

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

| | | |
|--|---|---------------------|
| CITY OF LOCKPORT, ILLINOIS, |) | |
| |) | |
| |) | |
| Petitioner, |) | |
| |) | |
| v. |) | PCB 2019-010 |
| |) | |
| ILLINOIS ENVIRONMENTAL PROTECTION |) | |
| AGENCY, |) | |
| |) | |
| Respondent. |) | |

NOTICE OF FILING

To: See Attached Service List

PLEASE TAKE NOTICE that on July 24, 2018, the undersigned attorney electronically filed with the Office of the Clerk of the Illinois Pollution Control Board her **Entry of Appearance** on behalf of the City of Lockport, IL, a copy of which is hereby served upon you.

Dated: July 24, 2018

CITY OF LOCKPORT,

By: /s/ Sonni Choi Williams
Its City Attorney

Sonni Choi Williams, ARDC No. 6270829
City Attorney
City of Lockport
222 E. 9th St.
Lockport, IL 60441
Email: swilliams@lockport.org
Tel: 815-838-0549 ex. 2142

PROOF OF SERVICE

The undersigned attorney certifies, under penalties of perjury pursuant to 735 ILCS 5/1-109, that she caused a copy of the attached **Entry of Appearance** to be served via First Class Mail with prepaid postage on the 24th day of July, 2018 to:

See Attached Service List

/s/ Sonni Choi Williams

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

CITY OF LOCKPORT, ILLINOIS,)
)
)
 Petitioner,)
)
 v.) **PCB No. 20__ - __**
)
 ILLINOIS ENVIRONMENTAL PROTECTION)
 AGENCY,)
)
 Respondent.)

APPEARANCE

Now comes the undersigned attorney, Sonni Choi Williams, and hereby enters her appearance on behalf of the Petitioner, CITY OF LOCKPORT, ILLINOIS.

Respectfully submitted,

/s/ Sonni Choi Williams

City Attorney of the City of Lockport

Sonni Choi Williams, ARDC No. 6270829
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NOTICE OF FILING

To: See Attached Service List

PLEASE TAKE NOTICE that on July 24, 2018, the City of Lockport, IL, electronically filed with the Office of the Clerk of the Illinois Pollution Control Board an **Individual Submittal in Support of Petition for Chloride Time-Limited Water Quality Standard for the Defined Chicago Area Water System/Des Plaines River Watershed**, a copy of which is hereby served upon you.

Dated: July 24, 2018

CITY OF LOCKPORT

By: /s/ Sonni Choi Williams
Its City Attorney

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The undersigned attorney certifies, under penalties of perjury pursuant to 735 ILCS 5/1-109, that she caused a copy of the foregoing **Individual Submittal in Support of Petition for Chloride Time-Limited Water Quality Standard for the Defined Chicago Area Water System/Des Plaines River Watershed**, to be served via First Class Mail with prepaid postage on the 24th day of July, 2018 to:

See Attached Service List.

/s/ Sonni Choi Williams

City Attorney

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ILLINOIS POLLUTION CONTROL BOARD

Docket Numbers: PCB 2016-14, PCB 2016-15, PCB 2016-16, PCB 2016-17, PCB 2016-18,
PCB 2016-20, PCB 2016-21, PCB 2016-22, PCB 2016-23, PCB 2016-25, PCB 2016-26,
PCB 2016-27, PCB 2016-29, PCB 2016-30, PCB 2016-31, PCB 2016-33
(Time-Limited Water Quality Standard) (Consolidated)

*Watershed, Waterbody, Waterbody Segment Time Limited Water Quality Standard (TLWQS)
Individual Submittal*

This Individual Submittal supplements the Joint Submittal in Support of Petition for Chloride Time-Limited Water Quality Standard for the Defined Chicago Area Waterway System/Des Plaines River Watershed (Joint Submittal), submitted in the above-referenced docket numbers. The Joint Submittal incorporated by reference, together with this Individual Submittal, satisfies the requirements of 35 IAC Part 014, Subpart E for each Facility.

An Individual Submittal must be made for each Facility discharging to either the Chicago Area Waterway System or Lower Des Plaines River that seeks to be covered by the TLWQS in this Docket.

This Individual Submittal must be made no later than July 26, 2018 for continued coverage (or initial coverage for new petitioners) under the current stay of effectiveness of the chlorides standards, found in 35 IAC 302.407(g)(2) and (g)(3).

Individual Discharger Information

1. Facility Name of Individual Discharger: Lockport S.t.p
 2. Owner/Operator of Facility: City of lockport
 3. Address of Facility: 425 W. Division Street Lockport, IL 60441
 4. Contact Information for Facility's Responsible Official:
Name: Joe Findlay Title: Supt.
Mailing Address: 222 East 9th Street Lockport, IL 60441
Phone Number: 815-838-1705 Email: jfindlay@lockport.org
 5. Permit Number of Facility (include both NPDES Permits and MS4 Permits that may be affected by the TLWQS): IL0029611, IL0021261, MS4 = ILR40
LKPT, BBE.M
 6. Are there any pending permit applications filed with Illinois Environmental Protection Agency that do not appear as part of the Joint Submittal's Appendices 5 and 6?
 Yes No
- If Yes, provide the application number for the pending permit(s): N/A

7. Facility discharges to the: Chicago Area Waterway System (CAWS)
 Lower Des Plaines River (LDPR)

8. Select Category of Facility:
 POTW Community with CSO Outfalls Industrial Source MS4
 Illinois Department of Transportation/Tollway Salt Storage Facility

Location of Individual Discharger

9. Each Individual Submittal must provide the specific location information for the facility seeking coverage under the TLWQS. Select the location of the discharge from the facility from the list below:

The CAWS includes the following reaches:

- Chicago River, North Branch of the Chicago River,
 South Branch of the Chicago River, Chicago Sanitary and Ship Canal,
 Cal-Sag Channel, Grand Calumet River, Lake Calumet,
 Lake Calumet Connecting Channel, Calumet and Little Calumet Rivers, and
 North Shore Channel

The LDPR includes the following areas:

- Des Plaines River from the Kankakee River to the Will County Line,
 Hickory Creek, Union Ditch, Spring Creek, Marley Creek, and
 East Branch of Marley Creek

10. The specific discharge locations for the Facility are:

- a. Outfall number(s): 001 STP outfall ckpt. , 001 STP outfall BBFM
- b. General description of outfall location:
LKPT - Deep Run Creek
BBFM - Fiddyment creek
- c. Outfall(s) appears on CAWS or LDPR list of Discharge Points (Joint Submittal Appendices 5 and 6): Yes No

TLWQS Requirements

11. Can the Facility achieve compliance with the chlorides standard by the compliance date?
(Only facilities that cannot achieve compliance are eligible for coverage by the TLWQS.)
 Yes No

12. (Optional) As referenced in Chapter 2 of the Joint Submittal, an Individual Discharger may provide supplemental information regarding any circumstances unique to the Facility regarding its inability to comply with the chlorides standard by the compliance date, including the nature and extent of the present or anticipated failure to meet the water quality standards and facts supporting that compliance with the water quality standards regulation cannot be achieved by any required compliance date.

N/A

13. Has any prior variance applied to the discharge from this Facility? ___ Yes No

If yes, please identify the variance providing similar relief, including any Illinois Pollution Control Board docket number issued to the Individual Discharger, watershed, water body, waterbody segment, and if known, the Individual Discharger's predecessors.

N/A

Facility-Specific TLQWS Requirements

14. The Facility agrees to implement all of the BMPs included for the POTW/MS4 Category (from #8, above) for the Facility that are specified for implementation in snow/deicing practices in Chapter 2 of the Joint Submittal.

15. Identify any past or currently in-use Best Management Practice(s) (BMPs) at the Facility for minimizing the discharge of chlorides.

ROAD salt storage in covered salt domes.
SALT trucks calibrated to use least amount of
SALT per lane mile.

16. Will any additional BMPs, beyond those included for the Category of the Facility for implementation in snow/deicing practices in Chapter 2 of the Joint Submittal, be implemented? ___ Yes No

If Yes, describe any additional BMPs:

N/A

17. By six (6) months after the effective date of the TLWQS, each Facility covered by the TLWQS must have a Pollutant Minimization Plan (PMP) that contains specific details as to how the BMPs will be implemented and include measurements and sampling protocols, frequency, and recordkeeping and reporting obligations, including appropriate elements from the documentation procedures identified in Appendix 54 of the Joint Submittal. Chapter 9 of the Joint Submittal describes these requirements in more detail.

Has the Facility already developed a PMP to address its discharge of chlorides?

Yes No

If Yes, what is the date of the Pollutant Minimization Plan (PMP)? N/A

If the Facility has not already developed the described PMP, does the Facility agree to develop the described PMP no later than six (6) months after the effective date of the TLWQS? Yes No

Certification

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 & Official Title (Type or Print)

Joseph M. Findlay, Leadwater Supt.

Signature

Joseph M. Findlay

Date Signed

7/19/18