



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

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

APPLICATION OVERVIEW

The Application for Construction Permit – Wastewater Facility form is for construction pertaining to domestic wastewater treatment facilities, agrichemical facilities, and components thereof. This 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 Is this an application for an agrichemical? YES (See instructions.) N/A
- 1.3 Has the Missouri Department of Natural Resources approved the proposed project's antidegradation review?
 YES Date of Approval: _____
- 1.4 Has the department approved the proposed project's facility plan*?
 YES Date of Approval: _____ NO N/A (If Not Applicable, complete No. 1.5.)
- 1.5 [Complete only if answered Not Applicable on No. 1.4] 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
- 1.6 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
- 1.7 Is a summary of design* included with this application? YES NO
- 1.8 Is a general operating permit applicable?
 YES Submit the appropriate operating permit application to the Regional Office at least 60 days prior to operation.
 NO Enclose the appropriate operating permit application and fee submittal. Denote which form: B B2
- 1.9 Is the facility currently under enforcement with the department or the Environmental Protection Agency? YES NO
- 1.10 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

2.2 PROJECT DESCRIPTION

2.3 SLUDGE HANDLING, USE AND DISPOSAL DESCRIPTION

2.4 DESIGN INFORMATION

- A. Current population: _____; Design population: _____
- B. Actual Flow: _____ gpd; Design Average Flow: _____ gpd;
 Actual Peak Daily Flow: _____ gpd; Design Maximum Daily Flow: _____ gpd;
 Design Wet Weather Event: _____

2.5 ADDITIONAL INFORMATION

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

2.6 ESTIMATED PROJECT CONSTRUCTION COST

\$

3.0 WASTEWATER TREATMENT FACILITY				
NAME		TELEPHONE NUMBER WITH AREA CODE		EMAIL ADDRESS
ADDRESS (PHYSICAL)		CITY	STATE	ZIP CODE COUNTY
Wastewater Treatment Facility: Mo- (Outfall Of)				
3.1 Legal Description: ¼, ¼, ¼, Sec. , T , R (Use additional pages if construction of more than one outfall is proposed.)				
3.2 UTM Coordinates Easting (X): Northing (Y): For Universal Transverse Mercator (UTM), Zone 15 North referenced to North American Datum 1983 (NAD83)				
3.3 Name of receiving streams:				
4.0 PROJECT OWNER				
NAME		TELEPHONE NUMBER WITH AREA CODE		EMAIL ADDRESS
ADDRESS		CITY	STATE	ZIP CODE
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		TELEPHONE NUMBER WITH AREA CODE		EMAIL ADDRESS
ADDRESS		CITY	STATE	ZIP CODE
5.1 A letter from the continuing authority, if different than the owner, is included with this application. <input type="checkbox"/> YES <input 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 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 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 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 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 type="checkbox"/> NO				
6.0 ENGINEER				
ENGINEER NAME / COMPANY NAME		TELEPHONE NUMBER WITH AREA CODE		EMAIL ADDRESS
ADDRESS		CITY	STATE	ZIP CODE
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				
PRINTED NAME				DATE
TITLE OR CORPORATE POSITION		TELEPHONE NUMBER WITH AREA CODE		EMAIL ADDRESS
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 Subsurface
 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 two 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 _____ Depth _____ Safety _____ % Slope _____
 Basin #2: Length _____ Width _____ Depth _____ Freeboard _____ Depth _____ Safety _____ % 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

9.5 Design depth of sludge in storage basins.
 Basin #1: _____ ft Basin #2: _____ ft

9.6 Existing sludge depth, if the basins are currently in operation.
 Basin #1: _____ ft Basin #2: _____ ft

9.7 Total design sludge storage: _____ dry tons and _____ cubic feet

10.0 LAND APPLICATION SYSTEM

10.1 Type of land application: Fixed Head Sprinklers Center Pivot Traveling Gun Drip Dispersal
 Subsurface Low Pressure Pipe Other (describe) _____

10.2 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.)

10.3 Type of vegetation: Grass hay Pasture Timber Row crops
 Other (describe)

10.4 Wastewater flow (dry weather) gallons per day: Average annual _____
 Seasonal _____ Off-season _____

10.5 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

10.6 Total irrigation per year (gallons): Design: _____ gal Actual: _____ gal

10.7 Actual months used for irrigation (check all that apply):
 Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

10.8 Land application rate is based on:
 Hydraulic Loading Other (describe) _____
 Nutrient Management Plan (N and P) If N and P is selected, is the plan included? YES NO

INSTRUCTIONS FOR COMPLETING APPLICATION FOR CONSTRUCTION PERMIT – WASTEWATER TREATMENT FACILITIES

All blanks must be filled in when the application is submitted to the Missouri Department of Natural Resources. This includes the **required signature**.

Note: Use the form Application for Construction Permit – Sewer Extension, MO 780-1632, if **only** collection system component(s) are to be constructed. This form is available at dnr.mo.gov/forms/780-1632-f.pdf.

A land disturbance permit is required if construction will result in the disturbance of one or more acres of land. A land disturbance permit is available through the department's ePermitting system at dnr.mo.gov/env/wpp/epermit/help.htm. A permit fee in accordance with 10 CSR 20-6.011(2)(F)1. is required.

After receiving a complete application, the Department enters the application information into the Missouri Clean Water Information System. You may search for the status of a construction permit online at dnr.mo.gov/mocwis_public/applicationInprocessSearch.do.

Part A – Basic Application Information

- 1.0 If any questions in this section are answered no, this application may be considered incomplete and returned to applicant.
- 1.1 Check the appropriate box. If the project is funded with federal or state monies, supply the funding agency name and project number.
- 1.2 Check the appropriate box. Agrichemical facilities complete sections 1.6, 1.10, 2.1, 2.2, 3.1-3.3, 5.0, 6.0, and 7.0.
- 1.3 Check the appropriate box. Provide the date of department approval for the antidegradation report. Include a copy of the approved *Water Quality and Antidegradation Review* with this application. Not every construction project may require an antidegradation review. For more information, guidance documents and forms concerning antidegradation visit dnr.mo.gov/env/wpp/permits/antideg-implementation.htm.
- 1.4 Check the appropriate box and provide the date of department approval. Per 10 CSR 20-8.110(3)(C), facility plans must be approved by the department prior to the submittal of plans and specifications and a construction permit application. "Facility plans must be completed for projects involving wastewater treatment facility projects and projects receiving funding through the grant and loan programs under 10 CSR 20-4" in accordance with 10 CSR 20-8.110(4)(A)4. The department has developed a fact sheet to aid in the development of an approvable facility plan. This document is available online at dnr.mo.gov/pubs/pub2416.htm.
- 1.5 Complete only if No. 1.3 is answered Not Applicable. Check the appropriate box. For wastewater treatment facilities with a design flow under 22,500 gallons per day, or gpd, an engineering report may be required by the department in accordance with 10 CSR 20-6.010(4)(D)1 and 10 CSR 20-8.020(3). The department will require an engineering report for any new wastewater treatment facilities and for any major modifications to an existing wastewater treatment facility.
- 1.6 Check the appropriate box. Provide a copy of the appropriate plans and specifications for department review when applying for a construction permit per 10 CSR 20-8.110(3)(C), 10 CSR 20-8.020(5) and 10 CSR 20-8.020(6). A Missouri registered professional engineering seal, signature and date is required on each sheet of the plans and the cover of the technical specifications.

The department will accept plans and specifications in electronic form on a CD and in the Adobe[®] PDF searchable format. If the plans are scanned, set the resolution to a minimum of 200 dpi at 17 by 22 inches.

Note: Additional sets of plans and specifications may be required by the department for final approval and issuance of the construction permit. See 10 CSR 20-8.110(6)(A)1.

- 1.7 Check the appropriate box. A summary of design shall accompany the plans and specifications when applying for a construction permit, per 10 CSR 20-8.110(5) and 10 CSR 20-8.020(7). A fact sheet to aid in the development of an acceptable summary of design is available online at dnr.mo.gov/pubs/pub2417.htm. For wastewater treatment facilities with a design flow under 22,500 gpd, a summary of design may not be required by the department.
- 1.8 Check the appropriate box. Include the applicable operating permit application when seeking a site-specific operating permit or modification of an existing operating permit. Facilities that qualify for a general operating permit may submit the operating permit application to the appropriate regional office at least 60 days prior to operation.
 - Form B for facilities ≤ 100,000 gpd is available online at dnr.mo.gov/forms/780-1512-f.pdf.
 - Form B2 for facilities > 100,000 gpd is available online at dnr.mo.gov/forms/780-1805-f.pdf.

Include the appropriate fee with your application. For more fee information, visit: <http://s1.sos.mo.gov/cmsimages/adrules/csr/current/10csr/10c20-6.pdf>.

\$200 for modifications to a Publicly Owned Treatment Works (POTW) operating permit accompanied by the appropriate operating permit form per 10 CSR 20-6.011(2)(H), if applicable.

\$100 for modifications of name changes, address changes, or other nonsubstantive changes or for a modification of a general permit accompanied by the appropriate general permit form per 10 CSR 20-6.011(2)(H)1., if applicable.

25 Percent Annual Operating Fee for modifications to a Non-POTW operating permit accompanied by the appropriate operating permit form per 10 CSR 20-6.011(2)(H)2., if applicable.

Annual Operating Fee for issuing a new Non-POTW operating permit accompanied by the appropriate operating permit form, if applicable.

1.9 Check the appropriate box. More information about the Compliance and Enforcement Water Protection Program is available online at dnr.mo.gov/env/wpp/enf/index.html.

1.10 Check the appropriate box. Include the fee with your application.

\$1,000 for a wastewater treatment facility with a design flow of less than 500,000 gpd per 10 CSR 20-6.011(2)(K)1.

\$3,000 for a wastewater treatment facility with a design flow of 500,000 gpd or greater per 10 CSR 20-6.011(2)(K)2.

Note: Incomplete permit applications or related engineering documents will be returned by the department if they are not completed in the time frame established by the department in a comment letter to the project owner. Permit fees for returned applications shall be forfeited. See 10 CSR 20-6.010(4)(E). Permit fees for applications being processed by the department that are withdrawn by the applicant shall be forfeited. See 10 CSR 20-6.011(5)(B).

2.1 Provide the name of the proposed construction project.

2.2 Briefly describe the construction project by providing the number and capacity of each new unit.

2.3 Briefly describe the method of sludge handling, use and disposal at the treatment facility.

2.4 Provide the project design information and when required in the units specified.

A. Provide the current population and the design population to be served by the wastewater treatment facility.

B. Provide the estimated design flow information in accordance with 10 CSR 20-8.110(4)(C)4.A.

Design average flow – The design average flow is the average of the daily volumes to be received for a continuous 12 month period expressed as a volume per unit time. However, the design average flow for facilities having critical seasonal high hydraulic loading periods (e.g., recreational areas, campuses and industrial facilities) shall be based on the daily average flow during the seasonal period. (Expected daily average flow the facility is designed to treat.)

Design peak hourly flow – The design peak hourly flow is the largest volume of flow to be received during a one hour period expressed as a volume per unit time.

Design maximum daily flow – The design maximum daily flow is the largest volume of flow to be received during a continuous 24-hour period expressed as a volume per unit time. (Flow during the peak wet weather event the facility is designed to treat.)

Design Wet Weather Event –The wet weather event chosen for the design.

2.5 Provide the additional project information.

A. Attach a topographic map of the area extending at least one mile beyond the facility property boundaries. This map must show the outline of the facility and the following information. A topographic map is available online at dnr.mo.gov/internetmapviewer or from the Department of Natural Resources' Missouri Geological Survey in Rolla, Mo., at 573-368-2125. (Submittals of more than one map may be necessary to show the entire area.)

1. The area surrounding the wastewater treatment facility, including all unit processes.

2. The major pipes or other structures through which wastewater enters the treatment facility and the pipes or other structures through which treated wastewater is discharged from the treatment facility. Include outfalls from bypass piping, if applicable.

3. The actual point of discharge.

4. Wells, springs, other surface water bodies and drinking water wells that are: 1) within ¼ mile of the property boundaries of the treatment facility and 2) listed in public record or otherwise known to the applicant.

5. Any areas where biosolids produced by the treatment facility are treated, stored, or disposed.

6. If the treatment facility receives waste classified as hazardous under the Resource Conservation and Recovery Act, or RCRA, by truck, rail, or special pipe, show on the map where hazardous waste enters the treatment works and where it is treated, stored or disposed.

7. Outline any wastewater land application sites.

B. Provide a process flow diagram with the influent and effluent design average flow and peak flow capabilities. Also, depict all of the treatment facility components and the corresponding hydraulic capacities of each component. In addition, include all recycle flows in the diagram. If land application is used, depict all irrigation equipment and application sites.

- 2.6 Provide the estimated project construction cost. This information will be useful to the department in conducting affordability analyses.
- 3.0 Complete the Wastewater Treatment Facility information. Include the Missouri State Operation Permit number, outfall number, physical location, and other appropriate contact information.
- 3.1 Provide the project legal description. The department's mapping system is available online at dnr.mo.gov/internetmapviewer.
- 3.2 A Global Positioning System, or GPS, is a satellite-based navigation system. The department prefers that a GPS receiver is used and the displayed coordinates submitted. If access to a GPS receiver is not available, use a mapping system to approximate the coordinates.
- 3.3 Provide the name of the receiving stream(s) to which the discharge is directed and any subsequent tributary until a continuous flowing stream is reached.
- 4.0 Complete Project Owner information. Include the legal name, address, phone number with area code and email address.
- 5.0 Complete Continuing Authority contact information. If same as the Project Owner, write "Same as above".
Include the permanent organization that will serve as the continuing authority for the operation, maintenance and modernization of the wastewater collection system. See 10 CSR 20-6.010(3) for the regulatory requirement regarding continuing authority.
- 5.1 Check the appropriate box. Include a letter signed by the continuing authority (if not same as the project owner) stating they will "accept, operate and maintain" the wastewater treatment facility after successful construction. The continuing authority may also complete the Continuing Authority and Receiving Wastewater Treatment Facility Acceptance form in lieu of a letter.
- 5.2 Complete if the continuing authority is a Missouri Public Service Commission, or PSC, regulated entity. See 10 CSR 20-6.010(3)(B)3 for more information. This information is not necessary for existing wastewater treatment facilities currently permitted with a PSC entity as owner and continuing authority.
- 5.3 Complete if the continuing authority is a property owners association. See 10 CSR 20-6.010(3) (B)5 for more information. This information is not necessary for existing wastewater treatment facilities currently permitted with the property owners association as owner and continuing authority.
- 6.0 Complete Engineer contact information.
- 7.0 All applications must be signed as follows in accordance with 10 CSR 20-6.010(2)(B) and the signatures must be original:
- For a corporation, by an officer having responsibility for the overall operation of the regulated facility or activity or for environmental matters.
 - For a partnership or sole proprietorship, by a general partner or the proprietor.
 - For a municipal, state, federal or other public facility, by either a principal executive officer or by an individual having overall responsibility for environmental matters at the facility.

Part B – Land Application

Complete Part B only if the proposed construction project includes land application of wastewater from a treatment facility.

- 8.0 Provide the applicable Facility Information land application information. Check the appropriate boxes.
- 9.0 Provide the applicable Storage Basins information. Check the appropriate boxes.
- Freeboard – The depth from the top of the berm to the emergency spillway. Minimum depth is one foot.
 - Total Depth – The depth from the top of the berm to the bottom of the basin.
 - Safety Volume – The depth to contain the 25-year, 24-hour storm event. Minimum depth is one foot.
 - Maximum Operating Water Level – The water level at the bottom of the safety volume. Minimum depth is two feet below the top of the berm.
 - Minimum Operating Water Level – The water level above the bottom of the lagoon basin for seal protection. Minimum depth is two feet and may be greater when additional treatment volume is included.
 - Total Depth is from the top of the berm to the bottom of the lagoon basin including freeboard.
- 10.0 Provide the applicable Land Application System information. Check the appropriate boxes.
- 10.8 Check the appropriate box. If the land application rate is based on a Nutrient Management Plan, or N and P, include the plan with this application for department review.

Mail the completed form and applicable fee to the department.

If there are any questions concerning this form, please contact the Department of Natural Resources, Water Protection Program at 800-361-4827 or 573-751-1300 or visit dnr.mo.gov/env/wpp/permits/ww-construction-permitting.htm.