

BUREAU OF WATER PERMITS
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NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
State Pollutant Discharge Elimination System (SPDES)
DISCHARGE PERMIT
Special Conditions (Part 1)

MAR 19 2012

DIVISION OF WATER
RECEIVED

MAR 16 2012

BUREAU OF WATER COMPLIANCE

Industrial Code: 8999
Discharge Class (CL): 09
Toxic Class (TX): N
Major Drainage Basin: 17
Sub Drainage Basin: 01
Water Index Number:
Compact Area:

SPDES Number: NY-0253197
DEC Number:
Effective Date (EDP): 8/01/10
Expiration Date (ExPD): 7/31/15
Modification Date(s): 3/06/12
Attachment(s): General Conditions (Part II 11/90)
SCDHS Schedule A

This SPDES permit is issued in compliance with Title 8 of Article 17 of the Environmental Conservation law of New York State and in compliance with the Clean Water Act, as amended, (33 U.S.C. sec. 1251 et. seq.) (hereinafter referred to as "the Act"). Issuance of this permit does not acknowledge or imply that permittee is in compliance with the requirements of this permit.

PERMITTEE NAME AND ADDRESS:

Attention: Richard J. Blizzard

Name: Willow Ponds on the Sound HOA, Inc
Street: 100 Willow Pond Drive
City: Riverhead State: NY Zip: 11901

is authorized to discharge from the facility described below:

FACILITY NAME AND ADDRESS:

Name: Willow Ponds on the Sound
Location (C,T,V): Brookhaven County: Suffolk
Facility Address: Sound Avenue
City: Riverhead State: NY Zip: 11901

NYTM-E: NYTM-N: 4

From Outfall No.: 001 at Latitude: 40°54'40" & 73°05'02" Longitude"

into receiving waters known as: Groundwater Class: GA

and: (list other Outfalls, Receiving Waters & Water Classifications)

Co. Tax Map #
Dist: 0600 Sect: 18.1
Block: 01 Lot: 22.3


in accordance with the effluent limitations, monitoring requirements and other conditions set forth in Special Conditions (Part I) and General Conditions (Part II) of this permit.

DISCHARGE MONITORING REPORT (DMR) MAILING ADDRESS:

Mailing Name: 4-H Maintenance
Address: 534 Birch Hollow Drive
City: Shirley State: NY Zip: 11949
Responsible Official or Agent: John Hunt Phone: (631) 924-0701

This permit and the authorization to discharge shall expire on midnight of the expiration date shown above and the permittee shall not discharge after the expiration date unless this permit has been renewed, or extended pursuant to law. To be authorized to discharge beyond the expiration date, the permittee shall apply for permit renewal not less than 180 days prior to the expiration date shown above.

Distribution:
Division of Water Bureau of Wastewater Permits, NYSDEC, Albany
Regional Water Manager, NYSDEC, Stony Brook
Regional Permit Administrator, NYSDEC, Stony Brook

Permit Administrator: <u>Walter J. Hilbert, P.E.</u>	
Address: <u>360 Yaphank Avenue</u> <u>Suite 2C</u> <u>Yaphank, NY 11980</u>	
Signature: 	Date: <u>3/06/12</u>

FINAL EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

During the period beginning 8/01/10 and lasting until 7/31/15
the discharge from the permitted facility shall be limited and monitored by the permittee as specified below:

LIMITATIONS APPLY ☒ All Year ☐

Outfall Number 001

EFFLUENT LIMITATIONS

☒ Flow 30 day arithmetic mean 70,000 ☐ MGD ☒ GPD
☐ BOD, 5 - Day 30 day arithmetic mean mg/l and lbs/day (1)
☐ BOD, 5 - Day Daily Maximum mg/l and lbs/day
☐ UOD (2) mg/l and lbs/day
☐ Solids, Suspended 30 day arithmetic mean mg/l and lbs/day (1)
☐ Solids, Suspended Daily Maximum mg/l and lbs/day
☐ Effluent disinfection required: ☐ All Year ☐ Seasonal from to
☐ Coliform, Fecal 30 day geometric mean shall not exceed 200/100 ml
☐ Coliform, Fecal 7 day geometric mean shall not exceed 400/100 ml
☐ Chlorine, Total Residual Daily Maximum mg/l
☒ pH Range 5.5 - 8.5 SU
☐ Solids, Settleable Daily Maximum ml/l
☒ Total Nitrogen Daily Maximum 10 mg/l as N

MONITORING REQUIREMENTS

Parameter	Frequency	Sample Type	Sample Location	
			Influent	Effluent
<input checked="" type="checkbox"/> <u>Flow</u> , <input checked="" type="checkbox"/> <u>GPD</u>	<u>cont. meter</u>			<u>X</u>
<input type="checkbox"/> <u>BOD, 5 - Day, mg/l</u>				
<input type="checkbox"/> <u>Solids, Suspended, mg/l</u>				
<input type="checkbox"/> <u>Coliform, Fecal, No./100 ml(3)</u>				
<input type="checkbox"/> <u>Nitrogen, TKN (as N), mg/l</u>				
<input type="checkbox"/> <u>Nitrogen, Ammonia (as N), mg/l</u>				
<input checked="" type="checkbox"/> <u>pH, SU (standard units)</u>	<u>daily</u>	<u>grab</u>		<u>X</u>
<input type="checkbox"/> <u>Solids, Settleable, ml/l</u>				
<input type="checkbox"/> <u>Chlorine, Total Residual, mg/l(3)</u>				
<input type="checkbox"/> <u>Phosphorus, Total (as P), mg/l</u>				
<input type="checkbox"/> <u>Temperature, Deg. F</u>				
<input checked="" type="checkbox"/> <u>Total Nitrogen (as N), mg/l</u>	<u>monthly</u>	<u>grab</u>		<u>X</u>

NOTES: (1) and effluent value shall not exceed ____% of influent values.

(2) Ultimate Oxygen Demand shall be computed as follows.

UOD = $1 \frac{1}{2} \times \text{CBOD5} + 4 \frac{1}{2} \times \text{TKN}$ (Total Kjeldahl Nitrogen)

(3) Monitoring of these parameters is only required during the period when disinfection is required.

TABLE 3

Process Control Monitoring to be recorded on Wastewater Facility Operation Report (form 92-15-7) and retained for a period of three years.

Parameter	Frequency	Sample Type	Sample Location (4)
<u>X Total flow, MGD</u>	<u>continuous</u>	<u>meter</u>	<u>effluent</u>
<u> BOD5, mg/l</u>			
<u>X Suspended Solids, mg/l - MLSS</u>	<u>1/month</u>	<u>grab</u>	<u>SBR tank</u>
<u> Fecal Coliform, No./100 ml</u>			
<u> Total Coliform, No./100 ml</u>			
<u> Total Kjeldahl Nitrogen, mg/l as N - Hach</u>			
<u>X Ammonia, mg/l as NH3 - Hach</u>	<u>2/week</u>	<u>grab</u>	<u>influent, effluent</u>
<u>X Dissolved Oxygen, mg/l - probe</u>	<u>daily</u>	<u>grab</u>	<u>SBR during aeration</u>
<u>X pH - probe</u>	<u>daily</u>	<u>grab</u>	<u>see note 5</u>
<u>X Settleability Test - 30 min</u>	<u>daily</u>	<u>grab</u>	<u>SBR tank</u>
<u> Residual Chlorine, mg/l</u>			
<u> Phosphorus, mg/l as P</u>			
<u>X Temperature, C - probe</u>	<u>daily</u>	<u>grab</u>	<u>influent, effluent</u>
<u> Total Nitrogen, mg/l as N</u>			
<u>X Visual Observation</u>	<u>daily</u>		<u>influent, effluent</u>
<u>X Nitrate & Nitrite as N - Hach</u>	<u>2/week</u>	<u>grab</u>	<u>influent, effluent</u>

Groundwater Monitoring to be reported on Discharge Monitoring Report Starting 8/01/10 and every third month thereafter.

Parameter	Frequency	Sample Type	Sample Location (7)
<u>X Water Level (ft above MSL)</u>	<u>quarterly</u>	<u>Measure</u>	<u>MW-1,-2, -3</u>
<u>X Total Kjeldahl Nitrogen (mg/l)</u>	<u>quarterly</u>	<u>Bailed (6)</u>	<u>MW-1,-2, -3</u>
<u>X Ammonia (mg/l)</u>	<u>quarterly</u>	<u>Bailed (6)</u>	<u>MW-1,-2, -3</u>
<u>X Nitrate (mg/l)</u>	<u>quarterly</u>	<u>Bailed (6)</u>	<u>MW-1,-2, -3</u>
<u>X Nitrite (mg/l)</u>	<u>quarterly</u>	<u>Bailed (6)</u>	<u>MW-1,-2, -3</u>
<u>X Total Nitrogen (mg/l)</u>	<u>quarterly</u>	<u>Bailed (6)</u>	<u>MW-1,-2, -3</u>
<u>X Total Dissolved Solids (mg/l)</u>	<u>quarterly</u>	<u>Bailed (6)</u>	<u>MW-1,-2, -3</u>

Notes: (4) Process control monitoring locations shown on page(s) 4.

(5) Influent, effluent, SBR during settling.

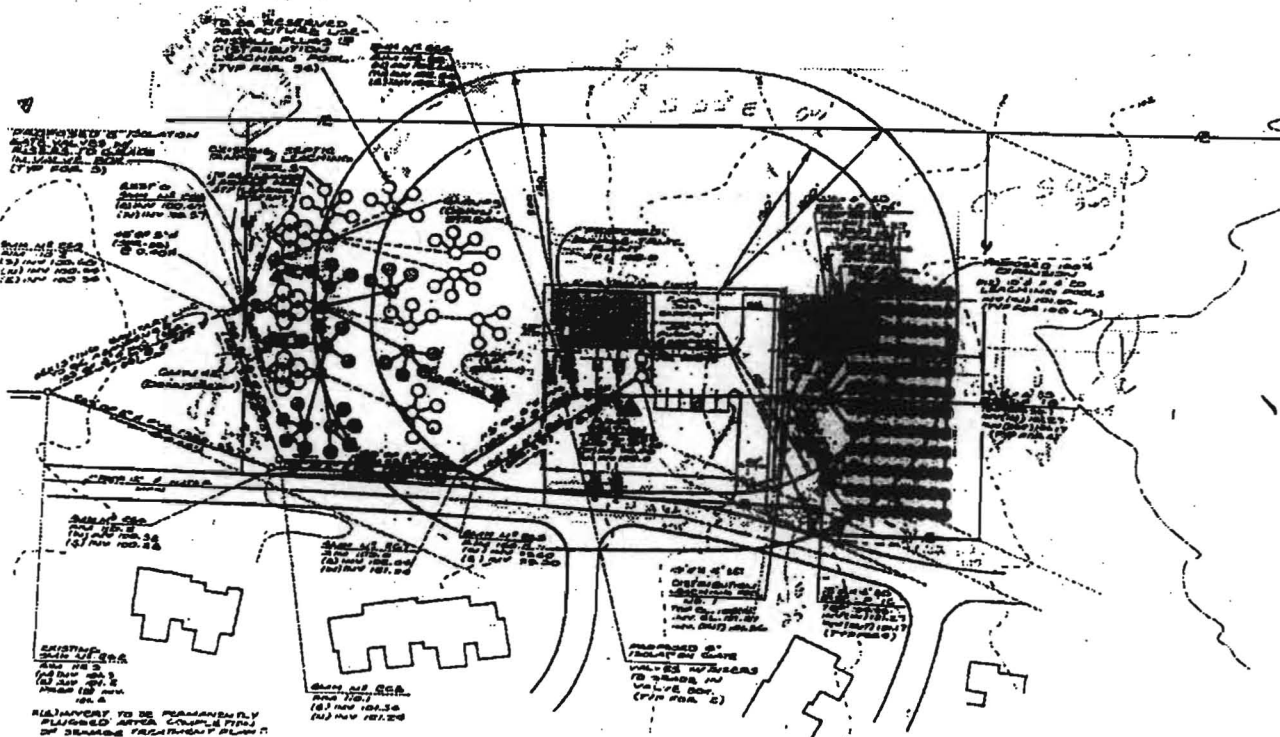
(6) Three well casing volumes must be evacuated prior to sampling all parameter except water level.

(7) Groundwater sampling location shown on page(s) 4.

(8) In addition to the above requirements, wastewater disinfection will also be required if facility utilizes open recharge beds and it is determined, by the Suffolk County Department of Health Services (SCHDS) acting as the Agent of the NYSDEC, to be necessary for control of odors or other health-related purposes. Accordingly, supplies and equipment necessary to assure proper disinfection shall be kept available and operable at all times by the permittee, and tested in manner and frequency as directed by SCDHS.

PROCESS CONTROL AND GROUNDWATER MONITORING LOCATIONS

Permittee shall take samples and measurements to meet the monitoring requirements at the location(s) indicated below: (Show locations of outfalls with sketch or flow diagram as appropriate).

PROCESS CONTROL AND GROUNDWATER MONITORING LOCATION DESCRIPTION

Influent (INF): sample taken prior to SBR tank.

SBR tank (SBR): sample taken from SBR tank.

Effluent (EFF): sample taken after SBR tank.

MW-1: upgradient well

MW-2: downgradient well

RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS

- a) The permittee shall also refer to the General Conditions (Part II) of this permit for additional information concerning monitoring and reporting requirements and conditions.
- b) The monitoring information required by this permit shall be summarized, signed and retained for a period of three years from the date of the sampling for subsequent inspection by the Department or its designated agent. Also;

[X] (if box is checked) monitoring information required by this permit shall be summarized and reported by submitting completed and signed Discharge Monitoring Report (DMR) forms for each 1 month reporting period to the locations specified below. Blank forms are available at the Department's Albany office listed below. The first reporting period begins on the effective date of this permit and the reports will be due no later than the 28th day of the month following the end of each reporting period.

Send original (top sheet) of DMR to:
Dept. of Environmental Conservation
Division of Water
Bureau of Wastewater Facilities Op.
625 Broadway Avenue
Albany, New York 12233-1705
Phone: (518)457-3790

Send second copy (third page) of DMR to:
Suffolk County Dept. of Health Services
360 Yaphank Avenue-Suite 2C
Yaphank, NY 11980
Attn: Walter Hilbert, P.E.
Please send a copy of the lab analysis
with SCDHS DMR.

Send first copy (second sheet) of DMR to:
Dept. of Environmental Conservation
Regional Water Engineer
Building 40, SUNY Stony Brook
Stony Brook, NY 11790-2356

- c) A monthly "Wastewater Facility Operation Report..." (form 92-15-7) shall be submitted (if box is checked) to the [] Regional Water Engineer and/or [] County Health Department or Environmental Control Agency listed above.
- d) Noncompliance with the provisions of this permit shall be reported to the Department as prescribed in the attached General Conditions (Part II).
- e) Monitoring must be conducted according to test procedures approved under 40 CFR Part 136, unless other test procedures have been specified in this permit.
- f) If the permittee monitors any pollutant more frequently than required by the permit, using test procedures approved under 40 CFR Part 136 or as specified in this permit, the results of this monitoring shall be included in the calculations and recording of the data on the Discharge Monitoring Reports.
- g) Calculation for all limitations which require averaging of measurements shall utilize an arithmetic mean unless otherwise specified in this permit.
- h) Unless otherwise specified, all information recorded on the Discharge Monitoring Report shall be based upon measurements and sampling carried out during the most recently completed reporting period.
- i) Any laboratory test or sample analysis required by this permit for which the State Commissioner of Health issues certificates of approval pursuant to section five hundred two to the Public Health Law shall be conducted by a laboratory which has been issued a certificate of approval. Inquiries regarding laboratory certification should be sent to the Environmental Laboratory Accreditation Program, New York State Health Department Center for Laboratories and Research, Division of Environmental Sciences, The Nelson A. Rockefeller Empire State Plaza, Albany, New York 12201.

**PRIVATE SEWAGE TREATMENT PLANT
SPECIAL CONDITIONS
SPDES PERMIT # NY-0253197
FACILITY NAME: Willow Ponds on the Sound**

1. In accordance with the State Environmental Conservation Law (ECL 17-0511), the use of existing or new outlets or point sources, which discharge sewage, industrial wastes or other wastes into waters of this state is prohibited unless such use is in compliance with all standards, criteria, limitations, rules and regulations promulgated or applied by the New York State Department of Environmental Conservation (NYSDEC).
2. In the event that the Sewage Treatment Plant (STP) serves or is intended to serve more than one separately owned property, there shall be in effect a valid contract between the Permittee and Suffolk County Sewer Agency, or its successor agency, pertaining to the construction, operation, and maintenance of Permittee's existing, new, improved or expanded sewage disposal system.
3. Should there be any conflict between the terms of the aforesaid contract and the terms of this Permit, the terms of this permit shall govern. Should any such conflicts require resolution, any resolution requiring the modification of this permit in lieu of modification of the contract shall be approved by NYSDEC and the Suffolk County of Health Services (SCDHS).
4. At least thirty (30) days prior to the operation of a new and/or modified facility, or sixty (60) days from the issuance of this permit for an existing facility, Permittee shall submit for approval to the SCDHS, an Operation and Maintenance Manual which meets the NYSDEC and SCDHS requirements for such documents, which shall be the primary basis for budgeting STP operation, maintenance, and replacement costs. A copy of the approved Manual shall be provided to all persons involved in the operation and maintenance of this STP. The manual shall be revised and updated whenever modifications are made to the costs, equipment or operation of the STP, or when directed by NYSDEC or SCDHS.
5. At least thirty (30) days prior to the operation of a new or modified facility, Permittee shall provide to NYSDEC and SCDHS a sealed certification from a licensed Professional Engineer stating that the construction was in accordance with the approved plans and specifications, and that the facility is completed and operational, as required by 6NYCRR652.8.
6. The STP shall be under the responsible supervision of an appropriately certified New York State operator at all times. The correct operator certification of this STP is as specified in 6NYCRR650. The minimum coverage for this STP is that it must be visited by the certified operator, or someone who is directly supervised by the certified operator, for a minimum of 3 hours every day. The minimum coverage may be modified, upward or downward, in accordance with approved Operation and Maintenance Manual. Sufficient time shall be spent each day to:
 - a) inspect all treatment plant components and equipment for proper operation;
 - b) collect samples/run tests/record data;
 - c) perform maintenance/cleaning;
 - d) make process adjustments.
7. Permittee shall provide the SCDHS with proof, in the form of contracts or other agreements, that it has retained the services of an operator certified pursuant to 6NYCRR 650 including staffing required to operate the system in accordance with item (6), above, or its approved Operations and Maintenance Manual. Said proof shall be provided:
 - a) in the case of new and/or modified facilities, thirty (30) days prior to operation;
 - b) in the case of existing facilities, sixty (60) days from the date of issuance of this permit;
 - c) in the case of a change of operator, immediately.

8. Permittee shall provide the NYSDEC and SCDHS with a letter from a NYS licensed professional engineer indicating that the engineer is familiar with the system and prepared to provide timely engineering services that may be required to assure compliance with this permit. Said proof shall be provided as in 7(a-c), above.
9. Financial Assurances.
 - a. For new or substantially modified facilities, at least thirty (30) days prior to the operation of such facilities, Permittee shall provide to NYSDEC and SCDHS:
 - i. documentation to show that the Permittee has established an Operating Fund as security for the routine operation and maintenance expense of the sewerage facilities. Such fund shall be kept at a monetary level equal to the estimated operation and maintenance costs of the sewerage facilities for one year, based on the estimate of the professional engineer retained pursuant to paragraph (8) above, and as set forth in the approved Operations and Maintenance Manual referred to in paragraph (4) above. The monetary level of this fund will be adjusted to conform with approved changes in the Manual. The NYSDEC and SCDHS shall have authority to review the amount of funds so contributed, and modify said amount. At no time shall the balance of the Operating Fund be less than the sum required to cover the estimated operation and maintenance costs of the sewerage facilities for one (1) calendar year. Any interest earned on the Operating Fund shall remain on deposit in said fund, to be used in a manner consistent with the purpose of the fund;
 - ii. documentation to show that the Permittee has established a Capital Fund to finance repairs and replacements to the sewerage facilities. Such fund shall be established with an initial deposit, in an amount determined by SCDHS and/or NYSDEC, sufficient to finance the estimated costs of repairing and/or replacing any component of the sewerage facilities with a useful life greater than 1 year. Any sum expended from the Capital Fund shall be replaced within 12 months. The NYSDEC and SCDHS shall have authority to review the amount of funds so contributed, and to modify said amount. Any interest earned on the Capital Fund shall remain on deposit in said fund, to be used in a manner consistent with the purpose of the fund.
 - b. For existing facilities, within two (2) years from the date of issuance of the permit, Permittee shall provide to NYSDEC and SCDHS:
 - i. documentation as specified in paragraph 9(a) (i) above.
 - ii. documentation as specified in paragraph 9(a) (ii) above.
 - c. By February 28th of each year following the issuance of this permit, Permittee shall provide NYSDEC and SCDHS with an Annual Report of Finances, prepared by an accountant, describing the status of the Operating Fund to finance the routine operation and maintenance and the status of the Capital Fund to finance additions, repairs, and replacements to the sewage disposal system. Said report shall (i) show all activity for the previous calendar year in both the Operating Fund and Capital Fund, and (ii) show all expenditures made for the operation and maintenance of the sewerage facilities. The amount of money to be maintained in both the Operating Fund and Capital Fund by the permittee may be modified by the SCDHS and/or the NYSDEC.

- d. Should NYSDEC, SCDHS, or their representatives so request, the permittee shall, at permittee's sole cost, expense and effort, provide NYSDEC, SCDHS or their representative, with financial information detailing all sums collected and/or receivable by or on behalf of the permittee, and all expenses made and/or payable by or on behalf of the permittee, in connection with the sewage treatment plant provided for herein, including, but not limited to, information relating to the operation, maintenance, and repair of the plant, and information relating to any taxes or other assessments on the plant site.
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10. The requirements of these special conditions to submit various documents do not supersede the Permittee's obligation to meet other requirements of Part I or II of this permit.
 11. In the event of transfer of ownership, or responsibility for construction, or operation and maintenance, the NYSDEC and SCDHS must be notified at least sixty (60) days prior to such transfer, and the conditions governing transfer of a SPDES permit shall be fully complied with. In such case, NYSDEC and/or SCDHS may require a new SPDES permit. Any SPDES permit issued to a transferee may contain terms in addition to, and/or different from, those in this permit. In the event of transfer, all funds specified in paragraph nine (9), above, shall be transferred to the new owner.
 12. Permittee shall not obtain the return or release of any financial instrument securing integrity of construction and/or satisfactory operation and maintenance without prior written approval of the NYSDEC or the SCDHS, and if applicable, the Suffolk County Sewer Agency.