 15-minute contact time during a peak flow of 100,000 gpd.
- Tablet Dechlorinator – Installation of a tablet Norweco IT-4000 dechlorination chamber receiving the chlorinated effluent and prior to Outfall No. 001. shall have a design flow of 50,000 gpd and a maximum flow of 100,000 gpd. The system will dispense sodium sulfite as the wastewater comes into contact with the tablets.

5. OPERATING PERMIT

Operating permit MO-0087301 will expire on December 31, 2021. A renewal application has been submitted.

V. NOTICE OF RIGHT TO APPEAL

If you were adversely affected by this decision, you may be entitled to an appeal before the Administrative Hearing Commission (AHC) pursuant to Section 621.250 RSMo. To appeal, you must file a petition with the AHC within 30 days after the date this decision was mailed or the date it was delivered, whichever date was earlier. If any such petition is sent by registered mail or certified mail, it will be deemed filed on the date it is mailed; if it is sent by any method other than registered mail or certified mail, it will be deemed filed on the date it is received by the AHC. Any appeal should be directed to:

Administrative Hearing Commission
U.S. Post Office Building, Third Floor
131 West High Street, P.O. Box 1557
Jefferson City, MO 65102-1557
Phone: 573-751-2422
Fax: 573-751-5018
Website: <https://ahc.mo.gov>

Bern Johnson, Associate Engineer
Engineering Section
bern.johnson@dnr.mo.gov

Chia-Wei Young, P.E.
Engineering Section
chia-wei.young@dnr.mo.gov



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 WATER PROTECTION PROGRAM
**APPLICATION FOR CONSTRUCTION PERMIT –
 WASTEWATER TREATMENT FACILITY**

FOR DEPARTMENT USE ONLY	
APP NO.	CP NO.
FEE RECEIVED	CHECK NO.
DATE RECEIVED	

APPLICATION OVERVIEW

The Application for Construction Permit – Wastewater Treatment Facility form has been developed in a modular format and consists of Part A and B. **All applicants must complete Part A.** Part B should be completed for applicants who currently land-apply wastewater or propose land application for wastewater treatment. **Please read the accompanying instructions before completing this form. Submittal of an incomplete application may result in the application being returned.**

PART A – BASIC INFORMATION

1.0 APPLICATION INFORMATION (Note – If any of the questions in this section are answered NO, this application may be considered incomplete and returned.)

- 1.1 Is this a Federal/State funded project? YES N/A Funding Agency: _____ Project #: _____
- 1.2 Has the Missouri Department of Natural Resources approved the proposed project's antidegradation review?
 YES Date of Approval: _____ N/A
- 1.3 Has the department approved the proposed project's facility plan*?
 YES Date of Approval: _____ NO (If No, complete No. 1.4.)
- 1.4 [Complete only if answered No on No. 1.3.] Is a copy of the facility plan* for wastewater treatment facilities included with this application?
 YES NO Exempt because _____
- 1.5 Is a copy of the appropriate plans* and specifications* included with this application?
 YES Denote which form is submitted: Hard copy Electronic copy (See instructions.) NO
- 1.6 Is a summary of design* included with this application? YES NO
- 1.7 Has the appropriate operating permit application (A, B, or B2) been submitted to the department?
 YES Date of submittal: _____
 Enclosed is the appropriate operating permit application and fee submittal. Denote which form: A B B2
 N/A: However, In the event the department believes that my operating permit requires revision to permit limitation such as changing equivalent to secondary limits to secondary limits or adding total residual chlorine limits, please share a draft copy prior to public notice? YES NO
- 1.8 Is the facility currently under enforcement with the department or the Environmental Protection Agency? YES NO
- 1.9 Is the appropriate fee or JetPay confirmation included with this application? YES NO
 See Section 7.0

* Must be affixed with a Missouri registered professional engineer's seal, signature and date.

2.0 PROJECT INFORMATION

2.1 NAME OF PROJECT	2.2 ESTIMATED PROJECT CONSTRUCTION COST \$
---------------------	---

2.3 PROJECT DESCRIPTION

2.4 SLUDGE HANDLING, USE AND DISPOSAL DESCRIPTION

2.5 DESIGN INFORMATION

A. Current population: _____; Design population: _____

B. Actual Flow: _____ gpd; Design Average Flow: _____ gpd;
 Actual Peak Daily Flow: _____ gpd; Design Maximum Daily Flow: _____ gpd; Design Wet Weather Event: _____

2.6 ADDITIONAL INFORMATION

A. Is a topographic map attached? YES NO

B. Is a process flow diagram attached? YES NO

3.0 WASTEWATER TREATMENT FACILITY

NAME		TELEPHONE NUMBER WITH AREA CODE	E-MAIL ADDRESS	
ADDRESS (PHYSICAL)	CITY	STATE	ZIP CODE	COUNTY

Wastewater Treatment Facility: Mo- (Outfall Of)

3.1 Legal Description: _____ ¼, _____ ¼, _____ ¼, Sec. _____, T _____, R _____
(Use additional pages if construction of more than one outfall is proposed.)

3.2 UTM Coordinates Easting (X): _____ Northing (Y): _____
For Universal Transverse Mercator (UTM), Zone 15 North referenced to North American Datum 1983 (NAD83)

3.3 Name of receiving streams: _____

4.0 PROJECT OWNER

NAME		TELEPHONE NUMBER WITH AREA CODE	E-MAIL ADDRESS	
ADDRESS	CITY	STATE	ZIP CODE	

5.0 CONTINUING AUTHORITY: A continuing authority is a company, business, entity or person(s) that will be operating the facility and/or ensuring compliance with the permit requirements.

NAME		TELEPHONE NUMBER WITH AREA CODE	E-MAIL ADDRESS	
ADDRESS	CITY	STATE	ZIP CODE	

5.1 A letter from the continuing authority, if different than the owner, is included with this application. YES NO N/A

5.2 COMPLETE THE FOLLOWING IF THE CONTINUING AUTHORITY IS A MISSOURI PUBLIC SERVICE COMMISSION REGULATED ENTITY.

A. Is a copy of the certificate of convenience and necessity included with this application? YES NO

5.3 COMPLETE THE FOLLOWING IF THE CONTINUING AUTHORITY IS A PROPERTY OWNERS ASSOCIATION.

- A. Is a copy of the as-filed restrictions and covenants included with this application? YES NO
- B. Is a copy of the as-filed warranty deed, quitclaim deed or other legal instrument which transfers ownership of the land for the wastewater treatment facility to the association included with this application? YES NO
- C. Is a copy of the as-filed legal instrument (typically the plat) that provides the association with valid easements for all sewers included with this application? YES NO
- D. Is a copy of the Missouri Secretary of State's nonprofit corporation certificate included with this application? YES NO

6.0 ENGINEER

ENGINEER NAME / COMPANY NAME		TELEPHONE NUMBER WITH AREA CODE	E-MAIL ADDRESS	
ADDRESS	CITY	STATE	ZIP CODE	

7.0 APPLICATION FEE

CHECK NUMBER JETPAY CONFIRMATION NUMBER

8.0 PROJECT OWNER: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

PROJECT OWNER SIGNATURE		
PRINTED NAME		DATE
TITLE OR CORPORATE POSITION	TELEPHONE NUMBER WITH AREA CODE	E-MAIL ADDRESS

Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM
P.O. BOX 176
JEFFERSON CITY, MO 65102-0176

END OF PART A.
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHETHER PART B NEEDS TO BE COMPLETE.