



Jeremiah W. (Jay) Nixon, Governor • Sara Parker Pauley, Director

DEPARTMENT OF NATURAL RESOURCES

www.dnr.mo.gov

APR 14 2014

Mr. David Streeter, District Manager
Public Water Supply District #3 of Johnson County
106 SE 421 Rd.
Warrensburg, MO 64093

RE: AP#16854 Wastewater Collection & Treatment Facility Improvements – Public Water Supply District #3 of Johnson County Wastewater Treatment Facility, MO-0137600, Construction Permit No. 1599

Dear Mr. Streeter:

The Missouri Department of Natural Resources' (Department) Water Protection Program has reviewed the plans and specifications submitted by Allstate Consultants, LLC for the Public Water Supply District #3 of Johnson County (JoCo PWSD #3). Please find enclosed Construction Permit No. CP0001599.

This permit will terminate 24 months from the date of issuance. In accordance with 10 CSR 20-6.010(4)(G), the Department may grant an extension only one time. If you believe that an extension is necessary, you must submit a request and a justification in writing for the extension at least 30 days prior to the permit expiration date.

This construction permit does not supersede any requirements of the operating permit or enforcement actions. Nothing in this permit removes any obligations to comply with county or other local ordinances or restrictions.

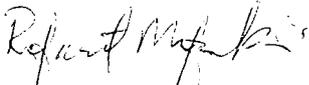
If you were adversely affected by this decision, you may appeal to have the matter heard by the Administrative Hearing Commission. To appeal, you must file a petition with the Administrative Hearing Commission within 30 days after the date this decision was mailed or the date it was delivered, whichever date was earlier. If any such petition is sent by registered mail or certified mail, it will be deemed filed on the date it is mailed. If it is sent by any method other than registered mail or certified mail, it will be deemed filed on the date it is received by the Administrative Hearing Commission.

If you have any questions concerning this matter, please contact Steve Busch, of the Water Protection Program, at (573) 526-7558 or steve.busch@dnr.mo.gov or Missouri Department of Natural Resources, P.O. Box 176, Jefferson City, MO 65102-0176.

Thank you for your efforts to help ensure clean water in Missouri.

Sincerely,

WATER PROTECTION PROGRAM



Refaat H. Mefrakis, P.E.
Engineering Section Chief

RHM:sbi

Enclosures

c: Cary Sayre, P.E.; Allstate Consultants
Kansas City Regional Office
File Copy

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES

MISSOURI CLEAN WATER COMMISSION



CONSTRUCTION PERMIT

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

Public Water Supply District #3 of Johnson County
106 SE 421 Rd.
Warrensburg, MO 64093

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).

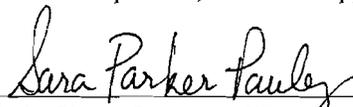
As the Department does not examine structural features of design or the efficiency of mechanical equipment, the issuance of this permit does not include approval of these features.

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.

April 14, 2014
Effective Date

April 13, 2016
Expiration Date


Sara Parker Pauley, Director, Department of Natural Resources


Director of Staff, Clean Water Commission or Designee

CONSTRUCTION PERMIT

I. CONSTRUCTION DESCRIPTION

The Public Water Supply District #3 of Johnson County (JoCo PWSD #3) wastewater treatment facility (WWTF) will consist of a new activated sludge WWTF with a design capacity of 95,000 gallons per day (gpd) and a peak flow capacity of 380,000 gpd. The system will consist of a headworks, two channel oxidation ditch, two clarifiers, aerobic sludge thickener/digester, ultra-violet light (UV) disinfection, cascade re-aeration, SCADA, electrical, site plan and necessary appurtenances.

The collection system will consist of new gravity sewers, manholes, two sewer pump stations, force mains and appurtenances. The South Pump Station will allow closure of the existing South Lagoon system (MO-0050784) and the North Pump Station will allow closure of the existing North Lagoon system (MO-0082945). Gravity sewers will be 8-inch PVC with manholes and other necessary items. The force main will be 4-inch PVC and 6-inch PVC with other piping, valves and appurtenances. Both pump stations will be duplex for a total of four pumps.

II. FINDING OF AFFORDABILITY

An Affordability Determination and Finding was performed in accordance with RSMO §644.145 and is enclosed with this construction permit. The Department finds the project is affordable with a high economic burden to the community.

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 Allstate Consultants, LLC Firm received on November 5, 2013.
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 XX 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. See 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/ for more information.

10. A full closure plan shall be submitted to the Department's Kansas City 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, Section I, of the Missouri State Operating Permit No. MO-0050784 and MO-0082945. 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 Department's Kansas City Regional Office 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. The Public Water Supply District #3 of Johnson County 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. Submit a *Form B2 - Application for Construction or Operating Permit for Facilities Which Receive Primarily Domestic Waste and Have a Design Flow More Than 100,000 Gallons per Day* and the appropriate fee.

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>.

EPA's ammonia criteria were brought to the attention of the permittee and its engineer in a December 10, 2013, comment letter addressed to JoCo PWSD #3. The project's equipment provider stated the proposed system has the potential to meet EPA's ammonia criteria.

2. CONSTRUCTION PURPOSE

While not currently under enforcement action by the Department, the existing facilities to be replaced by the proposed facility have had excursions of exceedance of effluent limitations for BOD and total suspended solids (TSS). The proposed facility will also enhance ammonia and *E.coli* removal.

3. FACILITY DESCRIPTION

The proposed JoCo PWSD #3 WWTF will consist of a new activated sludge WWTF with a design capacity of 95,000 gpd and a peak flow capacity of 380,000 gpd. The system will consist of a headworks, two channel oxidation ditch, two clarifiers, aerobic sludge thickener/digester, UV disinfection, cascade re-aeration, SCADA, electrical, site plan and necessary appurtenances. The design population equivalent (PE) for this facility is 950.

The collection system will consist of new gravity sewers, manholes, two sewer pump stations, force mains and appurtenances. The South Pump Station will allow closure of the existing South Lagoon system (MO-0050784) and the North Pump Station will allow closure of the existing North Lagoon system (MO-0082945). Gravity sewers will be 8-inch PVC with manholes and other necessary items. The force main will be 4-inch PVC and 6-inch PVC with other piping, valves and appurtenances. Both pump stations will be duplex for a total of four pumps.

4. COMPLIANCE PARAMETERS

The proposed facility should help JoCo PWSD #3 to meet BOD and TSS limits on a consistent basis. It will also enhance ammonia and *E.coli* removal.

5. REVIEW of MAJOR TREATMENT DESIGN CRITERIA

The design of the proposed facility and collection system is consistent with the 10 CSR 20-8 Design Guides.

6. OPERATING PERMIT

MDNR Operating permit MO-0137600 has been drafted for the proposed facility. Upon completion of the proposed facility the draft permit will be finalized. Public notice of the draft permit was provided and a comment period from February 14, 2014 through March 17, 2014 was available. The proposed facility will replace the existing Hickory Hill South Lagoon and Hickory Hill North Lagoon systems operated under the authority of MO0050784 and MO0082945, respectively. The existing systems will be closed when the proposed facility is operational and the permits for the existing lagoon systems will be terminated upon completion of the closure process.

Review Engineer: Steve Busch
Unit Chief Approval: Cindy LePage
Date: March 20, 2014

APPENDIX

- **MDNR Water Quality & Antidegradation Review**
- **Affordability Determination and Findings**

APPENDIX A – Water Quality & Antidegradation Review

APPENDIX B – AFFORDABILITY DETERMINATION & FINDINGS

AP16854

RECEIVED

CP 0001590



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

NOV 05 2013

FOR DEPARTMENT USE ONLY	
APP NO.	CP NO.
\$\$\$ RECEIVED \$750.00	CHECK NO. 13426
DATE RECEIVED 11/5/13	

WATER PROTECTION PROGRAM

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: USDA Project #: _____
- 1.2 Has the Missouri Department of Natural Resources approved the proposed project's antidegradation review?
 YES Date of Approval: 03/20/13
 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
Wastewater Collection and Treatment Facility Improvements

2.2 PROJECT DESCRIPTION
The wastewater treatment facility will consist of a new activated sludge wastewater treatment facility. The collection system will consist of new gravity sewers, manholes, two sewer pump stations, force mains and appurtenances.

2.3 SLUDGE HANDLING, USE AND DISPOSAL DESCRIPTION
Aerobic sludge thickening basin is being provided. sludge will be hauled to a POTW or landfill.

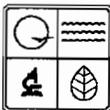
2.4 DESIGN INFORMATION

- A. Current population: 592; Design population: 950
- B. Actual Flow: 59200 gpd; Design Average Flow: 95000 gpd;
Actual Peak Daily Flow: 380,000 gpd; Design Maximum Daily Flow: 380,000 gpd

5 ADDITIONAL INFORMATION
Is a topographic map attached? YES NO
Is a process flow diagram attached? YES NO See Design Summary

RECEIVED

CP0001599



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM

NOV 05 2013

**APPLICATION FOR CONSTRUCTION PERMIT -
WASTEWATER TREATMENT FACILITY**

WATER PROTECTION PROGRAM

FOR DEPARTMENT USE ONLY	
APP NO.	CP NO.
FEE RECEIVED \$750.00	CHECK NO. 13426
DATE RECEIVED 11/5/13	

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: USDA Project #: _____
- 1.2 Has the Missouri Department of Natural Resources approved the proposed project's antidegradation review?
 YES Date of Approval: 03/20/13
 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

Wastewater Collection and Treatment Facility Improvements

2.2 PROJECT DESCRIPTION

The wastewater treatment facility will consist of a new activated sludge wastewater treatment facility. The collection system will consist of new gravity sewers, manholes, two sewer pump stations, force mains and appurtenances.

2.3 SLUDGE HANDLING, USE AND DISPOSAL DESCRIPTION

Aerobic sludge thickening basin is being provided. sludge will be hauled to a POTW or landfill.

2.4 DESIGN INFORMATION

- A. Current population: 592 ; Design population: 950
- B. Actual Flow: 59200 gpd; Design Average Flow: 95000 gpd;
Actual Peak Daily Flow: 380,000 gpd; Design Maximum Daily Flow: 380,000 gpd

2.5 ADDITIONAL INFORMATION

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

3.0 WASTEWATER TREATMENT FACILITY				
NAME Johnson County PWS No. 3		TELEPHONE NUMBER WITH AREA CODE 660-429-2494		E-MAIL ADDRESS pwsd3_gm@embarqmail.com
ADDRESS (PHYSICAL) 106 Southeast 421 Road	CITY Warrensburg	STATE Missouri	ZIP CODE 64093	COUNTY Johnson
Wastewater Treatment Facility: Mo- (Outfall 1 Of 1)				
3.1 Legal Description: <u>1/4, SE 1/4, SW 1/4, Sec. 27, T 46N, R 25W</u> (Use additional pages if construction of more than one outfall is proposed.)				
3.2 UTM Coordinates Easting (X): <u>442387</u> Northing (Y): <u>4288582</u> For Universal Transverse Mercator (UTM), Zone 15 North referenced to North American Datum 1983 (NAD83)				
3.3 Name of receiving streams: <u>Box Branch</u>				
4.0 PROJECT OWNER				
NAME Johnson County PWS No. 3		TELEPHONE NUMBER WITH AREA CODE (660) 429-2494		E-MAIL ADDRESS pwsd3_gm@embarqmail.com
ADDRESS 106 Southeast 421 Road	CITY Warrensburg	STATE Missouri	ZIP CODE 64093	
5.0 CONTINUING AUTHORITY: Permanent organization that will serve as the continuing authority for the operation, maintenance and modernization of the wastewater collection system.				
NAME Johnson County PWS No. 3		TELEPHONE NUMBER WITH AREA CODE (660) 429-2494		E-MAIL ADDRESS pwsd3_gm@embarqmail.com
ADDRESS 106 Southeast 421 Road	CITY Warrensburg	STATE Missouri	ZIP CODE 64093	
5.1 A letter from the continuing authority, if different than the owner, is included with this application. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A				
5.2 COMPLETE THE FOLLOWING IF THE CONTINUING AUTHORITY IS A MISSOURI PUBLIC SERVICE COMMISSION REGULATED ENTITY.				
A. Is a copy of the certificate of convenience and necessity included with this application? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
5.3 COMPLETE THE FOLLOWING IF THE CONTINUING AUTHORITY IS A PROPERTY OWNERS ASSOCIATION.				
A. Is a copy of the as-filed restrictions and covenants included with this application? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
B. Is a copy of the as-filed warranty deed, quitclaim deed or other legal instrument which transfers ownership of the land for the wastewater treatment facility to the association included with this application? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
C. Is a copy of the as-filed legal instrument (typically the plat) that provides the association with valid easements for all sewers included with this application? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
D. Is a copy of the Missouri Secretary of State's nonprofit corporation certificate included with this application? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
6.0 ENGINEER				
ENGINEER NAME / COMPANY NAME Cary D. Sayre - Allstate Consultants LLC		TELEPHONE NUMBER WITH AREA CODE (660) 376-2941		E-MAIL ADDRESS carysayre@allstateconsultants.net
ADDRESS 30601 Highway 5, P.O. Box 156	CITY Marceline	STATE Missouri	ZIP CODE 64658	
7.0 PROJECT OWNER: I hereby certify that I am familiar with the information contained in this application and to the best of my knowledge and belief such information is true, complete, and accurate, and if granted this permit, I agree to abide by the Missouri Clean Water Law and all rules, regulations, orders, and decisions, subject to any legitimate appeal available to applicant under Missouri Clean Water Law. I also understand the issuance of the construction permit does not guarantee the proposed wastewater treatment will meet the required effluent limitations of the issued Missouri State Operating Permit for this facility.				
PROJECT OWNER SIGNATURE <i>PWS No. 3 of Johnson County - David Streeter mbr</i>				
PRINTED NAME David Streeter			DATE 10-29-2013	
TITLE OR CORPORATE POSITION District Manager		TELEPHONE NUMBER WITH AREA CODE (660) 429-2494		E-MAIL ADDRESS pwsd3_gm@embarqmail.com
Mail completed copy to: MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM P.O. BOX 176 JEFFERSON CITY, MO 65102-0176				
END OF PART A.				
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHETHER PART B NEEDS TO BE COMPLETE.				

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: _____ ¼, _____ ¼, _____ ¼, _____ Sec. _____ T _____ R _____ County _____ Acres
 Location: _____ ¼, _____ ¼, _____ ¼, _____ Sec. _____ T _____ R _____ County _____ Acres
 Location: _____ ¼, _____ ¼, _____ ¼, _____ 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



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 WATER PROTECTION PROGRAM
**FORM B: APPLICATION FOR AN OPERATING PERMIT FOR DOMESTIC OR
 MUNICIPAL WASTEWATER (≤100,000 gallons per day)**

FOR AGENCY USE ONLY

CHECK NUMBER _____
 DATE RECEIVED 11/5/13 FEE SUBMITTED OSB

PLEASE READ THE ACCOMPANYING INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. THIS APPLICATION IS FOR:

- An operating permit for a new (including antidegradation review) or unpermitted facility. Construction Permit # _____
- An operating permit renewal: Permit #MO- _____ Expiration Date _____
- An operating permit modification: Permit #MO- _____ Reason: _____
- 1.1 Is the appropriate fee included with the application (see instructions for appropriate fee)? YES NO
- 1.2 Is a facility description included with this application (see 7.1)? YES NO

2. FACILITY

NAME: Johnson County Public Water Supply District No. 3 TELEPHONE NUMBER WITH AREA CODE: (660) 429-2494

ADDRESS (PHYSICAL): 106 Southeast 421 Road CITY: Warrensburg STATE: Missouri ZIP CODE: 64093

OUTFALL NUMBER: For multiple outfalls, this is number _____ of _____

Estimated (actual) flow: 59200 gpd, Design Average Flow: 95000 gpd, Design Peak Hourly Flow: 380000 gph

2.1 Legal description: ¼, SE ¼, SW ¼, Sec. 27, T 46N, R 25W County Johnson

2.2 UTM Coordinates Easting (X): 442387 Northing (Y): 4288582
 For Universal Transverse Mercator (UTM), Zone 15 North referenced to North American Datum 1983 (NAD83)

2.3 Name of receiving stream: Box Branch

3. OWNER

NAME: Johnson County Public Water Supply District No. 3 E-MAIL ADDRESS: pwsd3_gm@embarqmail.com TELEPHONE NUMBER WITH AREA CODE: (660) 429-2494

ADDRESS: 106 Southeast 421 Road CITY: Warrensburg STATE: Missouri ZIP CODE: 64093

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

4. CONTINUING AUTHORITY: Permanent organization that will serve as the continuing authority for the operation, maintenance and modernization of the facility.

NAME: Johnson County Public Water Supply District No. 3 E-MAIL ADDRESS: pwsd3_gm@embarqmail.com TELEPHONE NUMBER WITH AREA CODE: (660) 429-2494

ADDRESS: 106 Southeast 421 Road CITY: Warrensburg STATE: Missouri ZIP CODE: 64093

5. OPERATOR

NAME: David Streeter CERTIFICATE NUMBER: 8913 Class A

E-MAIL ADDRESS: David@pwsd3.com TELEPHONE NUMBER WITH AREA CODE: (660) 429-2494

6. FACILITY CONTACT

NAME: David Streeter TITLE: District Manager

E-MAIL ADDRESS: pwsd3_gm@embarqmail.com TELEPHONE NUMBER WITH AREA CODE: (660) 429-2494

7. DESCRIPTION OF FACILITY

7.1 Describe the facility (attach additional sheet if required) and attach a flow chart showing the influents, treatment facilities and outfalls.

The wastewater treatment facility will consist of a new activated sludge wastewater treatment facility. The collection system will consist of new gravity sewers, manholes, two sewer pump stations, force mains, and appurtenances.

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

7.3 Design flow for this outfall: _____ Total design flow for the facility: 95000 Actual flow for this outfall: 59200

7.4 Number of people presently connected or population equivalent (P.E.): 592 Design P.E.: 950

7.5 Does the facility accept or process leachate from landfills? Yes No

8. ADDITIONAL FACILITY INFORMATION

8.1 Facility SIC code: 4952; Discharge SIC code: _____

8.2 Milestone dates:

Date of completion of construction of facility: May 2015

Dates of any construction modifications to the facility (along with description of modification): _____

8.3 Connections to the facility:

Number of units presently connected: Homes 160 Trailers _____ Apartments _____

Other (including industrial) _____ (If industrial, see instructions 8.1)

Number of commercial establishments: _____

Daily number of employees working (total estimate): _____ Daily number of customers/guests (total estimate): _____

8.4 Length of pipe in the sewer collection system? _____ feet or 2 miles (either unit is appropriate.)

8.5 Does any bypassing occur in the collection system or at the treatment facility? Yes No (If yes, explain.)

8.6 Does significant infiltration occur in the collection system? Yes No (If yes, explain and attach proposed repair.)

9. DISCHARGE INFORMATION

9.1 Will the discharge be continuous throughout the year? Yes No

9.2 Discharge will occur during the following months: All

9.3 How many days of the week will the discharge occur? 7

9.4 Is wastewater land-applied? Yes No (If yes, attach Form I.)

9.5 Will chlorine be added to the effluent? Yes No

If chlorine is added, what is the resulting residual? _____ $\mu\text{g/l}$ (micrograms per liter)

9.6 Does this facility discharge to a losing stream or sinkhole? Yes No

9.7 Has a waste load allocation study been completed for this facility? Yes No

10. List all permit violations, including effluent limit exceedances, in the last five years. Attach a separate sheet if necessary. If none, write none.

Basically monthly the existing lagoons have problems meeting existing discharge limits.

11. SLUDGE HANDLING, USE AND DISPOSAL

11.1 Is the sludge a hazardous waste as defined by 10 CSR 25? Yes No
 Sludge production, including sludge received from others: 44 Design Dry Tons/Year _____ Actual Dry Tons/Year

11.3 Capacity of sludge holding structures:
 Sludge storage provided: 9912 cubic feet; 20 days of storage; 0.5 average percent solids of sludge;
 No sludge storage is provided.

Type of Storage: Holding tank Building
 Basin Other (Please describe) _____
 Concrete Pad

Sludge Treatment:
 Anaerobic Digester Lagoon Composting
 Storage Tank Aerobic Digester Other (Attach description)
 Lime Stabilization Air or Heat Drying

Sludge Use or Disposal:
 Land Application Surface Disposal (Sludge Disposal Lagoon, Sludge held for more than two years)
 Contract Hauler Incineration
 Hauled to Another Sludge Retained in Wastewater treatment lagoon
 Other _____ Attach explanation sheet.

Treatment Facility
 Solid Waste Landfill

Person responsible for hauling sludge to disposal facility
 By Applicant By Others (complete below)

NAME Johnson County Public Water Supply District No. 3		E-MAIL ADDRESS pwsd3_gm@embarqmail.com	
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ADDRESS 106 Southeast 421 Road	CITY Warrensburg	STATE Missouri	ZIP CODE 64093
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CONTACT PERSON David Streeter	TELEPHONE NUMBER WITH AREA CODE (660) 429-2494	PERMIT NO. MO-
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Sludge use or disposal facility
 By applicant By others (Please complete below.)

NAME		E-MAIL ADDRESS	
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ADDRESS	CITY	STATE	ZIP CODE
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CONTACT PERSON	TELEPHONE NUMBER WITH AREA CODE	PERMIT NO. MO-
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Does the sludge or biosolids disposal comply with federal sludge regulations under 40 CFR 503?
 Yes No (Please explain)

12. DOWNSTREAM LANDOWNERS - ATTACH ADDITIONAL SHEETS AS NECESSARY. SEE INSTRUCTIONS.

NAME Cliff Combs			
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ADDRESS 399 Southeast DD Highway	CITY Warrensburg	STATE Missouri	ZIP CODE 64093
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13. CERTIFICATION

I certify that I am familiar with the information contained in the application, that to the best of my knowledge and belief such information is true, complete and accurate, and if granted this permit, I agree to abide by the Missouri Clean Water Law and all rules, regulations, orders and decisions, subject to any legitimate appeal available to applicant under the Missouri Clean Water Law.

NAME AND OFFICIAL TITLE (TYPE OR PRINT) David Streeter - District Manager	TELEPHONE NUMBER WITH AREA CODE (660) 429-2494
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SIGNATURE <i>David Streeter</i>	DATE SIGNED 10-29-2013
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