

Metropolitan Water Reclamation District of Greater Chicago

100 EAST ERIE STREET

CHICAGO, ILLINOIS 60611

312 / 751-5600

Nicholas J. Melas President Nancy Drew Sheehan Vice President Gloria Alitto Majewski Chairman, Committee on Finance Thomas S. Fuller Frank E. Gardner Joseph E. Gardner Kathleen Therese Meany Terrence J. O'Brien Harry "Bus" Yourell

EARL W. KNIGHT Chief of Maintenance and Operations 312 / 751-5101

Certified Mail No. P465838564 Return Receipt Requested

November 25, 1992

Mr. Thomas G. McSwiggin, Manager Illinois Environmental Protection Agency Division of Water Pollution Control Permit Section, Municipal 2200 Churchill Road Springfield, IL 62794-999276

Subject:

North Side Water Reclamation Plant, NPDES Permit No. IL0028088

Permit Renewal Application

Dear Mr. McSwiggin:

Enclosed are three sets (1 original and 2 copies) of the renewal application for the subject NPDES permit.

Please note that only one set of Section 4, Standard Forms A, is being transmitted because of the large number of industrial data sheets contained therein.

If any additional information is required, please contact Frank Kambara of my staff at (312) 751-6550.

Very truly yours

Earl W. Knight

Chief of Maintenance

and Operations

Encl.



NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER

FOR AGENCY USE						
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STANDARD FORM A - MUNICIPAL

SECTION I. APPLICANT AND FACILITY DESCRIPTION

Unless otherwise specified on this form all items are to be completed. If an item is not applicable indicate 'NA,'

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

			Please Print or Type
1.	Legal Name of Applicant	101	Metropolitan Water Reclamation District of
	(see instructions)		Greater Chicago
2.	Mailing Address of Applicant (see instructions) Number & Street	102a	100 E. Erie Street
	City	1026	Chicago
	State	102c	Illinois
	Zip Code	102d	60611
3.	Applicant's Authorized Agent (see instructions) Name and Title	1032	Earl W. Knight
			Chief of Maintenance and Operations
	Number & Street	1035	100 E. Erie Street
	City	103c	Chicago
	State	103d	Illinois
	Zip Code	103e	60611
	Telephone	103f	312 751-5101 Area Number
4.	Previous Application If a previous application for a permit under the National Pollutant		Code
	Discharge Elimination System has been made, give the date of application.	104	86 07 11 YR MO DAY

I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate.

Frank E. Dalton	102e	General Superintendent	
Printed Name of Person Signing	10.	Title	
Fresh Elalter	_ 1021	92 11 24 YR MO DAY	
Signature of Applicant or Authorized Agent	Assessed 1	Date Application Signed	

18 U.S.C. Section 1001 provides that:

Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and wilfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statement or representation, or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both.

12.53	of Bit of			FOR AG	ENCY USE	CONTRACTOR		
				THE REPORT		240,75400	OFFICE:	EPA Region Number
The state of		Tree Pro-						NAMES OF THE PROPERTY OF THE PARTY OF THE PA
Received		A 1017 NF 191 NF						State .
eur la	YR MO DA	Υ.	# F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	74 to \$1.50				
THE RESERVE AND LOSSES.	Section and sections	The Southware of			Mount William To world you	THE REAL PROPERTY CLOSES	San	the management was the matter.

FOR AGENCY USE					
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Give the name, ownership, and physi- cal location of the plant or other operating facility where discharge(s)		
presently occur(s) or will occur. Name	North Side Water Red	clamation Plant
ivame		
Ownership (Public, Private or	3.57	
Both Public and Private).	105b NPUB PRV BPP	
Check block if a Federal facility	195¢ FED	
and give GSA Inventory Control		
Number	105d	e e
Location:	2500 11 11 1	
Number & Street	3500 W. Howard St.	
City	Skokie Skokie	
County	Cook	
County	Illinois	
State	105h	
Discharge to Another Municipal Facility (see instructions) a. Indicate if part of your discharge is into a municipal waste transport system under another responsible organization. If yes, complete the rest of this item and continue with Item 7. If no, go directly to Item 7.	106a □ Yes ⊠ No	
b. Responsible Organization		
Receiving Discharge Name	106b	
Name	1944	
£:		
	106c	
Number & Street		
City	106d	
State	106e	
		,
Zip Code	106f	
c. Facility Which Receives Discharge	1069	
Give the name of the facility	379	40
(waste treatment plant) which re- ceives and is ultimately respon-		
sible for treatment of the discharge from your facility.		
nom your racinty.		
d. Average Daily Flow to Facility	106hmgd	
(mgd) Give your average daily	School	
flow into the receiving facility.		

ponds, etc.

 Facility Discharges, Number and Discharge Volume (see instructions) Specify the number of discharges described in this application and the

described in this application and the volume of water discharged or lost to each of the categories below.

Estimate average volume per day in million gallons per day. Do not include intermittent or noncontinuous overflows, bypasses or seasonal discharges from language or seasonal discharges from language.

charges from lagoons, holding

							F	OR AGENCY USE
			Number of Discharge Points		Total Volume Di Million Gallons			
To:	Surface Water	107a1	2	10742	291			
	Surface Impoundment with no Effluent	10761	0	107b2	0			
	Underground Percolation	10701	_0_	107c2	0			
	Well (Injection)	107d1	_0_	107d2	0			
	Other	107e1	_0_	107e2	0			
Tot	al Item 7	107f1	_2	10712	291			
If 'c	ther' is specified, describe	10791						
faci over seas	ny of the discharges from this lity are intermittent, such as from flow or bypass points, or are onal or periodic from lagoons, ding ponds, etc., complete Item 8.		4					
	rmittent Discharges	100						
	Facility bypass points indicate the number of bypass points for the facility that are discharge points.(see instructions)	1051	0					
1	Facility Overflow Points indicate the number of overflow points to a surface water for the facility (see instructions).	1086	0	111				
1	Seasonal or Periodic Discharge Points Indicate the number of points where seasonal discharges occur from holding ponds, agoons, etc.	1086	0					
Indi	ection System Type cate the type and length (in s) of the collection system used his facility. (see instructions)	109a						
Se	parate Storm	18	□ SST					
Se	parate Sanitary	9	SAN					
	ombined Sanitary and Storm		□ css					
	oth Separate Sanitary and ombined Sewer Systems		⊠asc					
	oth Separate Storm and ombined Sewer Systems	1096	□ssc					
Le	ength	-	99.21 miles		intercepto ude local s	rs only	- doe	s not
	icipalities or Areas Served Instructions)			Nar		ewers)		Actual Population
		110a	North Sid	le Faci	lity Area		1106	1,257,602
		110a	(See atta	ched 1	ist of		1105	
		110a	municipal	ities	served and	map	1106	
		110a	of facili	ty are	a)		110b	
		110a					1105	
Tota	al Population Served		1				1100	1,257,602

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8.

10.

NORTH SIDE WATER RECLAMATION PLANT

SECTION I.10

Municipalities or Areas Served

MUNICIPALITY	POPULATION SERVED(1990)
Evanston	73,023
Glencoe	8,464
Glenview	35,465
Golf	468
Harwood Heights	7,660
Kenilworth	2,395
Lincolnwood	11,324
Morton Grove	22,186
Niles	27,245
Norridge	14,551
Northbrook	32,066
Northfield	4,621
Skokie	59,273
Wilmette	26,737
Winnetka	12,124
Parts of Chicago	900,000
Sub-Total	1,237,602
Unincorporated Areas	20,000
Total	1,257,602

FOF	AGE	NC	YU	SE
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11.	Average Daily Industrial Flow	1 1	16.3	
	Total estimated average daily waste	111	10.5	mg
	flow from all industrial sources.	1		

Note: All major industries (as defined in Section IV) discharging to the municipal system must be listed in Section IV.

12. Permits, Licenses and Applications

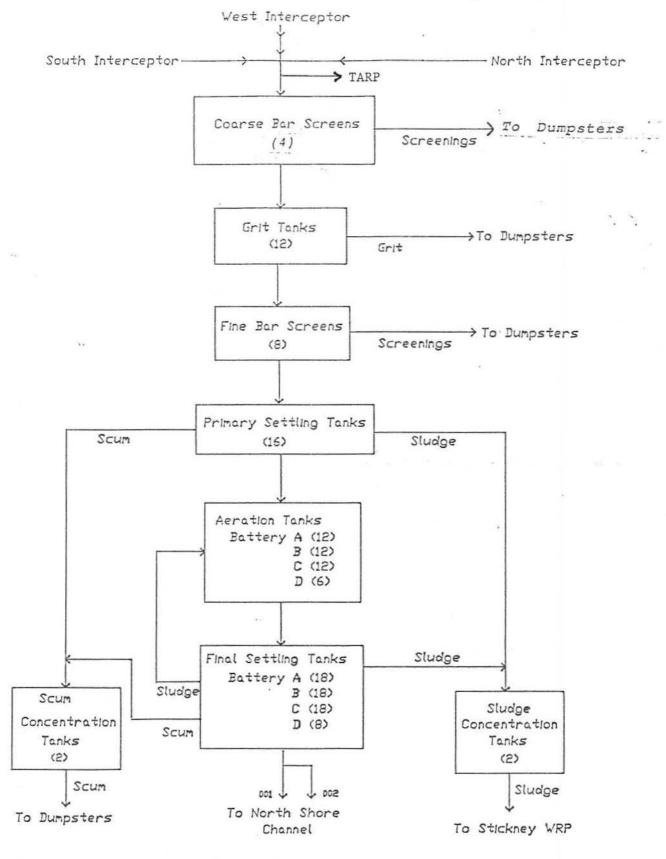
List all existing, pending or denied permits, licenses and applications related to discharges from this facility. (see instructions)

	Issuing Agency	For Agency Use	Type of Permit or License	ID Number	Date Filed YR/MO/DA	Date Issued YR/MO/DA	Date Denied YR/MO/DA	Expiration Date YR/MO/DA
12	(a)	(b)	(c)	(d)	(e)	(1)	(9)	(h)
1.	IEPA		NPDES	IL0028088	86/07/11	88/06/29		93/06/01
				•				
2.		MA TORK						
		A. 100						
3.		學為自						

Maps and Drawings
 Attach all required maps and drawings to the back of this application. (see instructions)

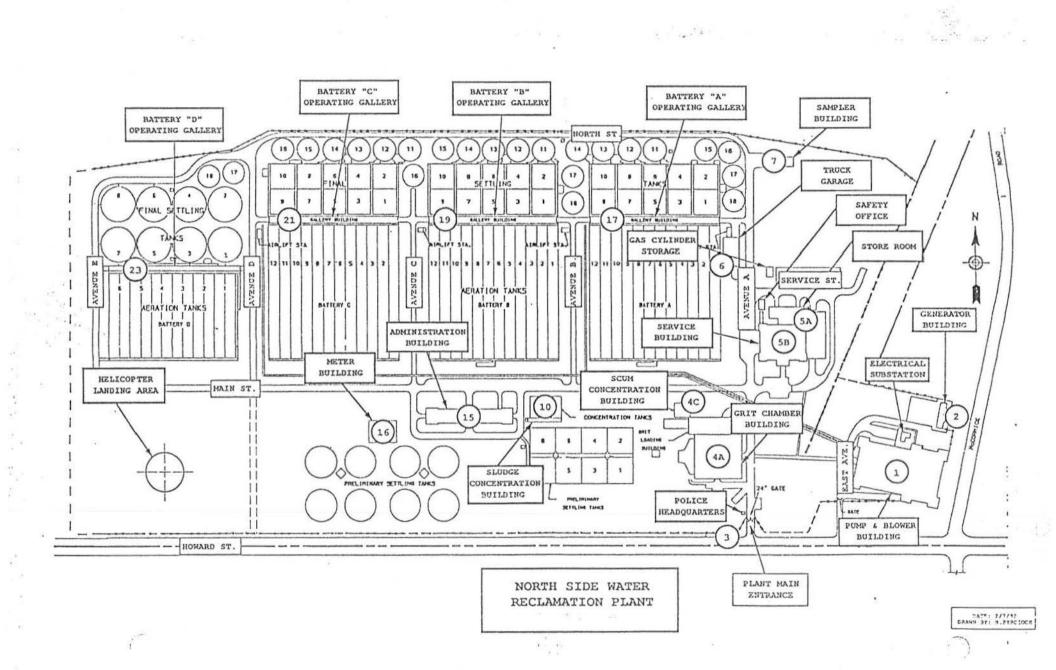
14. Additional Information

1	Item Jumber	Information
	1.	



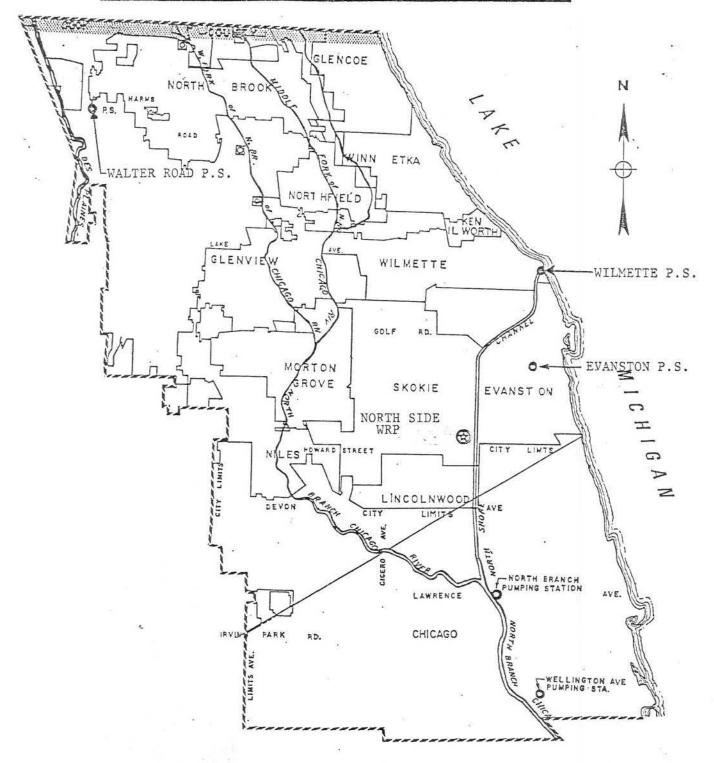
Flow Diagram North Side WRP

Note: () represents number of units





NORTH SIDE FACILITY AREA



THE METROPOLITAN SANITARY DISTRICT
OF GREATER CHICAGO

ENGINEERING DEPARTMENT

S.P. & F.I.K.

SEPT. 1974

STANDARD FORM A-MUNICIPAL

SECTION II. BASIC DISCHARGE DESCRIPTION

FOR AGENCY USE							
		T	T			j	

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates,

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	201a	_001	
	 Discharge Name Give name of discharge, if any and (see instructions) 	2015	Main Effluent Outfall	L
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this discharge (Item 4, Section I) provide previous discharge serial number.	2016	_001	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	2022	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	2025	NA YR MO	34
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	2054
	County	203b	Cook	2036
		203c	Skokie	
	(if applicable) City or Town	2036		203f J
4.	Discharge Point Description (see Instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	204a	⊠ STR	
	Estuary		□ EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		□отн	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)		ACCES SECTION APPLICATION	
	Latitude	205a	42 DEG. 01 MIN. 2	1 sec
	Longitude	205b	87 DEG. 42 MIN. 3	8 sec

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ь.	Name the waterway at the point of discharge.(see instructions)	2062	North Shore Channel
			For Agency Use For Agency Use
			Major Minor Sub 206c 303e
fall or	he discharge is through an out- I that extends beyond the shoreline is below the mean low water line, mplete Item 7.	2065	
7.	Offshore Discharge		
	a. Discharge Distance from Shore	207a	NAfeet
	 Discharge Depth Below Water Surface 	207b	NA feet
	discharge is from a bypass or an overflow papplicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA
	a. Bypass Occurrence Check when bypass occurs		Contraction and the Contraction of the Contraction
	Wet weather	208a1	☐ Yes ☐ No
	Dry weather	20822	Yes No
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 		
	Wet Weather	20861	times per year
	Dry weather	208b2	times per year
	c. Bypass Duration Give the average bypass duration in hours.		
	Wet weather	208c1	hours
	Dry weather	208c2	hours
	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.		
	Wet weather	208d1	thousand gallons per incident
	Dry weather	208d2	thousand gallons per incident
	e. Bypass Reasons Give reasons why bypass occurs.	208#	
	##		
	Proceed to Item 11.		
9.	Overflow Discharge (see instructions)		NA
	a. Overflow Occurrence Check when overflow occurs.		×
	Wet weather	209a1	☐ Yes ☐ No
	Dry weather	209:2	Yes No
	b. Overflow Frequency Give the actual or approximate incidents per year.		
	Wet weather	20951	times per year
	Dry weather	209b2	times per year

DISCHARGE	SERIAL	NUMBER

E SERIAL NUMBER	FOR AGENCY USE
001	

c.	Overflow Duration Give the average overflow duration in hours.	William Control		
	Wet weather	209c1	hours	
	Dry weather	209c2	Hours	
d.	Overflow Volume Give the average volume per overflow incident in thousand gallons.			
	Wet weather	20941	thousand gallons per incident	
	Dry weather	209d2	thousand gallons per incident	2
Pr	oceed to Item 11			
10. Se	asonal/Periodic Discharges		NA	
а.	Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond, lagoon, etc., give the actual or approximate number of times	210a	30 March 10	
b.	this discharge occurs per year. Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand callons.	210b	thousand gallons per discharge occurrence	
c.	Seasonal/Periodic Discharge Duration Give the average dura- tion of each discharge occurrence in days.	210c	days	
d.	Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs.	218d	□JAN □FEB □MAR □APR □MAY □JUN □JUL □AUG □SEP	
			OCT NOV DEC	
11. D	ischarge Treatment		v e	
a.	Discharge Treatment Description Describe waste abatement prac- tices used on this discharge with a brief narrative. (See instruc- tions)	211a	Treatment consists of grit removal (straight line	_
			grit channels), fine screening, primary sedimentati	.01
	•		using clarifiers, and biological secondary	_
			treatment using activated sludge followed by	
			secondary clarification. Sludge handling consists	
			of gravity concentration and pumping to the Stickne	<u>-</u>
			WRP for further treatment and disposal. Scum	
			removal consist of skimming from primary and	
			secondary settling tanks followed by concentration	
			and disposal to a sanitary landfill.	_
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				_

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b. Discharge Treatment Codes
 Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement processes applied to this discharge in the order in which they occur, if possible.
 Separate all codes with commas except where slashes are used to designate parallel operations.

S/G/S/C/WNA/N/T/

If this discharge is from a municipal waste treatment plant (not an overflow or bypass), complete Items 12 and 13

- Plant Design and Operation Manuals Check which of the following are currently available
 - a. Engineering Design Report
 - Deration and Maintenance Manual
- 13. Plant Design Data (see instructions)
 - a. Plant Design Flow (mgd)
 - b. Plant Design BOD Removal (%)
 - c. Plant Design N Removal (%)
 - d. Plant Design P Removal (%)
 - e. Plant Design SS Removal (%)
 - f. Plant Began Operation (year)
 - g. Plant Last Major Revision (year)

212a		
212b		
213a	333	mg d
2135	81	%
213c	93	%
213d	NA	%
2130	78	%
213f	1928	
213g	1985	_

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North Side WRP, 001

14. Description of Influent and Effluent (see instructions)



	Influent			Effluent			
Parameter and Code	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050	291	291	258	335	7/7	365	
pH Units 00400	X	X	6.8	7.2	7/7	365	G
Temperature (winter) F Nov Mar.		50	48	54	7/7	151	G
Temperature (summer) F 74027 Apr Oct.		64	54	72	7/7	214	G
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X	35,000	1/7	50	G
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X	X				
BOD 5-day mg/l 00310	92	. 7	4	11	7/7	365	24
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)	203	27	22	38	7/7	365	24
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)							
Chlorine-Total Residual mg/1 50060							

DISCHARGE SERIAL NUMBER North Side WRP, 001

FOR AGENCY USE

14. Description of influent and Effluent (see instructions) (Continued)

	Influent		Effluent						
Parameter and Code 214	Annual Average Yalue	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type		
Total Solids mg/l 00500	622	520	401	703	7/7	365	24		
Total Dissolved Solids mg/l 70300									
Total Suspended Solids mg/l 00530	108	5	4	7	7/7	365	24		
Settleable Matter (Residue) ml/l 00545					1				
Ammonia (as N) mg/l 00610 (Provide if available)	7.4	0.7	0.3	1.8	7/7	365	24		
Kjeldahl Nitrogen mg/l 00625 (Provide if available)	15.0	1.8	1.3	2.7	7/7	365	24		
Nitrate (as N) mg/l 00620 (Provide if available)	0:7	6.1	5.5	7.0	7/7	365	24		
Nitrite (as N) mg/l 00615 (Provide if available)	0.2	0.3	0.2	0.9	7/7	365	24		
Phosphorus Total (as P) mg/l 00665 (Provide if available)	3.0	1.0	0.7	1.2	7/7	365	24		
Dissolved Oxygen (DO) mg/I 00300	X	7.3	6.2	8.2	7/7	365	G		

North Side WRP, 001



15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940	X	Chromium 01034	X	Titanium 01152	
Cyanide 00720	χ.	Copper 01042	Х	Tin 01102	
Fluoride 00951	X	Iron 01045	X	Zinc 01092	
Sulfide 00745	X	Lead 01051	Х	Algicides* 74051	
Aluminum 01105		Manganese 01055	X	Chlorinated organic compounds* 74052	X
Antimony 01097		Mercury 71900	X	Oil and grease 00550	X
Arsenic 01002	X	Molybdenum 01062	4	Pesticides* . 74053	
Beryllium 01012		Nickel 01067		Phenols 32730	X
Barium 01007		Sclenium 01147	Х	Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	X
Cadmium 01027	X				

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

> Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment failure



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17. Additional Information

217,	Item Number	Information
	Number	
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STANDARD FORM A-MUNICIPAL

FOR AGENCY USE								
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SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	a. Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	201a	002	9
	b. Discharge Name Give name of discharge, if any (see instructions)	2015	Cooling Tank Discharge	9
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	2016	002	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	2022	NA YR MO	
	b. Discharge to End Date If the dis- charge is scheduled to be discon- tinued within the next 5 years, give the date (within best estimate) the discharge will end. Give rea- son for discontinuing this discharge in Item 17.	202b	NA YR MO	
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	203d
	County	203b	Cook	203e
	(If applicable) City or Town	203c	Skokie	203f
4.	Discharge Point Description (see Instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	204a	☑STR	
	Estuary		□EST	
	Lake		- LKE	
	Ocean		OCE	
	Well (Injection)		□ weL	
	Other		□отн	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude	205a	_42 DEG01 MIN10 SEC	
	Longitude	205 b	87 DEG42 MIN38 SEC	

FOR AGENCY USE								

6.	Discharge Receiving Water Name Name the waterway at the point of discharge (see instructions)	206a	North Shore Channel	-
		181	For Agency Use	-
			Major Minor Sub 206c 303e	
fall or i	he discharge is through an out- that extends beyond the shoreline s below the mean low water line, nplete Item 7.	2065		
7.	Offshore Discharge		PIG.	
	a. Discharge Distance from Shore	207a	NAfeet	
	 Discharge Depth Below Water Surface 	207b	NAfeet	
	ischarge is from a bypass or an overflow pplicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,	
8.	Bypass Discharge (see instructions)		NA	
	a. Bypass Occurrence Check when bypass occurs			
	Wet weather	2081	☐ Yes ☐ No	
	Dry weather	20822	☐ Yes ☐ No	
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 			
	Wet Weather	20861	times per year	
	Dry weather	208b2	times per year	
	c. Bypass Duration Give the average bypass duration in hours.			
	Wet weather	208c1	hours	
	Dry weather	208c2	hours	
(+1)	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.			
	Wet weather	208d1	thousand gallons per incident	
	Dry weather	20842	thousand gallons per incident	
	e. Bypass Reasons Give reasons why bypass occurs.	2084	<u></u>	_
	Proceed to Item 11.			-
9.	Overflow Discharge (see instructions)		NA	
	 Overflow Occurrence Check when overflow occurs. 		12-49-90 C	
	Wet weather	209a1	☐ Yes ☐ No	
	Dry weather	20932	☐ Yes ☐ No	
	 Overflow Frequency Give the actual or approximate incidents per year. 			
	Wet weather	20951	times per year	
	Dry weather	209b2	times per year	

002

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c.	Overflow Duration Give the average overflow duration in hours.	WW						
	Wet weather	20901		hours				
	Dry weather	20962		Hours				
đ.	Overflow-Volume Give the average volume per overflow incident in thousand gallons.							
	Wet weather	20941		thou	sand gallon	s per incide	nt	
	Dry weather	209d2		thou	usand gallon	s per incide	nt	8
Pro	oceed to Item 11							
10. Se	asonal/Periodic Discharges		N	Α			Eyok (Asign)	
a.	Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurs per year.	210a		times per y	ear			
b.	Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand gallons.	210b		thou	usand gallon	ns per discha	rge occurrence	
c.	Seasonal/Periodic Discharge Duration Give the average duration of each discharge occurrence in days.	210c		days			PART OF	
d.	Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when	218d	DJAN	☐ FEB	MAR		afficework	
	the discharge normally occurs.		☐ APR	MAY	DJUN			
			DJUL	AUG	SEP			
			Ост	□ NOV	DEC			
11. Di	scharge Treatment						h#.)	
a.	Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions)	211a	S	ame as	001		g # = +:	
		distribution of						
			-	,				
					291-111			
			5-7					
			(m					
			0					
								·
			35 - 235 - 25			- VIII III		- FAR9.

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b.	Discharge Treatment Codes Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement processes applied to this discharge in the order in which they occur, if possible.
	Separate all codes with commas
	except where slashes are used to designate parallel operations.

ь —	Same	as 0	01	 -
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If this discharge is from a municipal waste treatment plant (not an overflow or bypass), complete Items 12 and 13

- Plant Design and Operation Manuals Check which of the following are currently available
 - a. Engineering Design Report
 - Operation and Maintenance Manual
- 13. Plant Design Data (see instructions)
 - a. Plant Design Flow (mgd)
 - b. Plant Design BOD Removal (%)
 - c. Plant Design N Removal (%)
 - d. Plant Design P Removal (%)
 - e. Plant Design SS Removal (%)
 - f. Plant Began Operation (year)
 - g. Plant Last Major Revision (year)

212a		
212b	×	
213a	333	mgd
213b	81	%
213c	93	%
213d	NA	%
2138	78	%
213f	1928	
213g	1985	

North Side WRP, 002

14. Description of Influent and Effluent (see instructions)



	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X	6.7	7.2	7/7	365	G
Temperature (winter) ° F 74028			.*				
Temperature (summer) ° F 74027							
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X	39,000	1/7	51	G
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X	X				
BOD 5-day mg/I 00310	92	. 8	5	12	7/7	365	24
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)	203	29	25	42	7/7	365	24
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)							
Chlorine-Total Residual mg/l 50060							

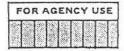
DISCHARGE SERIAL NUMBER North Side WRP, 002



14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent			
Parameter and Code 214	Annual Average Yalue	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/l 00500	622	519	397	704	7/7	365	24
Total Dissolved Solids mg/l 70300							
Total Suspended Solids mg/l 00530	108	5	4	7	7/7	365	24
Settleable Matter (Residue) ml/1 00545					!		
Ammonia (as N) mg/l 00610 (Provide if available)	7.4	1.1	0.5	2.1	7/7	365	24
Kjeldahl Nitrogen mg/l 00625 (Provide if available)	15.0	2.2	1.5	3.5	7/7	365	24
Nitrate (as N) mg/l 00620 (Provide if available)	0.7	5.6	4.4	6.7	7/7	365	24
Nitrite (as N) mg/I 00615 (Provide if available)	0.2	0.4	0.2	1.7	7/7	365	24
Phosphorus Total (as P) mg/l 00665 (Provide if available)	3.0	1.0	0.7	1.2	7/7	365	24
Dissolved Oxygen (DO) mg/I 00300	X	7.1	6.3	8.1	7/7	304	G

DISCHARGE SERIAL NUMBER North_Side WRP, 002



Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent, (see instructions)

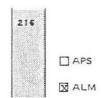
Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940	Х	Chromium 01034	X	Titanium 01152	
Cyanide 00720	X	Copper 01042	Х	Tin 01102	
Fluoride 00951	X	Iron 01045	X	Zinc 01092	X
Sulfide 00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	X
Antimony 01097		Mercury 71900		Oil and grease 00550	X
Arsenic 01002	X	Molybdenum 01062		Pesticides* . 74053	
Beryllium 01012		Nickel 01067		Phenols 32730	X
Barium 01007		Selenium 01147	X	Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	X
Cadmium 01027	Х				

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

> Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment failure



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17. Additional Information

	Item Number	Information
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STANDARD FORM A-MUNICIPAL

SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No.	201a	_101	
	(see instructions) b. Discharge Name	201b	Sheridan Road	
	Give name of discharge, if any (see instructions)		101	
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	201c		
2,	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	2025	NA YR MO	x **
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	_ 203d
	County	2035	Cook	_ 203e
	(if applicable) City or Town	203c	Wilmette	_ 203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	2042	⊠STR	
	Estuary		□EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		ОТН	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude	205a	_42 DEG04MIN32 SEC	
	Longitude	205b	87 DEG41_MIN07_SEC	

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6.	Discharge Receiving Water Name Name the waterway at the point of	206a	North Shore Channel
	discharge (see instructions)		
			For Agency Use For Agency Use
			Major Minor Sub 206c 303e
fall or	he discharge is through an out- that extends beyond the shoreline is below the mean low water line, nplete Item 7.	2065	
7.	Offshore Discharge		
	a. Discharge Distance from Shore	207a	NA_feet
	b. Discharge Depth Below Water Surface	207b	NA feet
	ischarge is from a bypass or an overflow applicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA
	a. Bypass Occurrence Check when bypass occurs		
	Wet weather	2081	☐ Yes ☐ No
	Dry weather	20822	Yes No
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 		
	Wet Weather	20851	times per year
	Dry weather	208 b2	times per year
	c. Bypass Duration Give the average bypass duration in hours.		======================================
	Wet weather	208c1	hours
	Dry weather	208c2	hours
Te.	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.		
	Wet weather	20841	thousand gallons per incident
	Dry weather	20842	thousand gallons per incident
	e. Bypass Reasons Give reasons		
	why bypass occurs.	2084	
	Proceed to Item 11.		
9.	Overflow Discharge (see instructions)		
	a. Overflow Occurrence Check when overflow occurs.		91
	Wet weather	209a1	⊠ Yes □ No
	Dry weather	20922	□Yes ⊠No -
	 Overflow Frequency Give the actual or approximate incidents per year. 		
	Wet weather	20951	10times per year
	Dry weather	209b2	

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1127, 1127, 177, 175

c.	Overflow Duration Give the average overflow duration in hours.							
	Wet weather	209c1	6.4	nours				
	Dry weather	209c2		Hours			est to a set of	
d.	Overflow Volume Give the		5 5					
	average volume per overflow						+ 227	
	incident in thousand gallons,		900)			LARA I II L	
	Wet weather	209d1		thou	usand gallo	ns per incid	ent	
	Dry weather	20942		thou	usand gallo	ns per incid	ent	6
Pro	oceed to Item 11							
10. Sea	asonal/Periodic Discharges						Total and an	
a.	Seasonal/Periodic Discharge							
	Frequency If discharge is inter- mittent from a holding pond,	210a		imes per y	ear			
	lagoon, etc., give the actual or						galagera fill	
	approximate number of times this discharge occurs per year.							
b.	Seasonal/Periodic Discharge Volume Give the average	210b		thou	isand nalln	ns ner disch	arge occurrence	
	volume per discharge occurrence	2.00			asana gano	ns per disch	arge occurrence	
	in thousand gallons.					- E V	4	
c.	Seasonal/Periodic Discharge							
	Duration Give the average dura- tion of each discharge occurrence	210c		days		2 8	Satisfie (1996 - 1996) A. L. Markey (1991)	
	in days.			4 5	2111111	stella "	ABING CAR STORY	
d.	Seasonal/Periodic Discharge			120		W = 1	(2) 1200 0 E	
	Occurrence—Months Check the months during the year when	2184	NAL	FEB	MAR	2 11	2 20 A EMILIA	
	the discharge normally occurs.		⊠ APR	MAY	MUN			
			MIOF	☑ AUG	₩ SEP	W 12		
							2 4	
			MOCT	NOV	DEC			
11. Dis	charge Treatment						Section 18	
a.	Discharge Treatment Description				8		We wall that He was a	
	Describe waste abatement prac- tices used on this discharge with							
	a brief narrative. (See instruc-		N	one				
	tions)	211a						
		Participant Control						
			-					
			-					
			Marco III		1033/10			
			7					
			0					
			·					32-110-1-11 -11
			7					

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	b.	Discharge Treatment Codes	#2000 mm/8000098		
	Ь.	Using the codes listed in Table I	211b		
		of the Instruction Booklet,			
		describe the waste abatement			
		processes applied to this dis-	18000		
		charge in the order in which			
		they occur, if possible.	12.55		۰
		Separate all codes with commas			
		except where slashes are used			
		to designate parallel operations.			
		to designete paramet operations			
		discharge is from a municipal waste			
		nt plant (not an overflow or			
byp	ass)	, complete items 12 and 13			
12.		nt Design and Operation Manuals		NA	
		eck which of the following are			
	cu	rrently available			
	2.	Engineering Design Report	212a		
	-				
	h	Operation and Maintenance			
	D.	Manual	2125		
		Waltual			
	7/200			NA	
13.	Pla	int Design Data (see instructions)			
	a.	Plant Design Flow (mgd)	213a	mgd	
	b.	Plant Design BOD Removal (%)	2135	%	
	C.	Plant Design N Removal (%)	213c	%	
	-0		2136	%	
	d.	Plant Design P Removal (%)	2130	76	
	-2	Plant Design SS Removal (%)	2138	%	
	e.	Fight Design 33 Remotal (%)			
		Plant Began Operation (year)	213f		
		in in Dogon Operation (7 and			
		Plant Last Major Revision (vear)	2134		

14. Description of Influent and Effluent (see instructions)



	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X				50	
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027							
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X				
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X					
BOD 5-day mg/1 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)							
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)			=			(e	
Chlorine-Total Residual mg/l 50060			a 10 1				

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent			
Parameter and Code	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/l 00500							
Total Dissolved Solids mg/l 70300							
Total Suspended Solids mg/l 00530							
Settleable Matter (Residue) ml/I 00545			=		11		
Ammonia (as N) mg/l 00610 (Provide if available)							
Kjeldahl Nitrogen mg/l 00625 (Provide if available)	-				5		
Nitrate (as N) mg/1 00620 (Provide if available)			3-70				
Nitrite (as N) mg/l 00615 (Provide if available)					M. S.		
Phosphorus Total (as P) mg/l 00665 (Provide if available)					V 1		
Dissolved Oxygen (DO) mg/1 00300	X	11	-			= 7	

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15. Additional Wastewater Characteristics

Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720		Copper 01042		Tin 01102	
Fluoride 00951		Iron 01045		Zinc 01092	
Sulfide 00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002		Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067	1	Phenols 32730	
Barium 01007		Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027		5 P			

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment fallure



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17. Additional Information

Item Number	Information
9	Approximately 60% of overflow intercepted by Mainstream TARP,
	Phase I, and subsequently treated at Stickney WRP.
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STANDARD FORM A-MUNICIPAL

SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section 1, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	2012	_102	
	b. Discharge Name Give name of discharge, if any	2015	Greenbay Road	
	(see instructions) c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	2016	102	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	2025	NA YR MO	
3.	Discharge Location Name the political boundaries within which the point of discharge is located:	Ī		Agency Use
	State	203a	Illinois	_ 209d
	County	2035	Cook	203e
	(if applicable) City or Town	203c	Evanston	203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	2042	⊠STR	
	Estuary		□ EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		□отн	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude	205a	_42 DEG03 MIN33 SEC	
	Longitude	205b	87 DEG. 41 MIN. 40 SEC	

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	Name the waterway at the point of discharge (see instructions)	2062	North Shore Channel
			For Agency Use Major Minor Sub 206c For Agency Use 303e
fal	the discharge is through an out- I that extends beyond the shoreline is below the mean low water line, mplete Item 7.	2065	
7.	Offshore Discharge		
	a. Discharge Distance from Shore	207a	NAfeet
	b. Discharge Depth Below Water Surface	207b	NA feet
lf as	discharge is from a bypass or an overflow applicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA
	a. Bypass Occurrence Check when bypass occurs		
	Wet weather	2081	□ Yes □ No
	Dry weather	208a2	☐ Yes ☐ No
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 		
	Wet Weather	208b1	times per year
	Dry weather	208b2	times per year
	c. Bypass Duration Give the average bypass duration in hours.		
	Wet weather	208c1	hours
	Dry weather	208c2	hours
St.	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.		
	Wet weather	208d1	thousand gallons per incident
	Dry weather	208d2	thousand gallons per incident
	e. Bypass Reasons Give reasons why bypass occurs.	2086	A A A A A A A A A A A A A A A A A A A
	Proceed to Item 11.		
9.	Overflow Discharge (see instructions)		
	a. Overflow Occurrence Check when overflow occurs.		·
	Wet weather	209a1	☑ Yes □ No
	- Dry weather	209≥2	☐ Yes ☑ No -
	 Overflow Frequency Give the actual or approximate incidents per year. 		
	Wet weather	209b1	10_times per year
	Dry weather	209b2	times per year
		0.0000000000000000000000000000000000000	AND THE RESERVE OF THE PARTY OF

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c.	Overflow Duration Give the average overflow duration in hours.								
	Wet weather	209c1	_6.4	hours					
	Dry weather	20962		Hours		1	Edit		
đ.	Overflow Volume Give the average volume per overflow incident in thousand gallons.						The second		
	Wet weather	20941	476	tho	usand gallo	ns per incid			
	Dry weather	209d2		tho	usand gallo	ns per incid	ent		ŭ.
Pr	oceed to Item 11								
10. Se	asonal/Periodic Discharges						David N. V.		
а.	Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond,	210a		times per y	ear				
	lagoon, etc., give the actual or approximate number of times this discharge occurs per year.								
b.	Seasonal/Periodic Discharge					WITE.	a tan di mila aya		
	Volume Give the average volume per discharge occurrence	2105	-	tno	usand gallo	ns per disch	arge occurrence		
	in thousand gallons.					· ¥		E-	
c.	Seasonal/Periodic Discharge Duration Give the average dura-	210c		days			9-4-9		
	tion of each discharge occurrence in days.			9 1		100	240 56 100		
d.	Seasonal/Periodic Discharge				F FANDADOS	120	paj + med (pa)		
	Occurrence—Months Check the months during the year when	210d	DJAN	FEB	MAR	188 E			
	the discharge normally occurs.		⊠ APR ⊠JUL	10000	⊠ JUN ⊠ SEP		ger geraner.		
				☑ AUG	3 -3 0-1		- + + + +		
			M 001	M HOV			4		
	scharge Treatment								
a.	Discharge Treatment Description Describe waste abatement prac- tices used on this discharge with a brief narrative. (See instruc-								
	tions)	2112	Non	е					
									_
									400
			3						-
			1						770
			/						11.00
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			7				<u> </u>		
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			8-						-

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	b.	Discharge Treatment Codes Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement processes applied to this discharge in the order in which they occur, if possible. Separate all codes with commas except where slashes are used to designate parallel operations.	2116		
trea	tme	discharge is from a municipal waste ent plant (not an overflow or , complete items 12 and 13			
12.	Ch	ent Design and Operation Manuals eck which of the following are rrently available		NA	
	a.	Engineering Design Report	212a		
	b.	Operation and Maintenance Manual	212b		
13.	PI	ent Design Data (see instructions)		NA	
	a.	Plant Design Flow (mgd)	213a	mgd	
	b.	Plant Design BOD Removal (%)	2135	%	
	c.	Plant Design N Removal (%)	213c	%	
	d.	Plant Design P Removal (%)	213d	%	
	e.	Plant Design SS Removal (%)	2138	%	
	f.	Plant Began Operation (year)	213f		
	•	Diant Last Major Revision (year)	2134	Marcola Marcol	

14. Description of Influent and Effluent (see instructions)



	Influent			Effluent							
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type				
Flow Million gallons per day 50050											
pH Units 00400	X	X					107-75				
Temperature (winter) F 74028											
Temperature (summer) F 74027											
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X								
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X								
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X	X								
BOD 5-day mg/1 00310											
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)				-							
OR											
Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)			V ()	E Control	(8) (8) (1) = (1)	-					
Chlorine-Total Residual mg/l 50060	- x x x										

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FOR AGENCY USE									

14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent						
Parameter and Code 214	Annual Average Ualue	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	S Number of Analyses	Sample Type			
Total Solids mg/l 00500										
Total Dissolved Solids mg/l 70300										
Total Suspended Solids mg/l 00530		48								
Settleable Matter (Residue) ml/l 00545					41					
Ammonia (as N) mg/l 00610 (Provide if available)					Page of the in Manager than					
Kjeldahl Nitrogen mg/l 00625 (Provide if available)										
Nitrate (as N) mg/l 00620 (Provide if available)	P				**					
Nitrite (as N) mg/l 00615 (Provide if available)										
Phosphorus Total (as P) mg/l 00665 (Provide if available)					±\$					
Dissolved Oxygen (DO) mg/1 00300	X			ā	- 8 >	29(1)				

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FOR AGENCY USE											

15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)
Bromide 71870		Cobalt 01037		Thallium 01059
Chloride 00940		Chromium 01034		Titanium 01152
Cyanide 00720		Copper 01042		Tin 01102
Fluoride 00951		Iron 01045		Zinc 01092
Sulfide 00745		Lead 01051		Algicides* 74051
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052
Antimony 01097		Mercury 71900		Oil and grease 00550
Arsenic 01002		Molybdenum 01062		Pesticides* 74053
Beryllium 01012		Nickel 01067		Phenols 32730
Barium 01007		Selenium 01147		Surfactants 38260
Boron 01022		Silver 01077		Radioactivity* 74050
Cadmium 01027		- =		

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment failure

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17. Additional Information

17	Item Number	Information	
-	9	Approximately 60% of overflow intercepted by Mainstream TARP,	-
		Phase I, and subsequently treated at Stickney WRP.	
-			
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STANDARD FORM A-MUNICIPAL

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E DESCRIPTION	

SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section 1, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	a. Discharge Serial No. (see instructions)	201a	103	
	b. Discharge Name Give name of discharge, if any - (see instructions)	2015	Emerson Street	
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	2016	_103	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	2025	NA YR MO	
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	203d
	County	203b	Cook	. 203e
	(if applicable) City or Town	203c	Evanston	2031
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	2042	⊠STR	
	Estuary		EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		□отн :	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude	205a	42 DEG. 03 MIN. 07 SEC	
	Longitude	205 b		

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٥.	Name the waterway at the point of discharge (see instructions)	2062	North Shore Channel
			For Agency Use For Agency Use
			Major Minor Sub 206c 303e
fall	he discharge is through an out- that extends beyond the shoreline	2065	
	is below the mean low water line, mplete Item 7.		
7.	Offshore Discharge		
	a. Discharge Distance from Shore	207a	NAfeet
	 Discharge Depth Below Water Surface 	2075	NAfeet
	discharge is from a bypass or an overflow applicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA
	a. Bypass Occurrence Check when bypass occurs		
	Wet weather	2081	□ Yes □ No
	Dry weather	208a2	□ Yes □ No
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 		
	Wet Weather	20851	times per year
	Dry weather	208b2	times per year
	c. Bypass Duration Give the average bypass duration in hours.		
	Wet weather	20861	hours
	Dry weather	208c2	hours
-	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.		
	Wet weather	208d1	thousand gallons per incident
	Dry weather	208dZ	thousand gallons per incident
	e. Bypass Reasons Give reasons		
	why bypass occurs.	2084	
	Proceed to Item 11.		
9.	Overflow Discharge (see instructions)		
	a. Overflow Occurrence Check when overflow occurs.		
	Wet weather	209a1	⊠ Yes □ No
	Dry weather	209=2	□Yes ⊠No
	b. Overflow Frequency Give the		
	actual or approximate incidents per year.		
	Wet weather	20951	10times per year
	Dry weather	209b2	times per year

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c.	Overflow Duration Give the average overflow duration in hours.		
	Wet weather	209c1	
	Dry weather	209c2	Hours
d.	Overflow Volume Give the average volume per overflow incident in thousand gallons.		
	Wet weather	20941	thousand gallons per incident
	Dry weather	209d2	thousand gallons per incident
Pro	oceed to Item 11		
10. Se	asonal/Periodic Discharges		Elec S se
а.	Seasonal/Periodic Discharge Frequency If discharge is Inter- mittent from a holding pond, lagoon, etc., give the actual or approximate number of times	210a	We have
	this discharge occurs per year.		
b.	Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence	210ь	thousand gallons per discharge occurrence
	in thousand gallons.		
c.	Seasonal/Periodic Discharge Duration Give the average dura- tion of each discharge occurrence	210c	days
	in days.		THE STATE STATE OF ST
d.	Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when	210d	□JAN □FEB MAR
	the discharge normally occurs.		MAPR MAY JUN
			☑JUL ☑AUG ☑SEP
			MOCT MOV □DEC
11. Di	scharge Treatment		1 8 th 18 th
	Discharge Treatment Description Describe waste abatement prac- tices used on this discharge with a brief narrative. (See instruc- tions)	2112	None
	50E300 • 1	1	
	*		

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	b.	Discharge Treatment Codes Using the codes listed in Table I	2116	
		of the Instruction Booklet,		1
		describe the waste abatement		
		processes applied to this dis-		
		charge in the order in which		
		they occur, if possible.		
		Separate all codes with commas		
		except where slashes are used		
		to designate parallel operations.		
)
if ti	nis c	discharge is from a municipal waste		
		ent plant (not an overflow or		180
byp	ass)	, complete Items 12 and 13		
12.	Pla	ent Design and Operation Manuals		NA
	Ch	eck which of the following are		III
	cu	rrently available		
		Engineering Design Report	212a	
	-			
	h	Operation and Maintenance		
	ь.	Manual	2125	
12	DI	ant Design Data (see instructions)		NA
	a.	Plant Design Flow (mgd.)	213a	mgd
	b.	Plant Design BOD Removal (%)	2135	%
		Direct Desire N. Demonal (9/)	213c	96
	C.	Plant Design N Removal (%)	2136	76
		Plant Design P Removal (%)	213d	%
	Q.	Fight Design F Removal (%)		
		Plant Design SS Removal (%)	2136	%
	G.	Fight Design 33 Removal (N)		·
	4	Plant Began Operation (year)	213f	
		Dagain approximately (2 and)		
	g.	Plant Last Major Revision (year)	213g	
	3.	the state of the s	100000000000000000000000000000000000000	ATT- TO THE REAL PROPERTY.

14. Description of Influent and Effluent (see instructions)



	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	G. Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X					
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027							
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X				
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X	X	+			
BOD 5-day mg/l 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)							
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)			19				
Chlorine-Total Residual mg/l 50060			A 10 185		and the second second	-	

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/l 00500							
Total Dissolved Solids mg/l 70300							
Total Suspended Solids mg/l 00530							
Settleable Matter (Residue) ml/I 00545							
Ammonia (as N) mg/l 00610 (Provide if available)							
Kjeldahl Nitrogen mg/l 00625 (Provide if available)							
Nitrate (as N) mg/l 00620 (Provide if available)							
Nitrite (as N) mg/l 00615 (Provide if available)							
Phosphorus Total (as P) mg/l 00665 (Provide if available)					h :=		
Dissolved Oxygen (DO) mg/l 00300	X			45 7 1 1 1	34 747—2 275—6		

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	380	6		1		

15. Additional Wastewater Characteristics

Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720		Copper 01042		Tin 01102	
Fluoride 00951		Iron 01045		Zinc 01092	
Sulfide 00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002		Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols - 32730	
Barium 01007		Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027					

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment

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FOR AGENCY USE										

17. Additional Information

217	ltem Number	Information
	9	Approximately 60% of overflow intercepted by Mainstream TARP,
-		Phase I, and subsequently treated at Stickney WRP.
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SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	201z	104	
	 Discharge Name Give name of discharge, if any (see instructions) 	2015	Lake Street	3
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	2016	_104_	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	2025	NA YR MO	
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	. 203d
	County	203b	Cook	203e
	(if applicable) City or Town	203c	Evanston	203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	204a	STR	
	Estuary		□ EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		ОТН	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude	205a	42 DEG. 02 MIN. 37 SEC	
	Longitude	205b	87 DEG42 MIN32 SEC	

FOR AGENCY USE									

6.	Discharge Receiving Water Name Name the waterway at the point of discharge (see instructions)	206a	North Shore Channel
			For Agency Use Major Minor Sub 206c For Agency Use 303e
fall or i	he discharge is through an out- that extends beyond the shoreline s below the mean low water line, nplete Item 7.	2065	
7.	Offshore Discharge		
	a. Discharge Distance from Shore	207a	NAfeet
	b. Discharge Depth Below Water Surface	207b	NAfeet
	ischarge is from a bypass or an overflow pplicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA
	a. Bypass Occurrence Check when bypass occurs	EV MANUALIVA IVA	
	Wet weather	2081	☐ Yes ☐ No
	Dry weather	20822	☐ Yes ☐ No
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 		
	Wet Weather	20851	times per year
	Dry weather	208b2	times per year
	c. Bypass Duration Give the average bypass duration in hours.		
	Wet weather	208c1	hours
	Dry weather	20862	hours
	 d. Bypass Volume Give the average volume per bypass incident, in thousand gallons. 		
	Wet weather	20841	thousand gallons per incident
	Dry weather	208dZ	thousand gallons per incident
	e. Bypass Reasons Give reasons		
	why bypass occurs.	208#	
	Proceed to Item 11.		
9.	Overflow Discharge (see instructions)		
	a. Overflow Occurrence Check when overflow occurs.		
	Wet weather	209a1	⊠Yes □ No
	Dry weather	20922	☐ Yes No = = =
	 Overflow Frequency Give the actual or approximate incidents per year. 		
	Wet weather	20951	10 times per year
	Dry weather	209b2	times per year
		5	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

FOR AGENCY USE										

c.	Overflow Duration Give the average overflow duration in hours.									
	Wet weather	209c1	6.4	ours						
	Dry weather	209c2		Hours			perfect to early			
127							H HEE			
d.	Overflow Volume Give the average volume per overflow incident in thousand gallons.					8	8 V			
	Wet weather	209d1	_281_	thou	sand gallor	s per incide	int			
	Dry weather	209d2		thou	sand gallor	s per incide	ent			8
Pr	oceed to item 11									
10. Se	asonal/Periodic Discharges						*****			
a.	Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond, lagoon, etc., give the actual or	210a	t	imes per y	ear		norther we fi			
	approximate number of times this discharge occurs per year.						F10470 201 405 0			
b.	Seasonal/Periodic Discharge Volume Give the average	210ь		thou	erand eatter	e nor dienh	arge occurrence			
	volume per discharge occurrence	2100	-		isand ganor		+			
	in thousand gallons.									
c.	Seasonal/Periodic Discharge Duration Give the average dura- tion of each discharge occurrence in days.	210c		ays			4 4 - 1 - 1 - 4			
				₩ 3	S	* = 1	419 L F 1	2		
d.	Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs.	210d	DJAN	☐ FEB	⊠ MAR	m + €	Part of the second			
			⊠ APR	MAY	MUL	# H		-		
			MIOL	ĭ AUG	X SEP	10	100	E 19		
				□NOV						
							8 (5			
	scharge Treatment Discharge Treatment Description						0.4.4			
a.	Describe waste abatement prac- tices used on this discharge with						00000			
	a brief narrative. (See instruc- tions)	211a	Non	e						_
		lesses.		¥s.						
	*									
					C-Minc					90.00
			-							
					III.			************		-
			-				21-21-20-20-31 N N 11-21-21-21-21-21-21-21-21-21-21-21-21-2			
	LS								518	
			S							
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FOR AGENCY USE								

	b.	Discharge Treatment Codes Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement processes applied to this dis- charge in the order in which	211b			3
		they occur, if possible. Separate all codes with commas except where slashes are used to designate parallel operations.				
		discharge is from a municipal waste		-	: :	
		, complete Items 12 and 13				
12.	Ch	ent Design and Operation Manuals leck which of the following are rrently available		NA		
	a.	Engineering Design Report	2122			
	b.	Operation and Maintenance Manual	212b			
13.	Pla	ant Design Data (see instructions)		NA		
	a.	Plant Design Flow (mgd)	213a	mgd		
	b.	Plant Design BOD Removal (%)	2135	%		
	c.	Plant Design N Removal (%)	213c	%		
	d.	Plant Design P Removal (%)	213d	%		
	e.	Plant Design SS Removal (%)	2136	%		
	f.	Plant Began Operation (year)	213f			
	•	Plant Last Major Revision (year)	213g			

14. Description of Influent and Effluent (see instructions)

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	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X					
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027						×	
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X						
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X					
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X				24		
BOD 5-day mg/l 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)							
OR							
Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)			*		6 15-11 H = 1	1	
Chlorine-Total Residual mg/l 50060			e fates	22 - 120			

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FOR AGENCY USE									
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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent	Effluent							
Parameter and Code 214	Annual Average U Value	Annual Average Value	Eowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type		
Total Solids mg/I 00500						94			
Total Dissolved Solids mg/l 70300									
Total Suspended Solids mg/l 00530									
Settleable Matter (Residue) ml/l 00545									
Ammonia (as N) mg/l 00610 (Provide if available)									
Kjeldahl Nitrogen mg/l 00625 (Provide if available)									
Nitrate (as N) mg/l 00620 (Provide if available)									
Nitrite (as N) mg/1 00615 (Provide if available)									
Phosphorus Total (as P) mg/l 00665 (Provide if available)									
Dissolved Oxygen (DO) mg/l 00300	X	-			R 12		+		

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FOR AGENCY USE									
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15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent, (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720		Copper 01042		Tin 01102	
Fluoride 00951		Iron 01045		Zinc 01092	
Sulfide- 00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002		Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols 32730	
Barium 01007		Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027					

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment failure

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17. Additional Information

7	ltem Number	Information	2: 22:34 (
	9	Approximately 60% of overflow intercepted by Mainstream	TARP,
-		Phase I, and subsequently treated at Stickney WRP.	
5- <u>11-11</u>			
			(1
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STANDARD FORM A-MUNICIPAL

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SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	201a	105	W.
	b. Discharge Name Give name of discharge, if any - (see instructions)	2015	Howard Street	
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	2016	_105	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO	
	b. Discharge to End Date If the dis- charge is scheduled to be discon- tinued within the next 5 years, give the date (within best estimate) the discharge will end. Give rea- son for discontinuing this discharge in Item 17.	2026	NA YR MO	
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	203d
	County	203b	Cook	203e
	(if applicable) City or Town	203c	Skokie	203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	2042	⊠STR	
	Estuary		□EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		□отн	
	If 'other' is checked, specify type	204b	·	
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude *	205a	42 DEG. 01 MIN. 41 SEC	
	Longitude	205b	87_ DEG42 MIN34 SEC	

FOR AGENCY USE									

ь.	Name the waterway at the point of discharge (see instructions)	206a	North Shore Channel
			;
			For Agency Use
			Major Minor Sub 206c 303e
fall	he discharge is through an out- that extends beyond the shoreline is below the mean low water line, mplete Item 7.	2065	
7.	Offshore Discharge a. Discharge Distance from Shore	207a	NAfeet
	a. Discharge Distance from Shore	2012	ieet
	 Discharge Depth Below Water Surface 	207b	<u>NA</u> feet
	discharge is from a bypass or an overflow applicable, and continue with item 11.	point or	is a seasonal discharge from a lagoon, holding pond, etc., complete items 8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA
	a. Bypass Occurrence Check when bypass occurs	41000000000000000000000000000000000000	
	Wet weather	20841	☐ Yes ☐ No
	Dry weather	20822	☐ Yes ☐ No
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 		
	Wet Weather	208b1	times per year
	Dry weather	208bZ	times per year
	 Bypass Duration Give the average bypass duration in hours. 		
	Wet weather	20%c1	hours
	Dry weather	208c2	hours
795	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.		
	Wet weather	20841	thousand gallons per incident
	Dry weather	208dZ	thousand gallons per incident
	e. Bypass Reasons Give reasons why bypass occurs.	208*	2 5 2 2 2 2
	Proceed to Item 11.		
9.	Overflow Discharge (see instructions)		
	a. Overflow Occurrence Check when overflow occurs.		
	Wet weather	209a1	☐ Yes
=373	- Dry weather	20922	☐ Yes
	b. Overflow Frequency Give the actual or approximate incidents		
	per year.		
	Wet weather	20951	
	Dry weather	209b2	Otimes per year

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 Discharge Receiving Water Name Name the waterway at the point o discharge (see instructions) 	f 206a	Whe	eeling Dr	ainage I	Ditch		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 (5).	-	Agency Use			ency Use	
If the discharge is through an out- fall that extends beyond the shoreline or is below the mean low water line, complete Item 7.	2065	Major	Minor Sub	2066	3	338	
7. Offshore Discharge							
a. Discharge Distance from Shore	207a	NA	Afeet				
 Discharge Depth Below Water Surface 	207b	NA	feet				
If discharge is from a bypass or an over as applicable, and continue with item 1		is a seasor	nal discharge fr	om a lagoon,	holding pon	d, etc., complete items 8, 9 or 10,	
8. Bypass Discharge (see instructions)	NA	A		1.00		
 Bypass Occurrence Check when bypass occurs 							
Wet weather	20821	☐ Yes	□ No		i		
Dry weather	208a2	Yes	□ No				
 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 				t in anim			
Wet Weather	20861		times per year				
Dry weather	208b2		times per year		(+)		
c. Bypass Duration Give the		*		,		17 W	
average bypass duration in hou Wet weather	203:1		hours				
Dry weather	20862	5 1913	hours				
d. Bypass Volume Give the average volume per bypass inci- in thousand gallons.	dent,		E E E E		A 34		
Wet weather	20841		thousar	nd gallons pe	r incident		
Dry weather	208dZ		thousar	nd gallons pe	r incident		
e. Bypass Reasons Give reasons why bypass occurs.	2084				(5) V. I.	age to age of	
Proceed to Item 11.							
9. Overflow Discharge (see instructio	ns)						
 a. Overflow Occurrence Check when overflow occurs. 	·					. 7	
Wet weather	209a1	⊠ Yes	□ No				
Dry weather	20912	□Yes	⊠ No				
 Overflow Frequency Give the actual or approximate incidents per year. 	1.04.08080.080.080.08080.00.00			-			1.
Wet weather	20961	2_	times per year		10.885	9.1 70	
Dry weather	209b2		times per year	-			

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F	FOR AGENCY USE										

c.	Overflow Duration Give the average overflow duration in hours.							occurrence		
	Wet weather	209c1	0,	nours						
			0				67			
	Dry weather	209c2		Hours						
d.	Overflow Volume Give the average volume per overflow						55 No. 10			
	incident in thousand gallons. Wet weather	20941	_0	tho	usand gallo	ns per incide	ent -			
	Dry weather	20942	_0	tho	usand gailo	ns per incide	ent			3
P	roceed to Item 11									
10. S	easonal/Periodic Discharges		NA				er wer i Krann			
a.	Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond, lagoon, etc., give the actual or approximate number of times	210a	t	imes per y	ear		Automotive to the			
	this discharge occurs per year.						4 67 7			
b.	. Seasonal/Periodic Discharge					t= 19:	wag wag e			
	Volume Give the average volume per discharge occurrence	2105	-	tho	usand gallo	ns per discha	arge occurrence			
	in thousand gallons.					5. 1	H21 27 6	15 p		
c.	Seasonal/Periodic Discharge Duration Give the average dura-	210c		days			to manifest in a specie			
	tion of each discharge occurrence in days.				5	2027	\$ \$ 6 S S S S S			
d.	. Seasonal/Periodic Discharge Occurrence—Months Check the	218d	DJAN	□FEB	MAR		Programme of the second			
	months during the year when the discharge normally occurs.		□APR	MAY	מטנ	9 8	11 4 1 2 4 1			
	**************************************		DIOL		SEP		an medical			
			□ост	Nov	DEC					
11. D	ischarge Treatment						F1 - 1 - 24 - 1 - 1	00		
	Discharge Treatment Description					128	g (8) = 1000 = 1			
	Describe waste abatement prac- tices used on this discharge with a brief narrative. (See instruc- tions)	211a	1	None	4					
		I								
			***************************************	*****		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
						 				
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					veille in in each					
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	D. Discharge Treatment Codes Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement	2116		
	processes applied to this dis- charge in the order in which they occur, if possible. Separate all codes with commas except where slashes are used to designate parallel operations.			
trea	nis discharge is from a municipal waste tment plant (not an overflow or ass), complete Items 12 and 13		ä	
12.	Plant Design and Operation Manuals Check which of the following are currently available		NA	
	a. Engineering Design Report	2122		
	b. Operation and Maintenance Manual	2125		
13.	Plant Design Data (see instructions)		NA	
	a. Plant Design Flow (mgd.)	213a	mgd	
	b. Plant Design BOD Removal (%)	213b	%	

213c

213d

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213f

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c. Plant Design N Removal (%)d. Plant Design P Removal (%)

e. Plant Design SS Removal (%)

f. Plant Began Operation (year)

g. Plant Last Major Revision (year)

14. Description of Influent and Effluent (see instructions)



	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X					
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027							
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X				
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X			ii ii	4	
BOD 5-day mg/l 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)						-	
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)			+				
Chlorine-Total Residual mg/l 50060			es m² s		ap(2)		

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent			
Parameter and Code 214	Annual Average U Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/l 00500							
Total Dissolved Solids mg/l 70300							
Total Suspended Solids mg/l 00530		*					
Settleable Matter (Residue) ml/l 00545					=		
Ammonia (as N) mg/l 00610 (Provide if available)							
Kjeldahl Nitrogen mg/l 00625 (Provide if available)			,		-2		
Nitrate (as N) mg/l 00620 (Provide if available)		0,					
Nitrite (as N) mg/l 00615 (Provide if available)							
Phosphorus Total (as P) mg/l 00665 (Provide if available)					8		
Dissolved Oxygen (DO) mg/1 00300	X		1 20	v ir se∷j	B B # ≠ ≤ 0 × 0		

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15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent, (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720		Copper 01042		Tin 01102	
Fluoride 00951		Iron 01045		Zinc 01092	
Sulfide 00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002		Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols	
Barium 01007		Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027	+	A STATE OF THE STA			

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

 Plant Controls Check if the following plant controls are available for this discharge

> Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment failure



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17. Additional Information

9 Eliminated under Mainstream TARP, Phase I project. To be utilized for emergency bypass only if the North Side WRP is shut down and the Mainstream TARP is full.	Item Number	Information
utilized for emergency bypass only if the North Side WRP is shut down and the Mainstream TARP is full.	9	Eliminated under Mainstream TARP, Phase I project. To be
is shut down and the Mainstream TARP is full.		utilized for emergency bypass only if the North Side WRP
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STANDARD FORM A-MUNICIPAL

FOR AGENCY USE

SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	201a	106	
	 Discharge Name Give name of discharge, if any (see instructions) 	2015	Morse Avenue	
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	201c	106	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	202b	NA YR MO	
3,	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	_ 2034
	County	203b	Cook	_ 203e
	(if applicable) City or Town	203c	Lincolnwood	_ 203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	204a	⊠ STR	
	Estuary		□EST	
	Lake		LKE	
	Ocean		□oce	
	Well (Injection)		WEL	
	Other		□отн	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long, State the precise location of the point of discharge to the nearest second, (see instructions)			
	Latitude	205a	42 DEG. 00 MIN. 24 SEC	100
	Longitude	205b	87 DEG42 MIN38 SEC	

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6.	Discharge Receiving Water Name Name the waterway at the point of discharge.(see instructions)	206a	Nort	th Shore	Channel		A		(d
			-	Agency Use Minor Sub	206c		gency Use 303e	7	
fall or i	he discharge is through an out- that extends beyond the shoreline is below the mean low water line, inplete Item 7.	2065							
7.	Offshore Discharge								
	a. Discharge Distance from Shore	2072	NA.	feet					
	b. Discharge Depth Below Water Surface	207b	NA	feet		5			
	lischarge is from a bypass or an overflow papplicable, and continue with item 11.	point or i	is a seasor	nal discharge fr	om a lagoon,	holding po	nd, etc., con	nplete items	8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA						
	a. Bypass Occurrence Check when bypass occurs	•							
	Wet weather	20821	☐ Yes	□ No					
	Dry weather	20822	Yes	□ No					
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 								
	Wet Weather	20851	-	times per year				2	
	Dry weather	208b2		times per year					
	c. Bypass Duration Give the average bypass duration in hours.								
	Wet weather	208c3		hours					
	Dry weather	208c2		hours					
-	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.								
	Wet weather	20841		thousa	nd gallons pe	r incident			
	Dry weather	20842		thousa	nd gallons pe	r incident			
	e. Bypass Reasons Give reasons why bypass occurs.	2054			4				
	Proceed to Item 11.								
9.	Overflow Discharge (see instructions)								
	 a. Overflow Occurrence Check when overflow occurs. 								:•
	Wet weather	20921	⊠Yes	□ No					
	Dry weather	209:2	□Yes	⊠ No					
	b. Overflow Frequency Give the actual or approximate incidents				-				
	per year.		10						
	Wet weather	20951	10	times per year					
	Dry weather	209b2		times per year					

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 Overflow Duration Give the average overflow duration in hours. 		
Wet weather	20901	6.4 hours
Dry weather	209c2	Hours
d. Overflow Volume Give the average volume per overflow incident in thousand gallons.		A CONTRACTOR OF THE CONTRACTOR
Wet weather	209d1	358thousand gallons per incident
Dry weather	209d2	thousand gallons per incident
Proceed to Item 11		
10. Seasonal/Periodic Discharges		17796 P III
 Seasonal/Periodic Discharge Frequency If discharge is intermittent from a holding pond, lagoon, etc., give the actual or 	210a	times per year
approximate number of times this discharge occurs per year.		
b. Seasonal/Periodic Discharge		enter the transfer of the second seco
Volume Give the average volume per discharge occurrence	210b	thousand gallons per discharge occurrence
in thousand gallons.		A CONTRACTOR OF THE CONTRACTOR
 Seasonal/Periodic Discharge Duration Give the average dura- 	210c	days - ಪ್ರಾಚಿತ್ರಗಳ ಅವರಿಗೆ ಕರ್ಮಿಸುವ ಸರ್ವದ
tion of each discharge occurrence in days.		the state of the s
d. Seasonal/Periodic Discharge Occurrence—Months Check the	2104	□JAN □FEB ⊠MAR
months during the year when the discharge normally occurs.		⊠APR ⊠MAY ⊠JUN
		MJUL MAUG MSEP
		⊠OCT ⊠NOV □DEC
		2 -
Discharge Treatment Description Describe waste abatement prac-		and the first programmers of the second
tices used on this discharge with a brief narrative. (See instruc- tions)	211a	None
	Lagrana	
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	b.	Discharge Treatment Codes Using the codes listed in Table I	2116				
		of the Instruction Booklet,		A			
		describe the waste abatement processes applied to this dis-				 	
		charge in the order in which they occur, if possible.		2		 	
		Separate all codes with commas					
		except where slashes are used to designate parallel operations.		-			
		to designate paraties operations.		-		 	
				-			
		discharge is from a municipal waste					
		ent plant (not an overflow or , complete Items 12 and 13					
		• = =					
2.		nt Design and Operation Manuals eck which of the following are		NA			
		rrently available					
	a.	Engineering Design Report	212a				
	h	Operation and Maintenance					
		Manual	212b				
2	Di:	nt Design Data (see instructions)		NA			
٠.		Plant Design Flow (mgd.)	213a		mgd		
	999A						
	b.	Plant Design BOD Removal (%)	2135		%		
	c.	Plant Design N Removal (%)	213c		%		
	đ.	Plant Design P Removal (%)	213d		%		
	e.	Plant Design SS Removal (%)	2134		%		
	f.	Plant Began Operation (year)	213f				

14. Description of Influent and Effluent (see instructions)

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	Influent			Effluent			
Parameter and Code 214	Annual Average	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X					
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027						4	
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X	j. 14	* /		
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X				
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X		X	77.49			
BOD 5-day mg/l 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)							
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)							
Chlorine-Total Residual mg/l 50060			- 13" + -				

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent		27134	. Pilliot
Parameter and Code 214	Annual Average yalue	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/l 00500							
Total Dissolved Solids mg/l 70300						100	
Total Suspended Solids mg/l 00530							
Settleable Matter (Residue) ml/1 00545					: *:		
Ammonia (as N)	121					2	
Kjeldahl Nitrogen mg/l 00625 (Provide if available)							
Nitrate (as N) mg/l 00620 (Provide if available)	5.				u v		
Nitrite (as N) mg/l 00615 (Provide if available)					- 0 two		
Phosphorus Total (as P) mg/l 00665 (Provide if available)					*		
Dissolved Oxygen (DO) mg/l 00300	X					. +	

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FOR AGENCY USE										

15. Additional Wastewater Characteristics

Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720		Copper 01042		Tin 01102	
Fluoride 00951		Iron 01045		Zinc 01092	
Sulfide-00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002		Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols 32730	
Barium 01007		Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027		7			

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

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 Plant Controls Check if the following plant controls are available for this discharge

> Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment failure

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17. Additional Information

17	Item Number	Information
=	9	Approximately 60% of overflow intercepted by Mainstream TARP,
_		Phase I, and subsequently treated at Stickney WRP.
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SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates,

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	a. Discharge Serial No.	201a	107					
	(see instructions) b. Discharge Name	201b	North Bran	nch Pumpir	ng Station			
	Give name of discharge, if any (see instructions)	2015						
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	201c	107_					
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO				, , , , , , , , , , , , , , , , , , ,	
	b. Discharge to End Date If the dis-	202ъ	NA	. 1				
	charge is scheduled to be discon- tinued within the next 5 years,		YR MO			1 1	2	SI .
	give the date (within best estimate) the discharge will end. Give rea- son for discontinuing this discharge			100			- 1	
	in Item 17.							
3.	Discharge Location Name the political boundaries within which the point of discharge is located:						= 2	Agency Use
	State	203a	Illinois				203d .	
	County	203b	Cook				203e	
	(if applicable) City or Town	203c	Chicago		. 27.0		203f	
4.	Discharge Point Description (see instructions)							
	Discharge is into (check one)		_					
	Stream (includes ditches, arroyos, and other watercourses)	2042	⊠ STR		114			
	Estuary		□ EST					
	Lake		LKE					
	Ocean		OCE					
	Well (Injection)		WEL					
	Other		□отн					
	If 'other' is checked, specify type	204b						
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)							
	Latitude	205a	_41 DEG.	58 MIN.	09 SEC			
	Longitude	205b	87 DEG.	42 MIN.	04 SEC			

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6.	Discharge Receiving Water Name Name the waterway at the point of	206a	Nor	th Branch	of Chi	cago F	River			327	
	discharge.(see instructions)										
					1 1 1	-		alestea.			
				Agency Use Minor Sub	206c	For	Agency L 303e	Jse			
fall or i	he discharge is through an out- that extends beyond the shoreline s below the mean low water line, nplete Item 7.	2065] -						
7.	Offshore Discharge										
	a. Discharge Distance from Shore	207a	_NA	feet							
	b. Discharge Depth Below Water Surface	207b	_NA_	feet			١,				
If d	ischarge is from a bypass or an overflow pplicable, and continue with item 11.	point or	is a seasor	nal discharge fr	om a lagoon	, holding	pond, etc.,	complete	items 8, 9	or 10,	
8.	Bypass Discharge (see instructions)		NA			1 2113		- 50			
	a. Bypass Occurrence Check when bypass occurs		-1,22					- 21			
	Wet weather	2081	□Yes	□ No				****			
	Dry weather	20822	☐ Yes	□ No					7		
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 				e - ser se		4-14-14-14-14-14-14-14-14-14-14-14-14-14		- L		
	Wet Weather	20861		times per year			5	- W			+
	Dry weather	208b2		times per year		3					
	c. Bypass Duration Give the average bypass duration in hours.				5 0			13 - 2 K 3 - 4 L	1421 J		
	Wet weather	208c1		.hours				30.5			
(re	Dry weather	20852		hours		Š.					
žš.	d. Bypass Volume Give the				10.00	8					
-	average volume per bypass incident, in thousand gallons.				** 1						
*3	Wet weather	208d1		thousar	nd gallons pe	er incident	t			8.0	
	Dry weather	208d2		thousar	nd gallons pe	er incident	t	e 11 %			t
	e. Bypass Reasons Give reasons why bypass occurs.	2084			pe 16	1 531 5	5.00	3 Th.	9-3-6	14. 1	
	595										
	Proceed to Item 11.										
6											
9.	Overflow Discharge (see instructions) a. Overflow Occurrence Check when overflow occurs.								100		
	Wet weather	209a1		□ No							
(-)	Dry weather	20922	□Yes	⊠ No	e, (+ ×			40		1.5	
	b. Overflow Frequency Give the actual or approximate incidents				-		úr.		134 E # +5		
	per year. Wet weather	209b1	10	times per year			25			311	
	Dry weather	20952		times per year	11 240 140	1 85.2			18	1 -32.	

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FOR AGENCY USE									

c.	Overflow Duration Give the average overflow duration in			
	hours.	L	1 6 /	
	Wet weather	209c1	6.4 hours	
	Dry weather	20962		
d	Overflow Volume Give the		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	average volume per overflow incident in thousand gallons.			
	Wet weather	209d1	657 thousand gallons per incident	
	Dry weather	209d2	thousand gallons per incident	
Pro	oceed to Item 11			
10. Se	asonal/Periodic Discharges			
a.	Seasonal/Periodic Discharge			
	Frequency If discharge is inter- mittent from a holding pond,	210a		
	lagoon, etc., give the actual or		alabrais no la section de la companya de la company	
	approximate number of times		DM-45-AF-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-	
	this discharge occurs per year.		THE COLUMN	
b.	Seasonal/Periodic Discharge		्रों किया । संदर्भ पर सर्वे क्राया स्था क्रिया स्था क्रिया स्था क्रिया स्था क्रिया स्था क्रिया स्था क्रिया स्थ	
	Volume Give the average volume per discharge occurrence	210b	thousand gallons per discharge occurrence	
	in thousand gallons.		exercises of up at the part of	
c.	Seasonal/Periodic Discharge Duration Give the average dura-	210c	daysdays	
	tion of each discharge occurrence in days.		(bpm) we to come	
d.	Seasonal/Periodic Discharge	2184	□JAN □FEB ⊠MAR	
	Occurrence—Months Check the months during the year when the discharge normally occurs.	2100	SAPR SMAY SJUN	
	the discharge normany occurs.		⊠JUL ⊠AUG ⊠SEP	
			SOCT NOV DEC	
			1,6% 23 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	scharge Treatment			
а.	Discharge Treatment Description Describe waste abatement prac- tices used on this discharge with			
	a brief narrative. (See instruc- tions)	211=	None	
	*			
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			See the second s	- IIIo
				
				

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	Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement processes applied to this discharge in the order in which they occur, if possible. Separate all codes with commas except where slashes are used to designate parallel operations.	2116			
trea	nis discharge is from a municipal waste tment plant (not an overflow or ass), complete Items 12 and 13				
12.	Plant Design and Operation Manuals Check which of the following are currently available		NA		
	a. Engineering Design Report	212a			
	b. Operation and Maintenance Manual	2126			
13.	Plant Design Data (see instructions)		NA	A Parties	4
	a. Plant Design Flow (mgd)	213a		_ mgd	

2135

213c

213d 213d

213f

213g

b. Plant Design BOD Removal (%)
 c. Plant Design N Removal (%)

d. Plant Design P Removal (%)

e. Plant Design SS Removal (%)

f. Plant Began Operation (year)

g. Plant Last Major Revision (year)

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14. Description of Influent and Effluent (see instructions)



							-		
	Influent			Effluent					
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type		
Flow Million gallons per day 50050									
pH Units 00400	X	X		***************************************					
Temperature (winter) ° F 74028									
Temperature (summer) ° F 74027				e.		₩ **			
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X	- 4:	4 + 4 +				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X	**					
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X		19 + 1	44 1 8 22				
BOD 5-day mg/l 00310									
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)				4.1144					
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)		-							
Chlorine-Total Residual mg/l 50060	- 4 X 1 A 1 A	es il sale ne s			to also rate and the construction of				

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent		Effluent						
Parameter and Code 214	Annual Average Value	Annual Average	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type		
Total Solids mg/l 00500									
Total Dissolved Solids mg/l 70300									
Total Suspended Solids mg/l 00530						1 1 8			
Settleable Matter (Residue) ml/l 00545						- 1.			
Ammonia (as N) mg/l 00610 (Provide if available)	s 1 152	-			4 E	2			
Kjeldahl Nitrogen mg/I 00625 (Provide if available)		-	*		- 1	in#1			
Nitrate (as N) mg/I 00620 (Provide if available)					0.600				
Nitrite (as N) mg/l 00615 (Provide if available)						inc e			
Phosphorus Total (as P) mg/l 00665 (Provide if available)					8 % 4 ¹				
Dissolved Oxygen (DO) mg/l 00300				* 11 \$ 14 \$ 11 \$	eng Fil	5.1			

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15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720	-	Copper 01042	-	Tin 01102	
Fluoride 00951		Iron 01045	- 4	Zinc 01092	
Sulfide- 00745		Lead 01051	100	Algicides* 74051	
Aluminum-		Manganese 01055	-	Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002	T N	Molybdenum 01062	41	Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols 32730	
Barium 01007		Selenium 01147	-	Surfactants 38260	
Boron 01022	4	Silver 01077		Radioactivity* 74050	
Cadmium 01027			*		

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

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 Plant Controls Check if the following plant controls are available for this discharge

> Alternate power source for major pumping facility including those for collection system lift stations Alarm for power or equipment

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17. Additional Information

failure

17	Item Number	Information
	9	Approximately 60% of overflow intercepted by Mainstream TARP,
4		Phase I, and subsequently treated at Stickney WRP.
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SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section I, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED, REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

(e	a. Discharge Serial No. (see instructions)	201a	108	
	 Discharge Name Give name of discharge, if any (see instructions) 	201b	Wheeling Drainage Ditch	-
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this discharge (Item 4, Section I) provide previous discharge serial number.	2016	108	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	2022	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	202b	NA YR MO	
3.	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	209d
	County	2035	Cook	203e
	(if applicable) City or Town	203c	Wheeling	203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	204a	⊠STR	
	Estuary		□ EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		□отн	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long. State the precise location of the point of discharge to the nearest second. (see instructions)			AND THE PROPERTY OF THE PROPER
	Latitude	205a	42 DEG. 07 MIN. 53 SEC	AT AT A TOP TO
	Longitude	205 b	87 DEG54 MIN32 SEC	- 1

Discharge Facial Na. and Name

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Dry weather C. Overflow Volume Give the average volume per overflow incident in thousand gallons. Wet weather Dry weather Dry weather Proceed to Item 1 10. Seasonal/Periodic Discharge Frequency If discharge is little riaspon, etc., give the actual or approximate number of times this discharge occurs per year. b. Seasonal/Periodic Discharge Volume Give the average duration of each circharge occurrence in novasin gallons. c. Seasonal/Periodic Discharge Occurrence Months Chock the four fine the average duration of each circharge occurrence in days. d. Seasonal/Periodic Discharge Cocurrence—Months Chock the four fine the average duration of each circharge occurrence in days. d. Seasonal/Periodic Discharge Cocurrence—Months Chock the fine with the discharge normally occurs. 11. Discharge Treatment Description Describe wate abatement practice used on this discharge with size used on the discharge with size used to the discharge with size used to th	average overflow duration in hours.		Data Not Available	
Dry weather d. Overflow Volume Give the average volume per overflow incident in thousand gallons. Wet weather Dry weather Proceed to Item 11 10. Seasonal/Periodic Discharges a. Seasonal/Periodic Discharges Frequency If discharge is intermittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurrence in thousand gallons. D. Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand gallons. C. Seasonal/Periodic Discharge Duration Give the average duration of set of discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 11. Discharge Treatment Describe waste abatement practices used on this discharge with a brief narrative. (See Instructions) NA NA 10. MA 10. MA 210. Limes per year 210. Limes per discharge occurrence at thousand gallons per incident NA 10. Limes per year 11. Discharge Treatment Apr Gays 11. Discharge Treatment Describe waste abatement practices used on this discharge with a brief narrative. (See Instructions) NOne	Wet weather	20901	hours	
d. Overflow Volume Give the average volume per overflow incident in thousand gallons. Wet weather Dry weather Proceed to Item 11 10. Seasonal/Periodic Discharges a. Seasonal/Periodic Discharges Frequency If discharge is intermittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurrence in thousand gallons per incident NA 210a times per year NA 210b Limes per year with a brief narrative. (See Instructions) Data Not Available Lineusand gallons per incident NA NA 210a times per year times per year a bischarge occurrence in thousand gallons per incident NA 210b Limes per year times per year times per year times per year 110c Limes per year 110c Limes per year Limes per incident	appear women interestion.			
d. Overflow Volume Give the average volume per overflow incident in thousand gallons. Wet weather Dry weather Dry weather Proceed to Item 11 10. Seasonal/Periodic Discharges a. Seasonal/Periodic Discharge Frequency If discharge in Intermittent from a holding point, lagoon, etc., give the actual or approximate number of times this discharge occurrence in thousand gallons per incident NA 210a Thousand gallons per incident NA 210b Thousand gallons per incident NA 210c Times per year Times per	Dry weather	209c2	Hours	(100)
Dry weather Dry weather Proceed to Item 11 10. Seasonal/Periodic Discharges a. Seasonal/Periodic Discharge is Intermittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurrence in thousand gallons, etc. discharge occurrence in thousand gallons, etc. discharge occurrence in thousand gallons per discharge Volume Give the average volume per discharge occurrence in thousand gallons per discharge occurrence volume give the average duration of each discharge occurrence. 210b. 210c. 210c. 210c. 210d. 210d	average volume per overflow		Data Not Available	
Proceed to Item 11 10. Seasonal/Periodic Discharges a. Seasonal/Periodic Discharge Frequency If discharge is intermittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurs per year. b. Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand gallons. c. Seasonal/Periodic Discharge Duration Give the average duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 210d	Wet weather	20941	thousand gallons per incide	nt
Proceed to Item 11 10. Seasonal/Periodic Discharges a. Seasonal/Periodic Discharge Frequency If discharge intermittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurs per year. b. Seasonal/Periodic Discharge Volume Give the average evolume per discharge occurrence in thousand gallons. c. Seasonal/Periodic Discharge Duration Give the average duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 210d JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC None	Daywatthan		*	27 Pr. W
a. Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurrence in thousand gallons. C. Seasonal/Periodic Discharge Duration Give the average dura- tion of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 2100		20902	thousand gallons per incide	nt
a. Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurrence in thousand gallons. C. Seasonal/Periodic Discharge Duration Give the average dura- tion of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 2100	10. Seasonal/Periodic Discharges		NA	
## Trequency If discharge is intermittent from a holding pond, lagoon, etc., give the actual or approximate number of times this discharge occurs per year. D. Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand gallons. C. Seasonal/Periodic Discharge Duration Give the average duration of each discharge occurrence in days. D. Seasonal/Periodic Discharge Occurrence in days. D. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) See Instructions See Instruc				
approximate number of times this discharge occurs per year. b. Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand gallons. c. Seasonal/Periodic Discharge Duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence in days. d. Seasonal/Periodic Discharge Occurrence in days. d. Seasonal/Periodic Discharge Occurrence in days. 1. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) 210c 210c 210c 210c 210c 210c Mays 210c Adys ANA SEE A	Frequency If discharge is inter-	210a		distribute to
b. Seasonal/Periodic Discharge Volume Give the average volume per discharge occurrence in thousand gallons. c. Seasonal/Periodic Discharge Duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 210d —	approximate number of times			
Volume Give the average volume per discharge occurrence in thousand gallons. c. Seasonal/Periodic Discharge Duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 210d	THE RESERVE AND THE RESERVE AN		D 24	
volume per discharge occurrence in thousand gallons. C. Seasonal/Periodic Discharge Duration Give the average duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 210d		210h		
C. Seasonal/Periodic Discharge Duration Give the average duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 210d JAN FEB MAR MAY JUN JUL AUG SEP OCT NOV DEC 11. Discharge Treatment a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None	volume per discharge occurrence	1 2100	triousand garions per discha	HATCH RESULTED TO STATE OF THE RESULTED TO STATE OF THE S
Duration Give the average duration of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 219d JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC 11. Discharge Treatment a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None	in thousand gallons.		*** A. (
tion of each discharge occurrence in days. d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 2184 JAN FEB MAR MAY JUN JUL AUG SEP OCT NOV DEC 11. Discharge Treatment 2184 APR MAY JUN DEC OCT NOV DEC NOV DEC Nov DEC None			-2 -2	
d. Seasonal/Periodic Discharge Occurrence—Months Check the months during the year when the discharge normally occurs. 218d JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC 11. Discharge Treatment a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None		2106		
Occurrence—Months Check the months during the year when the discharge normally occurs. APR	in days.		westernes and	Daymer March Charles & S.
months during the year when the discharge normally occurs. APR				(54) 4-60-4-1 2.23 -1-1-12 12-1-1
JUL AUG SEP OCT NOV DEC 11. Discharge Treatment a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None		2184	UJAN ∐FEB ∐MAR	Comprehensión interactions in a
JUL AUG SEP OCT NOV DEC 11. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None	the discharge normally occurs.		□APR □MAY □JUN	
11. Discharge Treatment a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None			□JUL □AUG □SEP	Mental Part Part Control
a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None			DOCT DNOV DDEC	N 10-5 F 21 X V 8+2 X
a. Discharge Treatment Description Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None	g ^e			San was and San San
Describe waste abatement practices used on this discharge with a brief narrative. (See instructions) None	11. Discharge Treatment			
tions) 211a None	Describe waste abatement prac-		e s Set	Protection of the state of the
		2112	None	
	tions,	1		
	4		Value and the second se	V
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b.	Discharge Treatment Codes						
	Using the codes listed in Table I						
	of the Instruction Booklet,						
	describe the waste abatement						
	processes applied to this dis-						
	charge in the order in which						
	they occur, if possible.						
	Separate all codes with commas						
	except where slashes are used						
	to designate parallel operations.						

1b -				
-			 	
_	100000	77100		

If this discharge is from a municipal waste treatment plant (not an overflow or bypass), complete Items 12 and 13

 Plant Design and Operation Manuals Check which of the following are currently available

- a. Engineering Design Report
- D. Operation and Maintenance Manual
- 13. Plant Design Data (see instructions)
 - a. Plant Design Flow (mgd.)
 - b. Plant Design BOD Removal (%)
 - c. Plant Design N Removal (%)
 - d. Plant Design P Removal (%)
 - e. Plant Design SS Removal (%)
 - f. Plant Began Operation (year)
 - g. Plant Last Major Revision (year)

	NA	
212a		
2125		
213a	NA	mga
2135		%
213c	-	%
2134		%

2136

213f

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14. Description of Influent and Effluent (see instructions)



Carlotte March 1

	Influent			Effluent			
Parameter and Code 214	Annual Average U Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050				-			
pH Units 00400	X	X					
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027				II ph			
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X		7 8		
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X	-			
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X				The state of the		
BOD 5-day mg/I 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available) OR			3 100 40	1			
Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)		-	× == ===		a an I		
Chlorine-Total Residual mg/l 50060	ontaras Tampaa						

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent			
Parameter and Code 214	Annual Average	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/l 00500							
Total Dissolved Solids mg/l 70300							
Total Suspended Solids mg/l 00530					<u>£</u>		
Settleable Matter (Residue) ml/l 00545			11 10	1	a V	4	
Ammonia (as N) mg/l 00610 (Provide if available)				_	Carl Variable	72	
Kjeldahl Nitrogen mg/l 00625 (Provide if available)					2.4		
Nitrate (as N) mg/l 00620 (Provide if available)			¥		180,000 0		
Nitrite (as N) mg/l 00615 (Provide if available)					H	ыр	
Phosphorus Total (as P) mg/l 00665 (Provide if available)		-			3.5		
Dissolved Oxygen (DO) mg/l 00300	X			ν .			

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District Control (1)

15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720		Copper 01042		Tin 01102	
Fluoride 00951	- 1	Iron 01045	-	Zinc 01092	
Sulfide 00745		Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097	-	Mercury 71900		Oil and grease 00550	
Arsenic 01002	2	Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols	
Barium 01007		Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027			=		

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

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	Plant Controls Check ing plant controls are a for this discharge Alternate power source pumping facility include for collection system li Alarm for power or eq failure Additional Information	e for major ding those ift stations uipment APS	FOR AGENCY USE
217	Item	Information	
25.75± 1 3	Number 9	Excess I/I overflow	
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SECTION II. BASIC DISCHARGE DESCRIPTION

Complete this section for each present or proposed discharge indicated in Section 1, Items 7 and 8, that is to surface waters. This includes discharges to other municipal sewerage systems in which the waste water does not go through a treatment works prior to being discharged to surface waters. Discharges to wells must be described where there are also discharges to surface waters from this facility. Separate descriptions of each discharge are required even if several discharges originate in the same facility. All values for an existing discharge should be representative of the twelve previous months of operation. If this is a proposed discharge, values should reflect best engineering estimates.

ADDITIONAL INSTRUCTIONS FOR SELECTED ITEMS APPEAR IN SEPARATE INSTRUCTION BOOKLET AS INDICATED. REFER TO BOOKLET BEFORE FILLING OUT THESE ITEMS.

1.	Discharge Serial No. and Name a. Discharge Serial No. (see instructions)	201a	_109_	
	b. Discharge Name Give name of discharge, if any - (see instructions)	2015	Rand Road	
	c. Previous Discharge Serial No If a previous NPDES permit application was made for this dis- charge (Item 4, Section I) provide previous discharge serial number.	2016	_109	
2.	Discharge Operating Dates a. Discharge to Begin Date If the discharge has never occurred but is planned for some future date, give the date the discharge will begin.	202a	NA YR MO	
	b. Discharge to End Date If the discharge is scheduled to be discontinued within the next 5 years, give the date (within best estimate) the discharge will end. Give reason for discontinuing this discharge in Item 17.	202Ъ	NA YR MO	
3,	Discharge Location Name the political boundaries within which the point of discharge is located:			Agency Use
	State	203a	Illinois	203d
	County	203b	Cook	_ 203e
	(if applicable) City or Town	203c	DesPlaines	_ 203f
4.	Discharge Point Description (see instructions) Discharge is into (check one)			
	Stream (includes ditches, arroyos, and other watercourses)	2042	⊠STR	
	Estuary		EST	
	Lake		LKE	
	Ocean		OCE	
	Well (Injection)		WEL	
	Other		□отн	
	If 'other' is checked, specify type	204b		
5.	Discharge Point — Lat/Long, State the precise location of the point of discharge to the nearest second. (see instructions)			
	Latitude	205a	42 DEG. 02 MIN. 39 SEC	
	Longitude	205 b		

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6.	Discharge Receiving Water Name Name the waterway at the point of discharge (see instructions)	206a	De	sPlaines	River		5	3
	ig = mea		000000000000000000000000000000000000000	Agency Use Minor Sub	206c	Fo	r Agency Use 303e	
fall or	the discharge is through an out- I that extends beyond the shoreline is below the mean low water line, implete Item 7.	2065						
7.	Offshore Discharge							
	a. Discharge Distance from Shore	207a	NA	feet				
	b. Discharge Depth Below Water Surface	207b	NA	feet			¥.	
lf c	discharge is from a bypass or an overflow applicable, and continue with item 11.	point or	is a seaso	nal discharge fro	om a lagoon	, holding	pond, etc., complete items	8, 9 or 10,
8.	Bypass Discharge (see instructions)		NA					
	a. Bypass Occurrence Check when bypass occurs							
	Wet weather	208a1	☐ Yes	□ No		1		
	Dry weather	20812	☐ Yes	□ No		Land	114 N V = 9190	IN REST
	 Bypass Frequency Give the actual or approximate number of bypass incidents per year. 				24.5			e a
	Wet Weather	20851		times per year			New Allendary	
	Dry weather	208b2		times per year			* ·	
	c. Bypass Duration Give the average bypass duration in hours.				34			K K 1
	Wet weather	208c1		hours				
00	Dry weather	208c2		hours		E1 (24)		
4. 90	d. Bypass Volume Give the average volume per bypass incident, in thousand gallons.			E ESTA	100 (00)			
	Wet weather	20841		thousan	d gallons pe	er inciden	t	0 5 E 00
	Dry weather	208d2		thousan	d gallons pe	er inciden	t	
	e. Bypass Reasons Give reasons					2.5-4	9 AV E FO WAS 1959	
	why bypass occurs.	208+	-					
			-					
	Proceed to Item 11.							
9.	Overflow Discharge (see instructions)							
	 a. Overflow Occurrence Check when overflow occurs. 							1042 W
	Wet weather	209a1	⊠ Yes	□ No				
	- Dry weather	20912	☐ Yes -	⊠No -		(4.7)	# #	1 1 6 5
	 Overflow Frequency Give the actual or approximate incidents per year. 			19		\$ \$ \$		
	Wet weather	20951	96	times per year			Table 1	Sept. No.
	Dry weather	209b2		times per year	12.2	-	di di	

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c.	Overflow Duration Give the average overflow duration in hours.							
	Wet weather	209c1	15.9	nours			ey so a transfer of the	
	Dry weather	209c2		Hours			or Bellet 1 1 Meter at the second of the sec	
d.	Overflow Volume Give the average volume per overflow incident in thousand gallons.						d plant that the life of the l	
	Wet weather	20941	899	thou	sand gallo	ons per incide	ent Zinch Tennen	
	Dry weather	209d2		thou	usand gallo	ons per incide		
Pr	oceed to Item 11							
10. Se	asonal/Periodic Discharges						stree itematically and the second	
a.	Seasonal/Periodic Discharge Frequency If discharge is inter- mittent from a holding pond,	210a	1	times per y	ear	4	The server as	+
	lagoon, etc., give the actual or approximate number of times this discharge occurs per year.						Aleman and Teneral English (Ed.) (1) and (1) and (2) and (2) and (3) and (4)	***
b.	Seasonal/Periodic Discharge Volume Give the average	210b		th o	usand calls	ne nor disch	 tell two-digradisting P is a same occurrence 	
	volume per discharge occurrence	2100			isand gand	ins per discin	europhant ext or a state.	
	in thousand gallons.				200	7.1.	la sevent	
c.	Seasonal/Periodic Discharge Duration Give the average dura-	210c		days		4	terminate with the late of	3
	tion of each discharge occurrence in days.		-	3465.30	+ - + + + + + + + + + + + + + + + + + +	!: ·</td <td>(pin) we suggest to a n</td> <td></td>	(pin) we suggest to a n	
d.	Seasonal/Periodic Discharge Occurrence—Months Check the	2184	DJAN	FEB	MAR	1 50 457 1 57 5 1	N ²) roedet Cabe(⊕C → ¹ r	
	months during the year when the discharge normally occurs.		⊠ APR	X MAY	MUL		TO THE COURS OF THE STATE OF TH	
			⊠JUL	AUG	X SEP	#4 K.	Mandalogical sections of section 1	TV.
	2		⊠ост	⊠ NOV	⊠ DEC	5342	ally arms to below also the so	
11 D	scharge Treatment				18013-00	0.7	State and and drawn in	
	Discharge Treatment Description Describe waste abatement prac-					45	grand a resource, the section of	
	tices used on this discharge with a brief narrative. (See instruc- tions)	2112	Non	ne				
		I			d			
	,							
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	b. Discharge Treatment Codes Using the codes listed in Table I of the Instruction Booklet, describe the waste abatement processes applied to this discharge in the order in which they occur, if possible. Separate all codes with commas	2116				
	except where slashes are used to designate parallel operations.		-			
trea	his discharge is from a municipal waste tment plant (not an overflow or ass), complete Items 12 and 13					
12.	Plant Design and Operation Manuals Check which of the following are currently available		NA		,	
	a. Engineering Design Report	2122		4		
	b. Operation and Maintenance Manual	212b				

NA

mgd

213a

2135

213c

213d

2136 213f

2139

b. Discharge Treatment Codes

13. Plant Design Data (see instructions)

b. Plant Design BOD Removal (%)

c. Plant Design N Removal (%)

d. Plant Design P Removal (%)

e. Plant Design SS Removal (%)

f. Plant Began Operation (year) g. Plant Last Major Revision (year)

a. Plant Design Flow (mgd.)

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14. Description of Influent and Effluent (see instructions)



	Influent			Effluent			
Parameter and Code 214	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Flow Million gallons per day 50050							
pH Units 00400	X	X					
Temperature (winter) ° F 74028							
Temperature (summer) ° F 74027							
Fecal Streptococci Bacteria Number/100 ml 74054 (Provide if available)	X	X	X				
Fecal Coliform Bacteria Number/100 ml 74055 (Provide if available)	X	X	X				
Total Coliform Bacteria Number/100 ml 74056 (Provide if available)	X	X	X				
BOD 5-day mg/l 00310							
Chemical Oxygen Demand (COD) mg/l 00340 (Provide if available)							
OR Total Organic Carbon (TOC) mg/1 00680 (Provide if available) (Either analysis is acceptable)		-14 E				6.4	
Chlorine-Total Residual mg/l 50060		× 1111 102	er i d -a	in consession			

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14. Description of Influent and Effluent (see instructions) (Continued)

	Influent			Effluent	AVIO 30		
Parameter and Code	Annual Average Value	Annual Average Value	Lowest Monthly Average Value	Highest Monthly Average Value	Frequency of Analysis	Number of Analyses	Sample Type
Total Solids mg/1 00500							
Total Dissolved Solids mg/l 70300							
Total Suspended Solids mg/l 00530			1			RE-VI	
Settleable Matter (Residue) ml/l 00545			4,14	7	Н	٥	300 14 3 3
Ammonia (as N) mg/l 00610 (Provide if available)			-	,	# 77°	2	1 1
Kjeldahl Nitrogen mg/l 00625 (Provide if available)				2.5	- = 11		3
Nitrate (as N) mg/l 00620 (Provide if available)					7 = ±	,	
Nitrite (as N) mg/l 00615 (Provide if available)						1 12	2
Phosphorus Total (as P) mg/l 00665 (Provide if available)	-				-		
Dissolved Oxygen (DO) mg/1 00300	X				1 7 - 7 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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15. Additional Wastewater Characteristics Check the box next to each parameter if it is present in the effluent. (see instructions)

Parameter (215)	Present	Parameter (215)	Present	Parameter (215)	Present
Bromide 71870		Cobalt 01037		Thallium 01059	
Chloride 00940		Chromium 01034		Titanium 01152	
Cyanide 00720	-	Copper 01042		Tin 01102	
Fluoride 00951		Iron 01045	-	Zinc 01092	
Sulfide 00745	- 1-	Lead 01051		Algicides* 74051	
Aluminum 01105		Manganese 01055		Chlorinated organic compounds* 74052	
Antimony 01097		Mercury 71900		Oil and grease 00550	
Arsenic 01002		Molybdenum 01062		Pesticides* 74053	
Beryllium 01012		Nickel 01067		Phenols 32730	
Barium 01007	1-0	Selenium 01147		Surfactants 38260	
Boron 01022		Silver 01077		Radioactivity* 74050	
Cadmium 01027	-				

^{*}Provide specific compound and/or element in Item 17, if known.

Pesticides (Insecticides, fungicides, and rodenticides) must be reported in terms of the acceptable common names specified in Acceptable Common Names and Chemical Names for the Ingredient Statement on Pesticide Labels, 2nd Edition, Environmental Protection Agency, Washington, D.C. 20250, June 1972, as required by Subsection 162.7(b) of the Regulations for the Enforcement of the Federal Insecticide, Fungicide, and Rodenticide Act.

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16.	Plant Controls Check ing plant controls are a for this discharge Alternate power source pumping facility include for collection system li Alarm for power or equal failure	e for major ding those ift stations	□ APS			FO	R AGENCY USE
17.	Additional Information	n					
150000000000	Item						
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FOR AGENCY USE

SECTION III. SCHEDULED IMPROVEMENTS AND SCHEDULES OF IMPLEMENTATION

This section requires information on any uncompleted implementation schedule which has been imposed for construction of waste treatment facilities. Requirement schedules may have been established by local, State, or Federal agencies or by court action. IF YOU ARE SUBJECT TO SEVERAL DIFFERENT IMPLEMENTATION SCHEDULES, EITHER BECAUSE OF DIFFERENT LEVELS OF AUTHORITY IMPOSING DIFFERENT SCHEDULES (ITEM 16) AND/OR STAGED CONSTRUCTION OF SEPARATE OPERATIONAL UNITS (ITEM 16), SUBMIT A SEPARATE SECTION III FOR EACH ONE.

- 1. Improvements Required
 - 2. Discharge Serial Numbers Affected List the discharge serial numbers, assigned in Section II, that are covered by this implementation schedule
 - b. Authority Imposing Requirement Check the appropriate Item Indicating the authority for the implementation schedule If the identical implementation schedule has been ordered by more than one authority, check the appropriate items. (see instructions)

Locally developed plan Areawice Plan Basin Plan State approved implementation schedule Federal approved water quality standards implementation plan Federal enforcement procedure or action State court order Federal court order

- FOR AGENCY USE -Sched, No. 300 001 002 3011 Loc 3015 DARE □ BAS XSQ5 □ was
- c. Improvement Description Specify the 3-character code for the General Action Description in Table II that best describes the improvements required by the implementation schedule. If more than one schedule applies to the facility because of a staged construction schedule, state the stage of construction being described here with the appropriate general action code. Submit a separate Section III for each stage of construction planned. Also, list all the 3-character (Specific Action) codes which describe in more detail the pollution abatement practices that the implementation schedule requires.

3-character general action description 3-character specific action

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3016		//

2. Implementation Schedule and 3. Actual Completion Dates *

Provide dates imposed by schedule and any actual dates of completion for implementation steps listed below. Indicate dates as accurately as possible. (see instructions)

Implementation Steps

descriptions

3022	
3025	
302c	86/7/17
3024	/

2. Schedule (Yr /Mo /Day)

DENF

CRT

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b. Final plan complete c. Financing complete & contract

a. Preliminary plan complete NA

- NA d. Site acquired
- e. Begin construction

awarded

- f. End construction
- g. Begin Discharge
- h. Operational level attained

302a	/_	_/
3025		_/
302c	86/7	_/_17
- 302d	/	_/
302e	86,	<u> , 3</u> 0
3021	88,	7, 29
3029	88/	2/_29
302h	88/	7, 29

3. Actual Completion (Yr /Mo /Day)

303a	/		-/
303b	86	4	/_30
303c	86	_7_	
3034	/		/
303:	86	, 7	, 30
303f	89	12	12
3039	88	12	/15
303h	88	,12	15

* Under Contract 78-020-CP

FOR AGENCY USE

SECTION III. SCHEDULED IMPROVEMENTS AND SCHEDULES OF IMPLEMENTATION

This section requires information on any uncompleted implementation schedule which has been Imposed for construction of waste treatment facilities. Requirement schedules may have been established by local, State, or Federal agencies or by court action. IF YOU ARE SUBJECT TO SEVERAL DIFFERENT IMPLEMENTATION SCHEDULES, EITHER BECAUSE OF DIFFERENT LEVELS OF AUTHORITY IMPOSING DIFFERENT SCHEDULES (ITEM 1b) AND/OR STAGED CONSTRUCTION OF SEPARATE OPERATIONAL UNITS (ITEM 1c), SUBMIT A SEPARATE SECTION III FOR EACH ONE.

- 1. Improvements Required
 - a. Discharge Serial Numbers
 Affected List the discharge
 serial numbers, assigned in Section II, that are covered by this
 implementation schedule
 - b. Authority Imposing Requirement Check the appropriate item indicating the authority for the Implementation schedule. If the identical implementation schedule has been ordered by more than one authority, check the appropriate items. (see instructions)

Locally developed plan
Areawide Plan
Basin Plan
State approved implementation
schedule
Federal approved water quality
standards implementation plan
Federal enforcement procedure
or action

State court order

Federal court order

	FOR AG	ENCY USE
300	Sched. No.	
		-
3D1a	109	
		94.

Tunnel and Reservoir Plan,
Mainstream; North Branch Leg Phase I

c. Improvement Description Specify the 3-character code for the General Action Description in Table II that best describes the improvements required by the implementation schedule. If more than one schedule applies to the facility because of a staged construction schedule, state the stage of construction being described here with the appropriate general action code, submit a separate Section III for each stage of construction planned. Also, list all the 3-character (Specific Action) codes which describe in more detail the pollution abatement practices that the Implementation schedule requires.

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DENF

CRT

☐ FED

 301c MOD
301c OUT , IPU , CSC ,

2. Implementation Schedule and 3. Actual Completion Dates

Provide dates imposed by schedule and any actual dates of completion for Implementation steps listed below. Indicate dates as accurately as possible. (see instructions)

Implementation Steps

descriptions

- a. Preliminary plan complete
- b. Final plan complete
- Financing complete & contract awarded
- d. Site acquired
- e. Pegin construction
- f. End construction
- g. Begin Discharge
- h. Operational level attained

2. Schedule (Yr /Mo /Day)

302a	75,2,1
302b	76,10,1
302c	77/2/1
- 302d	77, 2,1
302e	77, 3,1
302f	83, 1, 1
3029	//
1000	, ,

3. Actual Completion (Yr /Mo /Day)

383a	15,2,1
303b	92,4,1
303c	92,4,1
3034	92,4,1
3038	92,7,6
303f	/
3039	//
303h	

OR	AG	EN	CYI	JSE
П	T	П	П	

SECTION IV. INDUSTRIAL WASTE CONTRIBUTION TO MUNICIPAL SYSTEM

Submit a description of each major industrial facility discharging to the municipal system, using a separate Section IV for each facility description. Indicate the 4 digit Standard Industrial Classification (SIC) Code for the industry, the major product or raw material, the flow (in thousand gallons per day), and the characteristics of the wastewater discharged from the industrial facility into the municipal system. Consult Table III for standard measures of products or raw materials. (see instructions)

**		tructions)	inty								
	Name			401a		See a	attached	sheets			
	Numbe	r& Street		401b							
	City			401c							
	County			401d					40		
	State			401e							
	Zip Cod	de		401f							
2.		r Standard Indu cation Code (lions)		402							
3.		al Product or R I (see instruct							Quantity		Units (See Table III)
	Product	t		403a				403c		_ 403e	
	Raw Ma	aterial		403b	-			403d		_ 403f	
4.	dischar- tem in and wh	Indicate the vol ged into the mu thousand gallor ether this disch or continuous.	nicipal sys- es per day arge is inter-	404a 404b		thousand gallo					
5.	pretrea	tment Provided tment is provid g the municipal	ed prior to	405	□Yes	□ No					
6.		teristics of Wast tructions)	ewater								
		Parameter	T		T			T			1
	4062	Parameter Number			-		-	-			
	4066	Value						_			
	100000										1