

**STATE OF MISSOURI**  
**DEPARTMENT OF NATURAL RESOURCES**

MISSOURI CLEAN WATER COMMISSION



**CONSTRUCTION PERMIT**

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

Oakland Woods, LLC  
P.O. Box 1844  
Washington, MO 63090

for the construction of (described facilities):

See attached.

Permit Conditions:

See attached.

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

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

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

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

February 9, 2015  
Effective Date

Sara Parker Pauley  
Sara Parker Pauley, Director, Department of Natural Resources

February 8, 2017  
Expiration Date

John Madros  
John Madros, Director, Water Protection Program

## **CONSTRUCTION PERMIT**

### **I. CONSTRUCTION DESCRIPTION**

The project consists of the addition of a Norweco model 4600 tablet feeder to the existing WWTF. The tablet feeder will be located after the chlorine contact chamber. Sodium sulfite will be used to neutralize the free and combined chlorine in the treated wastewater prior to discharge. The de-chlorination unit has a peak design flow of 200,000 gallons per day (gpd).

### **II. FINDING OF AFFORDABILITY**

The Finding of Affordability is not applicable. The permittee is not a combined or separate sanitary sewer system or a publicly owned treatment works.

### **III. CONSTRUCTION PERMIT CONDITIONS**

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

1. This construction permit does not authorize discharge.
2. All construction shall be in accordance with the plans and specifications submitted by 21 Design Group with a received on date of January 29, 2015.
3. The Department must be contacted in writing prior to making any changes to the approved plans and specifications that would directly or indirectly have an impact on the capacity, flow, system layout, or reliability of the proposed wastewater treatment facilities or any design parameter that is addressed by 10 CSR 20-8, in accordance with 10 CSR 20-8.110(8).
4. State and Federal Law does not permit bypassing of raw wastewater, therefore steps must be taken to ensure that raw wastewater does not discharge during construction. If a sanitary sewer overflow or bypass occurs, report the appropriate information to the Department's St. Louis Regional Office per 10 CSR 20-7.015(9)(E)2.
5. This Construction Permit is invalid for projects required to comply with the requirements contained in 10 CSR 20-4, "Grants and Loans"
6. Protection of drinking water supplies shall be in accordance with 10 CSR 20-8.120(10). "There shall be no physical connections between a public or private potable water supply system and a sewer, or appurtenance thereto which would permit the passage of any wastewater or polluted water into the potable supply. No water pipe shall pass through or come in contact with any part of a sewer manhole."

7. Sewers in relation to water works structures shall meet the requirements of 10 CSR 23-3.010 with respect to minimum distances from public water supply wells or other water supply sources and structures.
  - A. Sewer mains shall be laid at least ten feet horizontally from any existing or proposed water main. The distances shall be measured edge-to-edge. In cases where it is not practical to maintain a ten foot separation, the Department may allow a deviation on a case-by-case basis, if supported by data from the design engineer. Such a deviation may allow installation of the sewer closer to a water main, provided that the water main is in a separate trench or on an undisturbed earth shelf located on either side of the sewer and at an elevation so the bottom of the water main is at least 18 inches above the top of the sewer. If it is impossible to obtain proper horizontal and vertical separation as described above for sewers, the sewer must be constructed of slip-on or mechanical joint pipe or continuously encased and be pressure tested to 150 pounds per square inch to assure water tightness.
  - B. Manholes should be located at least ten feet horizontally from any existing or proposed water main.
  - C. Sewers crossing water mains shall be laid to provide a minimum vertical distance of 18 inches between the outside of the water main and the outside of the sewer. This shall be the case where the water main is either above or below the sewer. The crossing shall be arranged so that the sewer joints will be equidistant and as far as possible from the water main joints. Where a water main crosses under a sewer, adequate structural support shall be provided for the sewer to maintain line and grade. When it is impossible to obtain proper vertical separation as stipulated above, one of the following methods must be specified:
    - a. The sewer shall be designed and constructed equal to the water pipe and shall be pressure tested to assure water tightness prior to backfilling; or
    - b. Either the water main or sewer line may be continuously encased or enclosed in a watertight carrier pipe which extends ten feet on both sides of the crossing, measured perpendicular to the water main. The carrier pipe shall be of materials approved by the Department for use in water main construction.
8. In addition to the requirements for a construction permit, 10 CSR 20-6.200 requires land disturbance activities of one acre or more to obtain a Missouri State Operating Permit to discharge stormwater. The permit requires Best Management Practices sufficient to control runoff and sedimentation to protect waters of the state. Land disturbance permits will only be obtained by means of the Department's ePermitting system available online at [www.dnr.mo.gov/env/wpp/epermit/help.htm](http://www.dnr.mo.gov/env/wpp/epermit/help.htm). See [www.dnr.mo.gov/env/wpp/stormwater/sw-land-disturb-permits.htm](http://www.dnr.mo.gov/env/wpp/stormwater/sw-land-disturb-permits.htm) for more information.
9. A United States (U.S.) Army Corps of Engineers (COE) permit (404) and a Water Quality Certification (401) issued by the Department or permit waiver may be required for the activities described in this permit. This permit is not valid until these requirements are satisfied. If construction activity will disturb any land below the ordinary high water mark of Jurisdictional Waters of the U.S. then a 404/401 will be required. Since the COE makes determinations on what is jurisdictional, you must contact the COE to determine permitting requirements. You may call the Department's Water Protection Program at 573-751-1300 for more information. See [www.dnr.mo.gov/env/wpp/401/](http://www.dnr.mo.gov/env/wpp/401/) for more information.

10. A full closure plan shall be submitted to the Department's St. Louis Regional Office for review and approval of any permitted wastewater treatment system being replaced. In accordance with 10 CSR 20-6.010(12), the closure plan must meet the requirements outlined in Standard Conditions Part III of the Missouri State Operating Permit No. MO- 0105546. Closure shall not commence until the submitted closure plan is approved by the Department. Form J – Request for Termination of a State Operating Permit, shall be submitted to the Water Protection Program for termination of any existing Missouri State Operating Permit, once closure is completed in accordance with the approved closure plan.
11. Upon completion of construction;
  - A. Oakland Woods, LLC will become the continuing authority for operation, maintenance, and modernization of these facilities;
  - B. Submit the enclosed form Statement of Work Completed to the Department in accordance with 10 CSR 20-6.010(5)(D);
  - C. Submit an electronic copy of the “as built” drawings if the project was not constructed in accordance with previously submitted plans and specifications; and
  - D. When the permittee applies for their next operating permit renewal, they will be expected to include an updated facility description on their application.

#### **IV. REVIEW SUMMARY**

##### **1. AMMONIA**

The Water Protection Program is providing this notice to inform permittees that EPA's published ammonia criteria for aquatic life protection is lower than the current Missouri criteria. The department has initiated stakeholder discussions on this topic and at this time, there is no firm target date for starting the rulemaking to adopt new standards. More information can be found at <http://dnr.mo.gov/pubs/pub2481.pdf> .

##### **2. CONSTRUCTION PURPOSE**

This project will enable the facility to neutralize free and combined chlorine in the treated wastewater prior to discharge to the receiving stream. Residual chlorine has been demonstrated to be toxic to aquatic life, even at low concentrations.

##### **3. FACILITY DESCRIPTION**

The project consists of the addition of a Norweco model 4600 tablet feeder to the existing WWTF. The tablet feeder will be located after the chlorine contact chamber. Sodium sulfite will be used to neutralize the free and combined chlorine in the treated wastewater prior to discharge. The de-chlorination unit has a peak design flow of 200,000 gallons per day (gpd).

The existing facility is a four-cell lagoon system followed by a sand filter and tablet chlorinator. The existing facility has a design capacity of 34,500 gpd.

**4. COMPLIANCE PARAMETERS**

The construction project is expected to help the facility meet the total residual chlorine final effluent limitation.

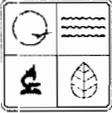
**5. REVIEW of MAJOR TREATMENT DESIGN CRITERIA**

The de-chlorination is designed to insure a proportional feed rate as specified in *Recommend Standards for Wastewater Facilities* (i.e., “10 States Standards”) and *Design Guides*, 10 CSR 20-8.190(4)(B)2 .

**6. OPERATING PERMIT MODIFICATION**

Operating permit MO-0105546 will not require a modification to reflect the construction activities. It is expected that the facility owner will include a new facility description in their next operating permit renewal application to reflect the installation of a dechlorination system.

Stephen P. Busch, P.E.  
Engineering Section  
[steve.busch@dnr.mo.gov](mailto:steve.busch@dnr.mo.gov)



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

1720-28 C-12-7

FOR DEPARTMENT USE ONLY	
APP NO.	CP NO.
FEE RECEIVED \$150.00	CHECK NO. 1461
DATE RECEIVED 7/1/15	

**APPLICATION OVERVIEW**

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

**PART A – BASIC INFORMATION**

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

- 1.1 Is this a Federal/State funded project?  YES  N/A Funding Agency: \_\_\_\_\_ Project #: \_\_\_\_\_
- 1.2 Has the Missouri Department of Natural Resources approved the proposed project's antidegradation review?  
 YES Date of Approval: \_\_\_\_\_  
 Attached is the No Degradation Evaluation Conclusion of Antidegradation Review form
- 1.3 Has the department approved the proposed project's facility plan\*?  
 YES Date of Approval: \_\_\_\_\_  NO  N/A (If Not Applicable, complete No. 1.4.)
- 1.4 [Complete only if answered Not Applicable on No. 1.3.] Is a copy of the engineering report\* for wastewater treatment facilities with a design flow less than 22,500 gpd included with this application?  
 YES  NO
- 1.5 Is a copy of the appropriate plans\* and specifications\* included with this application?  
 YES Denote which form is submitted:  Hard copy  Electronic copy (See instructions.)  NO
- 1.6 Is a summary of design\* included with this application?  YES  NO
- 1.7 Has the appropriate operating permit application (A, B, or B2) been submitted to the department?  
 YES Date of submittal: \_\_\_\_\_  
 Enclosed is the appropriate operating permit application submittal. Denote which form:  A  B  B2  
 N/A Please explain: \_\_\_\_\_
- 1.8 Is the facility currently under enforcement with the department or the Environmental Protection Agency?  YES  NO
- 1.9 Is the appropriate fee included with this application?  YES  NO (See instructions for appropriate fee.)

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

**2.0 PROJECT INFORMATION**

2.1 NAME OF PROJECT

Oakland Woods Mobile Home Park WWTF

2.2 PROJECT DESCRIPTION

The project consists of the addition of dechlorination to the downstream end of the chlorination tank.

2.3 SLUDGE HANDLING, USE AND DISPOSAL DESCRIPTION

Sludge disposal is by contract hauler.

2.4 DESIGN INFORMATION

- A. Current population: \_\_\_\_\_; Design population: 504
- B. Actual Flow: 4,000 gpd; Design Average Flow: 34,500 gpd;  
 Actual Peak Daily Flow: \_\_\_\_\_ gpd; Design Maximum Daily Flow: \_\_\_\_\_ gpd

2.5 ADDITIONAL INFORMATION

- A. Is a topographic map attached?  YES  NO
- B. Is a process flow diagram attached?  YES  NO

**PART B – LAND APPLICATION ONLY**

**(Submit only if the proposed construction project includes land application of wastewater.)**

**8.0 FACILITY INFORMATION**

8.1 Type of wastewater to be irrigated:  Domestic  State/National Park  Seasonal business  
 Municipal  Municipal with a pretreatment program or significant industrial users  
 Other (explain) \_\_\_\_\_

8.2 Months when the business or enterprise will operate or generate wastewater:  
 12 months per year  Part of the year (list months): \_\_\_\_\_

8.3 This system is designed for:  
 No-discharge.  
 Partial irrigation when feasible and discharge rest of time.  
 Irrigation during recreational season, April – October, and discharge during November – March.  
 Other (explain) \_\_\_\_\_.

**9.0 STORAGE BASINS**

9.1 Number of storage basins: \_\_\_\_\_ (Use additional pages if greater than three basins.)

9.2 Type of basins:  Steel  Concrete  Fiberglass  Earthen  Earthen with membrane liner

9.3 Storage basin dimensions at inside top of berm (feet). Report freeboard as feet from top of berm to emergency spillway or overflow pipe.

Basin #1:	Length _____	Width _____	Depth _____	Freeboard _____	Berm Width _____	% Slope _____
Basin #2:	Length _____	Width _____	Depth _____	Freeboard _____	Berm Width _____	% Slope _____
Basin #3:	Length _____	Width _____	Depth _____	Freeboard _____	Berm Width _____	% Slope _____

9.4 Storage Basin operating levels (report as feet below emergency overflow level).

Basin #1:	Maximum operating water level _____ ft	Minimum operating water level _____ ft
Basin #2:	Maximum operating water level _____ ft	Minimum operating water level _____ ft
Basin #3:	Maximum operating water level _____ ft	Minimum operating water level _____ ft

9.5 Design depth of sludge in storage basins.

Basin #1: \_\_\_\_\_ ft Basin #2: \_\_\_\_\_ ft Basin #3: \_\_\_\_\_ ft

9.6 Existing sludge depth, if the basins are currently in operation.

Basin #1: \_\_\_\_\_ ft Basin #2: \_\_\_\_\_ ft Basin #3: \_\_\_\_\_ ft

9.7 Total design sludge storage: \_\_\_\_\_ dry tons and \_\_\_\_\_ cubic feet

**10.0 LAND APPLICATION SYSTEM**

10.1 Number of irrigation sites \_\_\_\_\_ Total Acres \_\_\_\_\_ Maximum % field slopes \_\_\_\_\_  
Location: \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, \_\_\_\_\_ Sec. \_\_\_\_\_ T \_\_\_\_\_ R \_\_\_\_\_ County \_\_\_\_\_ Acres  
Location: \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, \_\_\_\_\_ Sec. \_\_\_\_\_ T \_\_\_\_\_ R \_\_\_\_\_ County \_\_\_\_\_ Acres  
Location: \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, \_\_\_\_\_ Sec. \_\_\_\_\_ T \_\_\_\_\_ R \_\_\_\_\_ County \_\_\_\_\_ Acres  
(Use additional pages if greater than three irrigation sites.)

10.2 Type of vegetation:  Grass hay  Pasture  Timber  Row crops  
 Other (describe) \_\_\_\_\_

10.3 Wastewater flow (dry weather) gallons per day: Average annual \_\_\_\_\_ Seasonal \_\_\_\_\_ Off-season \_\_\_\_\_

10.4 Land application rate (design flow including 1-in-10 year storm water flows):

Design:	_____ inches/year	_____ inches/hour	_____ inches/day	_____ inches/week
Actual:	_____ inches/year	_____ inches/hour	_____ inches/day	_____ inches/week

10.5 Total irrigation per year (gallons): Design: \_\_\_\_\_ gal Actual: \_\_\_\_\_ gal

10.6 Actual months used for irrigation (check all that apply):

Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

10.7 Land application rate is based on:

Hydraulic Loading  Other (describe) \_\_\_\_\_  
 Nutrient Management Plan (N&P) If N&P is selected, is the plan included?  YES  NO

**7. DESCRIPTION OF FACILITY**

**7.1 Process Flow Diagram or Schematic:** Provide a diagram showing the processes of the treatment plant. Show all of the treatment units, including disinfection (e.g. – chlorination and dechlorination), influents and outfalls. Indicate any treatment process changes in the routing of wastewater during dry weather and peak wet weather. Include a brief narrative description of the diagram. Attach sheets as necessary.

**7.2** Attach an aerial photograph or USGS topographic map showing the location of the facility and outfall.

<b>8. ADDITIONAL FACILITY INFORMATION</b>	
8.1 Facility SIC code: 4952/6515	Discharge SIC code: _____
8.2 Number of people presently connected or population equivalent (P.E.)	Design P.E. 504
8.3 Connections to the facility: Number of units presently connected: Homes _____ Trailers _____ Apartments _____ Other (including industrial) _____ Number of commercial establishments: _____	
8.4 Design flow: 34,500	Actual flow: 4,000 gpd
8.5 Will discharge be continuous through the year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, explain.) Discharge will occur during the following months: _____	
How many days of the week will discharge occur? _____	
8.6 Is industrial waste discharged to the facility?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
8.7 Does the facility accept or process leachate from landfills?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
8.8 Is wastewater land applied? If yes, is Form I attached?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
8.9 Does the facility discharge to a losing stream or sinkhole?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
8.10 Has a wasteload allocation study been completed for this facility?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>9. LABORATORY CONTROL INFORMATION</b>	
LABORATORY WORK CONDUCTED BY PLANT PERSONNEL	
Lab work conducted outside of plant. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Push-button or visual methods for simple test such as pH, settleable solids. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Additional procedures such as dissolved oxygen, chemical oxygen demand, biological oxygen demand, titrations, solids, volatile content. <input type="checkbox"/> Yes <input type="checkbox"/> No	
More advanced determinations such as BOD seeding procedures, fecal coliform, nutrients, total oils, phenols, etc. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Highly sophisticated instrumentation, such as atomic absorption and gas chromatograph. <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>10. COLLECTION SYSTEM</b>	
10.1 Length of pipe in the sewer collection system? _____ Feet, or _____ Miles (either unit is appropriate)	
10.2 Does significant infiltration occur in the collection system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, briefly explain any steps underway or planned to minimize inflow and infiltration:   	
<b>11. BYPASSING</b>	
Does any bypassing occur in the collection system or at the treatment facility? No If yes, explain:   	