

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
MISSOURI CLEAN WATER COMMISSION



CONSTRUCTION PERMIT

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

PARKER PETROLEUM SALES & SERVICE, INC.
Philip Parker, Owner
Celtic Crossing Phase 2
Dublin Drive
Troy, MO 63379

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.

June 29, 2026
Effective Date

June 28, 2028
Expiration Date



Heather Peters, Director, Water Protection Program

CONSTRUCTION PERMIT

I. CONSTRUCTION DESCRIPTION

Installation of a second subsurface drip dispersal wastewater treatment system (drip system) to serve the expansion of a residential rental development. The new drip system will consist of a 500 gpd Jet Inc. BAT attached growth biological reactor at each of seven 3-bedroom rental units. The secondary effluent flows from each Jet Inc. BAT unit to a 5,000-gallon pump tank, where it is pumped to a five-zone drip field with a design flow of 2,520 gpd and a total dispersal area of 17,000 ft² containing 8,500 lf of 0.5-inch drip dispersal tubing. 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.

Upon completion of construction, the Celtic Crossing wastewater treatment facility will consist of two drip systems serving a total of fifteen three-bedroom rental homes, with a total design flow of 5,400 gpd. The drip system distribution fields are located West of Dublin Drive, behind the rental homes. The drip system distribution fields have a combined area of 37,000 ft² and are each dosed at 0.15 gpd per ft².

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 complete a cost analysis for compliance because the facility is not a combined or separate sanitary sewer system for a publicly owned treatment works.

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 Paul Ganey, P.E. with Ganey Engineering LLC 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 Saint Louis Regional Office per 10 CSR 20-7.015(9)(G).
5. The completed project shall be field tested to verify actual pumped volume of each dose. The timer controls shall be set to ensure a dosing rate not to exceed the allowable rate of 0.15 gallons per square foot per day.
6. 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.
7. All construction must adhere to applicable 10 CSR 20-8 (Chapter 8) requirements listed below.
 - Flood protection shall apply to new construction and to existing facilities undergoing major modification. 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. 10 CSR 20-8.140(2)(B)
 - Unless another distance is determined by the Missouri Geological Survey or by the department's Public Drinking Water Branch, the minimum distance between wastewater treatment facilities and all potable water sources shall be at least three hundred feet (300'). 10 CSR 20-8.140(2)(C)1.
 - Facilities shall be readily accessible by authorized personnel from a public right of way at all times. 10 CSR 20-8.140(2)(D)
 - An audiovisual alarm or a more advanced alert system, with a self-contained power supply, capable of monitoring the condition of equipment whose failure could result in a violation of the operating permit, shall be provided for all wastewater treatment facilities. 10 CSR 20-8.140(7)(C)

- Subsurface systems shall—
 - Exclude unstabilized fill and soils that have been highly compacted and/or disturbed, such as old road beds, foundations, or similar things; 10 CSR 20-8.200(8)(A)1.A.
 - Provide adequate surface drainage where slopes are less than two percent (2%); 10 CSR 20-8.200(8)(A)1.B.
 - Provide surface and subsurface water diversion where necessary, such as a curtain or perimeter drain; 10 CSR 20-8.200(8)(A)1.C. and
 - Have a ten foot (10') buffer from the property line. 10 CSR 20-8.200(8)(A)1.D.
- The vertical separation between the bottom of the drip lines and/or the trench and a limiting layer, including but not limited to, bedrock; restrictive horizon; or seasonal high water table, shall be no less than:
 - Twelve inches (12") for systems dispersing secondary or higher quality effluent; 10 CSR 20-8.200(8)(A)2.B.
- Subsurface systems shall be, at a minimum, preceded by preliminary treatment. 10 CSR 20-8.200(8)(B)
- Loading rates shall not exceed the values assigned by the site and soil evaluation. 10 CSR 20-8.200(8)(C)
- The location and size of the drains and buffers must be factored into the total area required for the drip dispersal system. 10 CSR 20-8.200(10)(A)1.
- The drip dispersal lines shall be placed at a minimum depth of six inches (6") below the surface. 10 CSR 20-8.200(10)(B)1.
- Emitters and drip dispersal lines shall be placed at a minimum on a two foot (2') spacing to achieve even distribution of the wastewater and maximum utilization of the soil. 10 CSR 20-8.200(10)(B)2.

Upon completion of construction:

- A. PARKER PETROLEUM SALES & SERVICE, INC. will become the continuing authority for operation and maintenance of these facilities;
- B. Submit an electronic copy of the as built if the project was not constructed in accordance with previously submitted plans and specifications; and
- C. Submit the Statement of Work Completed form to the department in accordance with 10 CSR 20-6.010(5)(N) (<https://dnr.mo.gov/document-search/wastewater-construction-statement-work-completed-mo-780-2155>) and submit a Form B - Application for an Operating Permit for Domestic or Municipal Wastewater ($\leq 100,000$ gallons per day) signed by an authorized representative of the continuing authority and \$300 application fee to the Engineering Section of the Water Protection Program 60 days prior to operation.

IV. REVIEW SUMMARY

1. CONSTRUCTION PURPOSE

Construction of seven three-bedroom residential rental homes requires construction of a new wastewater treatment system to serve the residential development expansion.

2. FACILITY DESCRIPTION

The existing (South) drip system was installed under a county health department permit that was issued in 2021. It serves eight three-bedroom rental homes with a design average flow of 2,880 gpd. The system consists of a 500 gpd Jet Inc. BAT attached growth biological reactor at each home to provide secondary treatment before the wastewater is dispersed in the 20,000 ft² South drip system dispersal field, which is dosed at 0.15 gpd per ft².

The new (North) drip system will serve seven 3-bedroom rental homes with a design average flow of 2,520 gpd. The system consists of a 500 gpd Jet Inc. BAT attached growth biological reactor at each home to provide secondary treatment before the wastewater collects in the 5,000 gallon dosing tank to be dispersed in the 17,000 ft² South drip system dispersal field. The field consists of five zones which are each time dosed 12 times a day at 0.15 gpd per ft².

The Celtic Crossing WWTF is located at Dublin Drive, Troy, in Lincoln County, Missouri. The facility has a total design average flow of 5,400 gpd and serves a hydraulic population equivalent of approximately 54 people.

3. COMPLIANCE PARAMETERS

The proposed wastewater treatment facilities will be a no-discharge treatment and soil dispersal/absorption system. Periodic removal of waste sludge will be necessary. A Missouri State Operating Permit is required to be maintained. Monitoring of the facility will be required along with keeping records of maintenance activities.

4. REVIEW of MAJOR TREATMENT DESIGN CRITERIA

Existing major components that will remain in use include the following:

- South Subsurface Soil Dispersal System
 - Each of the eight existing rental homes is connected to a Jet Inc. BAT attached growth biological reactor rated to treat up to 500 gpd. These reactors provide secondary treatment before the wastewater enters a subsurface soil dispersal system dosing tank.
 - Drip Dispersal System – permitted under the Lincoln County Health Department, the drip dispersal system has a design flow of 2,880 gpd and a dispersal field area of 20,000 ft².

Construction will cover the following items:

- North Subsurface Soil Dispersal System
 - Attached Growth Biological Reactor – Each of the seven new rental homes is connected to a Jet Inc. BAT attached growth biological reactor rated to treat up to 500 gpd. These reactors provide secondary treatment before the wastewater enters a 5,000 gallon subsurface soil dispersal system dosing tank.
 - Soil Evaluation - The soils at this site are rated for 0.15 gpd per ft² for an alternative system. Soil morphology review was conducted during the facility plan/construction permit application review and on site soils were determined to be acceptable for this system. The soil investigation was completed by Evelyn Mann, C Soil Scientist with On-Site Soils, Inc. on February 25, 2025.
 - Soil test pit #3, located closest to the proposed dispersal field, had a surface soil that was described as silt loam with an application rating of 0.15 gallons per square foot per day for an alternative system. The soil profile identified a seasonal high water table at a depth of 7-inches at the site.
 - Drip Dispersal – The facility has selected the GEOFLOW subsurface drip dispersal system. The system will dose 5 zones 12 times a day each for five minutes and 36 seconds each dose, for a maximum daily loading of 0.15 gpd/sq. ft. Each zone is 3,400 ft². The total drip field area is 17,000 ft² and contains 8,500 lf of 0.5-inch inch tubing fitted with emitters every 2 lf. Two combo air/vacuum release valves will be installed per zone. Vortex screen filters will be used above the manifold with 1.25-inch supply lines. The drip distributing valve will be a HT 460-5 indexing valve.
 - Imported Soil - The facility will have to import approximately 600 cubic yards of soils, which must be approved by a soil scientist after placement, and shall be silt loam containing less than 10 % clay as described by the USDA. This meets the requirements of the NETAFIM design recommendations for importing soils.
 - With the use of imported soils, the depth of the soil column is being increased by 11-inches, providing an additional 5-inch depth of unsaturated soil material above the seasonal high water table for final treatment of the secondary level effluent.
 - Interceptor Drain – An interceptor drain diverts surface and subsurface runoff around the treatment field. The soils report indicates a seasonal high water table at a depth of 7 inches in the vicinity of the dispersal field. An interceptor drain installed to a depth of 36 inches around the field's upslope perimeter.

5. OPERATING PERMIT

After completion of construction project submit a statement of work completed, as-built if the project was not constructed in accordance with previously submitted plans and specifications, and ensure that Application Form B, and fee has been submitted. Missouri State Operating Permit, General Permit MO-G823, will be issued after receipt of the above documents.

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>

Katrice Williams, E.I.
Engineering Section
katrice.williams@dnr.mo.gov

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

Site Map





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

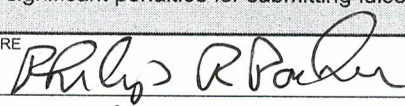
1.0 APPLICATION INFORMATION (Note – If any of the questions in this section are answered NO, this application may be considered incomplete and returned.)

- 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: 10/2025 ☐ 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 Celtic Crossing	2.2 ESTIMATED PROJECT CONSTRUCTION COST \$
2.3 PROJECT DESCRIPTION Construction of 7 single family homes to be served by one onsite waste water treatment system	
2.4 SLUDGE HANDLING, USE AND DISPOSAL DESCRIPTION Sludge treated via aeration tank at each home. Solids to be removed and hauled to a permitted facility as needed.	
2.5 DESIGN INFORMATION A. Current population: <u>0</u> ; Design population: <u>42</u> B. Actual Flow: _____ gpd; Design Average Flow: _____ gpd; Actual Peak Daily Flow: _____ gpd; Design Maximum Daily Flow: <u>2520</u> 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: _____ 1/4, _____ 1/4, _____ 1/4, 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
PARKER PETROLEUM		3144015447		parkerpetro22@gmail.com
ADDRESS		CITY	STATE	ZIP CODE
1400 S Main		Troy	MO	63379
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
Parker Petroleum		3144015447		parkerpetro22@gmail.com
ADDRESS		CITY	STATE	ZIP CODE
1400 S Main		Troy	MO	63379
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
Ganey Engineering LLC		3149730377		ganeyengineering@yahoo.com
ADDRESS		CITY	STATE	ZIP CODE
2310 Tribute Drive		Arnold	MO	63010
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 PHILIP PARKER			DATE 3/5/2026	
TITLE OR CORPORATE POSITION Owner		TELEPHONE NUMBER WITH AREA CODE 314-401-5447		E-MAIL ADDRESS PAPCAR81@GMAIL.COM
Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176 COMA				
END OF PART A.				
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHETHER PART B NEEDS TO BE COMPLETE.				



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM

**FORM B: APPLICATION FOR OPERATING PERMIT FOR
FACILITIES THAT RECEIVE PRIMARILY DOMESTIC WASTE AND
HAVE A DESIGN FLOW LESS THAN OR EQUAL TO 100,000
GALLONS PER DAY**

FOR AGENCY USE ONLY

CHECK NUMBER

DATE RECEIVED

FEE SUBMITTED

JETPAY CONFIRMATION NUMBER

READ THE ACCOMPANYING INSTRUCTIONS (PROVIDED Page 7) BEFORE COMPLETING THIS FORM

For existing permitted facilities, a copy of the current permit may be obtained here.

1. THIS APPLICATION IS FOR:

- ☒ An operating permit for a new or unpermitted facility. Construction Permit # _____
Include completed antidegradation review or request for antidegradation review, (see instructions).
- ☐ A site-specific operating permit renewal. Permit #MO- _____ Expiration Date: _____
- ☐ A site-specific operating permit modification. Permit #MO- _____ Reason: _____
- ☐ A new, site-specific operating permit formerly general permit #MOG _____
- ☐ A general permit renewal. Permit #MO- _____ Expiration Date _____
- ☐ A new general permit formerly a site-specific permit #MO- _____

1.1 Is the appropriate fee included with the application (see instructions for appropriate fee)? ☐ YES ☐ NO

2. FACILITY:

NAME
Celtic Crossing
ADDRESS (PHYSICAL)
Dublin Drive
CITY
Troy
STATE
MO
ZIP CODE
63379
COUNTY
Lincoln
TELEPHONE NUMBER WITH AREA CODE
(314) 401-5447

2.1 Number of outfalls and monitoring sites:
Wastewater outfalls: _____ Stormwater outfalls: _____ Influent monitoring site: _____ Instream monitoring site: _____

2.2 Legal description for outfall(s) – List all: _____ Sec. _____, T _____, R _____
Legal description for influent monitoring – List all: _____ Sec. _____, T _____, R _____
Legal description for instream monitoring – List all: _____ Sec. _____, T _____, R _____

2.3 Outfall location(s): UTM Coordinates Easting (X): _____ Northing (Y): _____
Influent monitoring location(s): UTM Coordinates Easting (X): _____ Northing (Y): _____
Instream monitoring location(s): UTM Coordinates Easting (X): _____ Northing (Y): _____
For Universal Transverse Mercator (UTM), Zone 15 North referenced to North American Datum 1983 (NAD83)

2.4 Name of receiving stream: _____

3. OWNER: Please see instructions on page 7.

NAME
Parker Patroleum
ADDRESS (MAILING)
1400 S Main
CITY
Troy
STATE
MO
ZIP CODE
63379
EMAIL ADDRESS
parkerpetro22@gmail.com
TELEPHONE NUMBER WITH AREA CODE
(314) 401-5447

If the owner is a business entity, complete the section below using the SOS website.

CHARTER NUMBER (AS IT APPEARS ON THE SOS WEBSITE) _____ STATUS (AS IT APPEARS ON THE SOS WEBSITE) _____

3.1 Request review of draft permit prior to public notice? ☐ YES ☒ NO

3.2 Are you a publicly owned treatment works? ☐ YES ☒ NO

If Yes, please attach the Financial Questionnaire.

3.3 Are you a privately owned treatment works? ☒ YES ☐ NO

3.4 Are you a privately owned treatment facility regulated by the Public Service Commission ☐ YES ☒ NO

4. CONTINUING AUTHORITY: To process the application, this section **MUST** be completed. Please see instructions on page 7.

NAME
Parker Patroleum
ADDRESS (MAILING)
1400 S Main
CITY
Troy
STATE
MO
ZIP CODE
63379
EMAIL ADDRESS
parkerpetro22@gmail.com
TELEPHONE NUMBER WITH AREA CODE
(314) 401-5447

If the continuing authority is a business entity, complete the section below using the SOS website.

CHARTER NUMBER (AS IT APPEARS ON THE SOS WEBSITE) _____ STATUS (AS IT APPEARS ON THE SOS WEBSITE) _____

IMPORTANT: If the continuing authority is different than the owner, include a copy of the contract agreement between the two parties and a description of the responsibilities of both parties within the agreement.

5. OPERATOR

NAME	TITLE	CERTIFICATE NUMBER
EMAIL ADDRESS	TELEPHONE NUMBER WITH AREA CODE	

6. FACILITY CONTACT

NAME	TITLE		
Andy Zalmanoff	Construction Supervisor		
EMAIL ADDRESS	TELEPHONE NUMBER WITH AREA CODE		
parkerpetro22@gmail.com	(314) 560-2062		
ADDRESS (MAILING)	CITY	STATE	ZIP CODE
1400 S Main	Troy	MO	63379

7. DESCRIPTION OF FACILITY

7.1 Process Flow Diagram or Schematic: Provide a diagram or a map showing the processes of the treatment plant. Show all of the treatment units, including disinfection (i.e., chlorination and dechlorination), influents, and outfalls. Specify where samples are taken and what structure they are taken from. Indicate any treatment process changes in the routing of wastewater during dry weather and peak wet weather. Include a brief narrative description of the diagram. If any processes have changed since the previous application, include a brief description of the changes. Attach sheets as necessary.

7.2 Attach an aerial photograph or USGS topographic map showing the location of the facility and outfall. Please see the following website:
modnr.maps.arcgis.com/apps/webappviewer/index.html?id=1d81212e0854478ca0dae87c33c8c5ce

8. ADDITIONAL FACILITY INFORMATION

8.1 Number of people presently connected or current population equivalent (P.E.) _____ Design P.E. 42

8.2 Connections to the facility:
Number of units presently connected:
Residential: _____ Commercial: _____ Industrial: _____

8.3 Design flow: 2520 Average flow: _____

8.4 Will discharge be continuous through the year? ☒ Yes ☐ No
Discharge will occur during the following months: _____
How many days of the week will discharge occur? _____

8.5 Is industrial wastewater discharged to the facility? ☐ Yes ☒ No
If Yes, attach a list of the industries that discharge to your facility.

8.6 Does the facility accept or process leachate from landfills? ☐ Yes ☒ No

8.7 Is wastewater land applied? ☐ Yes ☒ No
If Yes, attach Form I.

8.8 Does the facility discharge to a losing stream or sinkhole? ☐ Yes ☒ No

8.9 Has a wasteload allocation study been completed for this facility? ☐ Yes ☒ No

8.10 Does the facility accept non-individual swimming pool wastewater or backwash? Please see part 8.10 of instructions for more information. Examples: Community pools, commercial pools. ☐ Yes ☒ No

9. LABORATORY CONTROL INFORMATION**LABORATORY WORK CONDUCTED BY PLANT PERSONNEL**

Lab work conducted outside of plant. ☐ Yes ☒ No
Push-button or visual methods for simple test such as pH, settleable solids. ☐ Yes ☒ No
Additional procedures such as dissolved oxygen, chemical oxygen demand, biological oxygen demand, titrations, solids, volatile content. ☐ Yes ☒ No
More advanced determinations, such as BOD seeding procedures, fecal coliform/*E. coli*, nutrients (including Ammonia), Oil & Grease, total oils, phenols, etc. ☐ Yes ☒ No
Highly sophisticated instrumentation, such as atomic absorption and gas chromatograph. ☐ Yes ☒ No

10. COLLECTION SYSTEM

10.1 Are there any municipal satellite collection systems connected to this facility? ☐ Yes ☒ No
If Yes, please list all connected to this facility, contact phone number and length of each collection system.

FACILITY NAME	CONTACT PHONE NUMBER	LENGTH OF SYSTEM (FEET OR MILES)

10.2 Length of pipe in the sewer collection system? (If available, include totals from satellite collection systems)
750 Feet or _____ Miles (either unit is appropriate)

10.3 Does significant infiltration occur in the collection system? ☐ Yes ☒ No
If Yes, briefly explain any steps underway or planned to minimize inflow and infiltration:

11. BYPASSING

Does any bypassing occur in the collection system or at the treatment facility? ☐ Yes ☒ No

If yes, explain:

12. SLUDGE HANDLING, USE AND DISPOSAL

12.1 Is the sludge a hazardous waste as defined by 10 CSR 25? ☐ Yes ☒ No

12.2 Sludge production, including sludge received from others: ____ Design dry tons/year ____ Actual dry tons/year

12.3 Capacity of sludge holding structures:

Sludge storage provided: ____ cubic feet; ____ days of storage; ____ average percent solids of sludge.

☐ No sludge storage is provided. ☐ Sludge is stored in lagoon.

12.4 Type of Storage:

☒ Holding tank

☐ Basin

☐ Concrete Pad

☐ Building

☐ Lagoon

☐ Other (Describe) _____

12.5 Sludge Treatment:

☐ Anaerobic Digester

☐ Storage Tank

☐ Lime Stabilization

☐ Lagoon

☒ Aerobic Digester

☐ Air or Heat Drying

☐ Composting

☐ Other (Attach description)

12.6 Sludge Use or Disposal:

☐ Land Application

☒ Contract Hauler

☐ Incineration

☐ Solid Waste Landfill

☐ Surface Disposal (Sludge Disposal Lagoon, Sludge held for more than two years)

☐ Hauled to Another Treatment Facility

☐ Sludge Retained in Wastewater Treatment Lagoon

12.7 Sludge Use or Disposal:

☐ Will haul sludge in this permit cycle ☒ Will not haul sludge in this permit cycle

If facility will haul sludge in this permit cycle, please fill out parts 12.8 - 12.10

12.8 Person responsible for hauling sludge to disposal facility:

NAME

EMAIL ADDRESS

ADDRESS

CITY

STATE

ZIP CODE

CONTACT PERSON

TELEPHONE NUMBER WITH AREA CODE

PERMIT NO.
MO-

12.9 Sludge use or disposal facility:

NAME

EMAIL ADDRESS

ADDRESS

CITY

STATE

ZIP CODE

CONTACT PERSON

TELEPHONE NUMBER WITH AREA CODE

PERMIT NO.
MO-

12.10 Does the sludge or biosolids disposal comply with federal sludge regulations under 40 CFR 503?

☐ Yes ☐ No (Explain)

13. ELECTRONIC DISCHARGE MONITORING REPORT (eDMR) SUBMISSION SYSTEM

Per 40 CFR Part 127, National Pollutant Discharge Elimination System (NPDES) Electronic Reporting Rule, reporting of effluent limits and monitoring shall be submitted by the permittee via an electronic system to ensure a timely, complete, accurate, and nationally-consistent set of data. One of the following options must be checked in order for this application to be considered complete. Visit dnr.mo.gov/env/wpp/edmr.htm to for information on the Department of Natural Resources' (department) eDMR system and how to register.

- ☒ I will register an account online to participate in the department's eDMR system through the Missouri Gateway for Environmental Management (MoGEM) before any reporting is due, in compliance with the Electronic Reporting Rule.
- ☐ I have already registered an account online to participate in the department's eDMR system through MoGEM.
- ☐ I have submitted a written request for a waiver from electronic reporting. See instructions on page 8, for further information regarding waivers.
- ☐ The permit I am applying for does not require the submission of discharge monitoring reports.

14. JETPAY

Permit fees may be paid online by credit card or through JetPay, using one of the following links:

New Site-Specific Permit: magic.collectorsolutions.com/magic-ui/payments/mo-natural-resources/591/

Construction Permits: magic.collectorsolutions.com/magic-ui/payments/mo-natural-resources/592/

Modification Fee: magic.collectorsolutions.com/magic-ui/payments/mo-natural-resources/596/

New General Domestic WW: magic.collectorsolutions.com/magic-ui/payments/mo-natural-resources/772/

15. OPTIONAL INFORMATION REGARDING MILITARY SERVICE

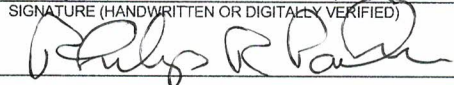
15.1 Have you ever served on active duty in the Armed Forces of the United States and separated from such service under conditions other than dishonorable? ☐ Yes ☒ No

15.2 Would you like to receive information and assistance regarding veterans benefits and services? ☐ Yes ☒ No

15.3 May the agency share your contact information with the Missouri Veterans Commission in order to provide you with information regarding available veterans benefits and services? General information may also be found on the Missouri Veterans Commission's website. ☐ Yes ☒ No

16. CERTIFICATION Please see page 8 for instructions.

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.

NAME (TYPE OR PRINT)	OFFICIAL TITLE	TELEPHONE NUMBER WITH AREA CODE
PHILIP PARKER	OWNER	(314) 401-5447
SIGNATURE (HANDWRITTEN OR DIGITALLY VERIFIED)		DATE SIGNED
		3/5/2026