STATE OF MISSOURI DEPARTMENT OF NATURAL RESOURCES

MISSOURI CLEAN WATER COMMISSION



GENERAL PERMIT for SEWER EXTENSION CONSTRUCTION

The Missouri Department of Natural Resources hereby issues a	permit to:
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Construction Permit ID:	MOGC00667
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Title of Project: Hawk Ridge Trail Estates

Owner: Hawk Ridge Trail Development LLC

Address: 17415 N Outer Forty Rd St. Louis, MO 63005

The project will also include general site work appropriate to the scope and purpose of the project and will include all the necessary appurtenances to make a complete and usable collection system. The construction of this project will be in the vicinity of the county below and discharge to Receiving Permit ID below:

County: St. Charles Receiving Permit ID: MO0028720

for the construction of (described construction project):

Hawk Ridge Trail Estates-Construction of approx. 2032 If of 8-inch PVC SDR-35, 1.3 If of 12-inch PVC SDR-35 grav sewer lines with 11 manholes to serve a design flow of 10,730 gpd. Installation of 32 If of 60 inch RCP to provide an additional approx. 4,406 gallons of storage at the existing lift station.

Project is in the vicinity of Lake St. Louis Blvd and Hawk Ridge Trail Rd in Lake St. Louis, St. Charles County and discharges to an existing system to be treated at OFallon WWTF, MO0028720. David Mathon, with Public Water Supply District No. 2 of St. Charles County, provided a letter dated Oct. 9, 2023, that PWSD No. 2 will be the continuing authority for the collection system. Marshall Suddarth, with City of OFallon provided treatment acceptance letter dated October 12, 2023.

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.

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

November 20, 2023	Shu foke
Issue Date	John Hoke, Director
	Water Protection Program
November 19, 2025 Expiration Date	<u>—</u>

APPLICABILITY

- 1. This permit authorizes the construction of gravity sewer extensions, force mains, and lift stations. Non-earthen flow equalization storage basins at lift stations and inline storage, which flows back into the lift station or collection system, are also included.
- 2. The Missouri Department of Natural Resources may require a site-specific sewer extension construction permit due to compliance and enforcement actions in accordance with 10 CSR 20-6.010(13)(C).
- 3. This permit does not apply to:
 - A. Earthen storage basins;
 - B. Exempt projects in accordance with 10 CSR 20-6.010(1)(B), 10 CSR 20-6.010(5)(B), and RSMo 644.051 unless requested by the applicant or required by enforcement.

PREREQUISITES:

- 1. The Sewer Extension Construction Permit application, appropriate fee, and documentation in accordance with 10 CSR 20-6.010(5)(G).
- 2. Submit the Sewer Extension Construction Permit application at least sixty (60) days in advance of the start of construction in accordance with 10 CSR 20-6.010(5)(F).
- 3. Submit an electronic copy of the construction permit application and documents to DNR.WPPEngineerSection@dnr.mo.gov in accordance with 10 CSR 20-6.010(5)(G)3.
- 4. The plans and specifications, each signed, sealed, and dated by a professional engineer registered in the State of Missouri in accordance with 10 CSR 20-8 and 10 CSR 20-6.010.
- 5. The Design Certification form, Engineering Report, or Summary of Design, signed, sealed, and dated by a professional engineer registered in the State of Missouri, certifying the design of the system is in accordance with 10 CSR 20-6 and 10 CSR 20-8.
- 6. A statement from the continuing authority, as defined in 10 CSR 20-6.010, accepting the wastewater for treatment and indicating the permitted treatment facility has the available capacity.
- 7. A statement from the continuing authority, as defined in 10 CSR 20-6.010, accepting responsibility for the operation and maintenance of these facilities.

PERMIT CONDITIONS:

- 1. This permit authorizes the activities and scope of work detailed in the plans and specifications submitted with the request.
- 2. The construction must be in accordance with the final plans and specifications received by the Department. Revisions that affect capacity, flow, or system layout must be approved by the Department prior to construction.

PERMIT CONDITIONS: (continued)

- 3. If construction will incorporate minor changes from previously submitted plans and specifications (i.e., changes that do not affect the capacity, flow, or system layout), submit an electronic copy of the as-built plans and specifications in accordance with 10 CSR 20-8.110(11).
- 4. State and Federal Law does not permit bypassing of raw wastewater; therefore, the applicant must take steps 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 regional office per 10 CSR 20-7.015(9)(E) or through the Online Bypass/SSO Reporting service on the Missouri Gateway for Environmental Management (MoGEM) portal found at https://dnr.mo.gov/data-e-services/missouri-gateway-environmental-management-mogem.

See https://dnr.mo.gov/document-search/missouri-gateway-environmental-management-mogem-frequently-asked-questions-pub2988/pub2988 for more information.

- 5. Protection of drinking water supplies must meet the requirements of 10 CSR 20-8.120(5).
 - A. There shall be no physical connections between a public or private potable water supply system and a sewer or appurtenance that would permit the passage of any wastewater or polluted water into the potable supply.
 - B. Lay sewers at least 50 feet (50') in a horizontal direction from any existing or proposed public water supply well or other water supply sources or structures.
- 6. Position manholes so that the top access is at or above grade level.
- 7. In addition to the requirements for a construction permit, see 10 CSR 20-6.200 for land disturbance requirements 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. Applicants shall obtain land disturbance permits through the Department's ePermitting system, available online at <a href="https://dnr.mo.gov/data-e-services/water/electronic-permitting-ep

See https://dnr.mo.gov/water/business-industry-other-entities/permits-certification-engineering-fees/stormwater/construction-land-disturbance for more information.

8. Entities applying for funding under 10 CSR 20-4, "Grants and Loans" will need to comply with those requirements in addition to the requirements of 10 CSR 20-8.

PERMIT CONDITIONS: (continued)

9. The Department may require a United States (U.S.) Army Corps of Engineers (COE) permit (404) and a Water Quality Certification (401) or a permit waiver for the activities described in this permit. If construction activity will disturb any land below the ordinary high water mark of Jurisdictional Waters of the U.S., then a 404/401 is required. Fulfillment of these requirements is necessary before the permit is considered valid. Since the COE makes determinations on what is jurisdictional, you must contact the COE to determine permitting requirements. You may call the Department's 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.

- 10. If this project eliminates a wastewater treatment facility under the jurisdiction of the Department, then the applicant shall submit a full closure plan with a Facility Closure Request Form, Form MO 780-2512, to the Department's appropriate regional office for review and approval. In accordance with 10 CSR 20-6.010(12), the closure plan must meet the requirements outlined in Standard Conditions Part III of the Missouri State Operating Permit. Closure shall not commence until the Department approves the submitted closure plan.
- 11. If this project is part of a project to resolve an enforcement action or is receiving funding from the Department, submit a <u>statement of work complete</u> following the completion of construction.
- 12. Applicants may submit, prior to the expiration date of this permit, a written request that additional time is needed in accordance with 10 CSR 20-6.010(5)(H)3.

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MISSOURI DEPARTMENT OF NATURAL RESOURCES

WATER PROTECTION PROGRAM

APPLICATION FOR CONSTRUCTION PERMIT -**SEWER EXTENSION**

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

				DATE RECEIVED	
NOTE ► PLEASE READ THE ACCOMPAN	YING INSTRU	CTIONS BEFORE C	OMPLETIN	G THIS FORM	
1.0 APPLICATION INFORMATION (Note – considered incomplete and returned.)	If any of the qu	estions in this section	on are answe	ered NO, this applica	ation may be
1.1 Is this a Federal/State funded project?	☐ YES 🗹	N/A Funding Age	ncy:	Proj	ect#:
1.2 Has the Department of Natural Resource [] YES Date of Approval:		e proposed project's N/A	engineering	report*?	
1.3 Is a copy of the appropriate plans* and s	pecifications* in	ncluded with this app	olication?	✓ YES □ NO	
1.4 Is a summary of design* included with th	is application?	✓ YES □ NO)		
1.5 Is the appropriate fee or JetPay confirmation See Section 7.0	ation included w	vith this application?	☑ YES [□NO	
* Must be affixed with a Missouri registered p	rofessional enç	gineer's seal, signatu	ure and date.		-
2.0 PROJECT INFORMATION 2.1 NAME OF PROJECT					
Hawk Ridge Trail Estates					
ADDRESS	CITY		STATE	ZIP CODE	COUNTY
Hawk Ridge Trail @ Lake St. Louis Blvd. 2.2 Legal Description: ¼,	Lake St. Louis		MO	63367	St. Charles
2.2 Legal Description. 74,	/4, /4,	Sec. ₄ , T ₄	6N , R 2E		
2.3 Project Components (check all that apply ☐ Gravity sewers ☐ Pumping station		mains 🔲 Alternati	ve sewer sys	stem 🔲 Other (De	escribe below.)
2.4 PROJECT DESCRIPTION	(all B) (a		(457.0)(0		
Approximately 11 Manholes with 2,032 linear	feet of 8" PVC	main, 1.3 linear reer	of 12" PVC	main and 32 linear r	eet of 60" HCP main.
2.5 DESIGN INFORMATION					
A. Population or number of lots to be served	•				
B. Estimated flow to be contributed by this e			0730 gpd	Design Peak Hourly	Flow: 1788 gph
C. Industrial Wastes: Type: N/A	Flow:	gpd			
D. Receiving Sewer: Size: 8 inches	Capacity	:8,360 gpm			
3.0 PROJECT OWNER			to the company		
NAME Hawk Ridge Trail Development, LLC		EPHONE NUMBER WITH ARI -336-0248	EA CODE	iroth@elitedevserv	ices com
ADDRESS	CITY	-550-0240	STATE	ZIP CODE	
17415 North Outer Forty Road, St. Louis, M	Chesterfield		МО	63005	
4.0 CONTINUING AUTHORITY: A continuing authority is a company, business, entity or person(s) that will be operating the facility					
or ensuring compliance with the permit requirements. A continuing authority is not, however, an entity or individual that is contractually hired by the permittee to sample or operate and maintain the system for a defined time period, such as a certified					
operator or analytical laboratory. To access the regulatory requirement regarding continuing authority, 10 CSR 20-6.010(2), please					
visit https://s1.sos.mo.gov/cmsimages/adrules/csr/current/10csr/10c20-6.pdf. A continuing authority's name must be listed exactly as it appears on the Missouri Secretary of State's (SoS's) webpage:					
https://bsd.sos.mo.gov/BusinessEntity/BESearch.aspx?SearchType=0, unless the continuing authority is an individual(s),					
government, or otherwise not required to reg		oS. EPHONE NUMBER WITH ARI	EA CODE	EMAIL ADDRESS	
Public Water Supply District 2 - St. Charles Co		-561-3737	EACODE	dmathon@waterdis	strict2.com
ADDRESS	CITY	1	STATE	ZIP CODE	
P.O. Box 967	O'Fallon		МО	63366	
4.1 A letter from the continuing authority or t if different than the owner, is included with the				ater Treatment Facil	ity Acceptance form,

REMINING COMPANY NAME TELEPHONE NUMBER WITH AREA CODE SMIL ADDRESS Vglosecki@sterling-eng-sur.com STATE ZIP CODE G3129	5.0 ENGINEER					
ADDRESS 5055 New Baumgarnter Road St. Louis Stanland Address Mandarth@ofallon.mo.us Stanland Address Mandarth@ofallo	ENGINEER NAME / COMPANY NAME		TELEPHONE NUMBER WITH AREA CODE			
50.55 New Baumgarnter Road St. Louis MO 63129 6.0 RECEIVING WASTEWATER TREATMENT FACILITY NAME City of O'Fallon, MO 63-379-2212 Msuddarth@ofallon.mo.us MSSOURI STATE OPERATING PERMIT # REMAINING CAPACITY (GPD) 11.25 MGD 6.1 Has the receiving treatment facility agreed to accept the additional wastewater flow? YES NO 6.2 A letter from the receiving wastewater treatment facility, if different than the continuing authority, is included with this application YES NO NO 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 volations. PROJECTIOWNER SIGNATURE MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176	The Sterling Company 314-48		4-487-0440		vglosecki@sterling-eng-sur.com	
6.0 RECEIVING WASTEWATER TREATMENT FACILITY NAME City of O'Fallon, MO 636-379-2212 MISSOURI STATE OPERATING PERMIT # MC-0028720 11.25 MGD 6.1 Has the receiving treatment facility agreed to accept the additional wastewater flow? YES NO 6.2 A letter from the receiving wastewater treatment facility, if different than the continuing authority, is included with this application YES NO 6.2 A letter from the receiving wastewater treatment facility, if different than the continuing authority, is included with this application YES NO 6.2 A letter from the receiving wastewater treatment facility, if different than the continuing authority, is included with this application YES NO N/A 7.0 Application Fee Check Number 3.0 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. PROJECTIONNER SIGNATURE PRINTED NAME Jeremy Roth Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176	ADDRESS	CITY		STATE	ZIP CODE	
NAME City of O'Fallon, MO 636-379-2212 MISSOURI STATE OPERATING PERMIT # MC-0028720 11.25 MGD 61.1 Has the receiving treatment facility agreed to accept the additional wastewater flow?	5055 New Baumgarnter Road	St. Louis		МО	63129	
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Check Number JetPay Confirmation Number		eatment facility	y, if different than the	continuing	authority, is included with this application.	
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Jeremy Roth TITLE OR COPORATE POSITION Authorized Signature State Stat	supervision in accordance with a system des submitted. Based on my inquiry of the perso gathering the information, the information su aware that there are significant penalties for knowing violations.	signed to assu on or persons v obmitted is, to t	re that qualified pers who manage the syst he best of my knowle	onnel prope em, or those edge and be	erly gather and evaluate the information e persons directly responsible for elief, true, accurate, and complete. I am	
Jeremy Roth TITLE OR COPORATE POSITION Agent Missouri Department of Natural Resources Water Protection Program P.O. BOX 176 JEFFERSON CITY, MO 65102-0176	I I was the					
Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176			DATE			
Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176	Jeremy Roth V		10/12/23			
Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176	TITLE OR COPORATE POSITION	TE	LEPHONE NUMBER WITH AF	REA CODE	EMAIL ADDRESS	
WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176	Authorized Agent	31	4-336-0248		jroth@elitedevservices.com	
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